



**History and Physical:**

<b>Historical Findings</b>	<b>Physical Findings</b>
<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
- BGL
- Temperature
- Lung sounds
- GCS
- OPQRST
- ASPN
- SAMPLE
- Capnography
- 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

**Additional Information:**

**Mallampati Classification:**

- Class I: soft palate, fauces, uvula, pillars visible
- Class II: soft palate, fauces and uvula visible
- Class III: soft palate, base of uvula visible
- Class IV: soft palate not visible