



**PEDIATRIC RESPIRATORY  
PR-05**

**WHEEZING/STRIDOR**

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Last Revision:  
12-5-2018

**History and Physical:**

| Historical Findings   | Physical Findings   |
|---|---|
| <ul style="list-style-type: none"><li>History of asthma</li></ul> | <ul style="list-style-type: none"><li>Dyspnea with wheezing or prolonged expiratory phase</li></ul> |

**Assessment:**

- Respiratory Assessment
- Differential Diagnoses: Asthma, Bronchiolitis, Pneumonia, Epiglottitis, Croup

**Clinical Management Options:**

| Interventions   | Pharmacology  |
|---|---|
| <ul style="list-style-type: none"><li>Oxygen therapy as appropriate</li><li>Vascular Access</li><li>Fluid Bolus PRN<ul style="list-style-type: none"><li>Assess for pulmonary edema</li></ul></li><li>Noninvasive ventilation</li></ul> | <ul style="list-style-type: none"><li><b>Albuterol</b> 2.5 mg PRN</li><li><b>Epinephrine</b> 1:1000 0.15mg IM<ul style="list-style-type: none"><li>For severe dyspnea or near respiratory failure</li></ul></li><li><b>Nebulized Epinephrine</b> 1:1000 1mg PRN<ul style="list-style-type: none"><li>For Croup or Epiglottitis</li><li>Dilute in 3ml Saline</li></ul></li><li><b>Methylprednisolone</b> 2 mg/kg IV/IO<ul style="list-style-type: none"><li>For wheezing</li></ul></li></ul> |

**Additional Information:**

- Croup is a viral infection usually seen in children 18 months – 3 years of age
- Epiglottitis is a bacterial infection often seen in children 3-7 years of age