

	<b>PEDIATRIC RESPIRATORY PR-01</b>	<b>RESPIRATORY ASSESSMENT</b>	<b>Page 1 of 1</b> <b>Last Revision:</b> <b>04/01/2017</b>
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### History and Physical:

Historical Findings	Physical Findings
<ul style="list-style-type: none"> <li>▪ Use of inhaled medications, steroids, diuretics, antihypertensive medications</li> <li>▪ Fever</li> <li>▪ Productive cough</li> <li>▪ Recent surgery</li> </ul>	<ul style="list-style-type: none"> <li>▪ Dyspnea, tachypnea</li> <li>▪ Cyanosis</li> <li>▪ Edema (pulmonary, pedal, ascites, perisacral)</li> <li>▪ Wheezing, rales, rhonchi, absent/decreased breath sounds, stridor</li> <li>▪ Use of accessory muscles</li> <li>▪ Chest pain</li> <li>▪ Bronchoconstriction</li> </ul>

### Assessment:

- C.A.B.C.
- Secondary Assessment
- Vital Signs (orthostatic)
- BGL
- Temperature
- Lung sounds
- GCS
- OPQRST
- ASPN
- SAMPLE
- Airway assessment

### Differential Diagnoses:

- Consider all possible causes and refer to appropriate protocol:
  - Allergic reaction
  - Asthma
  - Airway obstruction (Croup/Epiglottitis/Foreign Body)
  - Pneumonia
  - Pneumothorax
  - Pulmonary edema