

**RESPIRATORY EMERGENCIES**  
**R-9 / TOXIC GAS INHALATION**

**MARCH**

**2007**

**PRIORITIES**

- ABCs
- Determine degree of physiologic distress
- Evaluate respiratory rate, use of accessory muscles, cyanosis, ventilatory effort, level of consciousness
- Maintain airway, provide oxygen and ventilatory support PRN
- Early transport/ Hospital notification (after initiating therapy, if appropriate)
- **EARLY CONTACT OF RECEIVING HOSPITAL.**

- Stabilize airway;
- Remove patient from toxic environment with attention to safety of rescue personnel
- **OXYGEN** – non-rebreather mask; assist ventilations if necessary for SEVERE respiratory distress, cyanosis, accessory muscle use and/or abnormal skin signs.
- Cardiac monitor
- **IV** access **TKO**;
- If **WHEEZING**, **ALBUTEROL** 2.5 mg by HHN or BVM; may repeat. x 2.
- **BASE PHYSICIAN CONTACT FOR ADDITIONAL DRUG THERAPY.**

**DISRUPTED COMMUNICATIONS**

**In the event that a Solano County EMT-P is UNABLE to make physician contact for orders, the paramedic MAY NOT utilize those areas of the protocol needing physician direction and MUST TRANSPORT IMMEDIATELY TO THE CLOSEST FACILITY.**