Pediatric respiratory emergencies by type



Always start with the basics









Upper airway obstruction

Croup

- Epinephrine (nebulized)
- Corticosteroids

Anaphylaxis

- Epinephrine (IM)
- Albuterol
- Antihistamines
- Corticosteroids

Foreign body obstruction

- Clear the airway
- Position of comfort (if moving air)
- Speciality consult

Lower airway obstruction

Asthma

- Albuterol + ipratropium
- Corticosteroids
- Subcutaneous epinephrine
- Magnesium sulfate
- Terbutaline

Bronchiolitis

- Nasal suctioning
- Bronchodilator

Disordered work of breathing

Intracranial pressure increase

- Avoid hypoxemia
- Avoid hypercarbia
- Avoid hyperthemia

Neuromuscular

 Ventilation support if applicable

Overdose/Poisoning

- Individual antidote if known or available
- Contact poison control for specific treatment

Lung tissue disease

Pulmonary edema

- Consider ventilation support
- Consider PEEP
- Vasoactive support
- Diuretic

Pneumonia

- Albuterol
- Antibiotics (as indicated)
- CPAP if needed

American Heart Association 2015 Handbook of Emergency Cardiovascular Care for Healthcare Providers, November 2015, American Heart Association ISBN 978-1-61669-397-8, Pages 85 Pediatric Advanced Life Support Provider Manual, American Heart Association, October 2011, ISBN 978-1-61669-112-7, pages 43-49

