RETU Asthma Pathway

ED Evaluation

Required testing prior to RETU admission

None

Not appropriate for RETU

- ventilatory support required
- peak flow < 40% of predicted after ED treatment
- oxygen sat < 92%
- respiratory distress after ED treatment (at least 3 albuterol nebs)

RETU Intake Evaluation

(do not repeat testing if done in ED)

Exam Focus

- Pulmonary
- Cardiac

Initial Testing

- Labs: as clinically indicated
- Imaging: CXR
- ECG: as clinically indicated

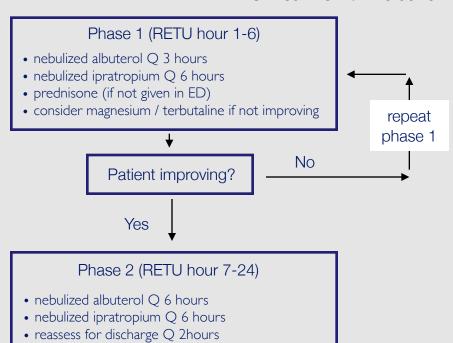
Monitoring

- pulse ox as indicated
- peak flow after each neb

Consults

 pulmonary as clinically indicated

RETU Treatment / Evaluation



Disposition Guidelines

Discharge from RETU

- · wheeze absent or at baseline
- treatment response sustained for I hour
- resolution of symptoms
- pulse ox > 92% with exertion

Admission to Hospital

- symptoms worsening or failing to improve
- pulse oximetry < 92% with exertion
- persistent tachypnea / respiratory distress