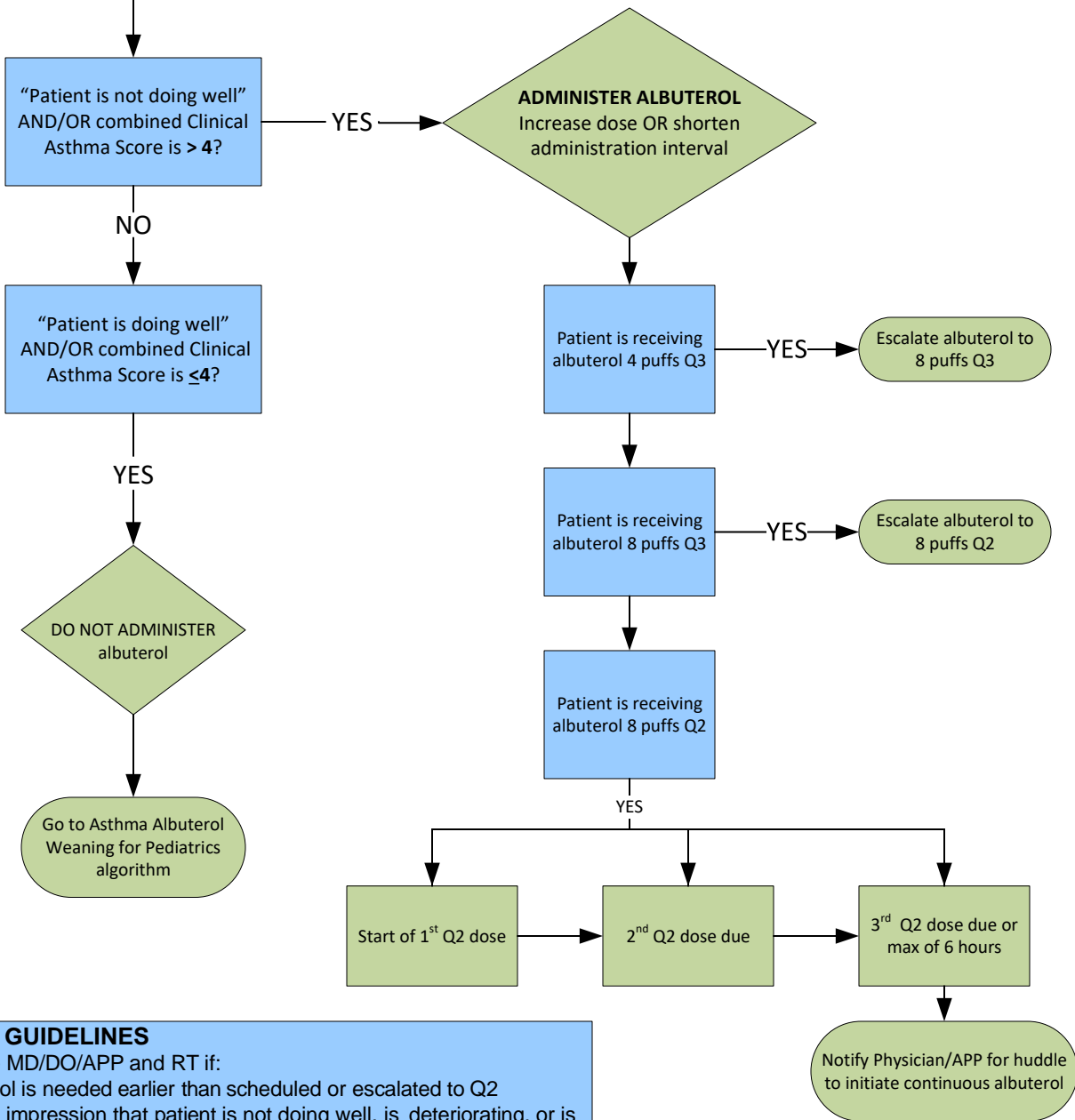


Asthma Albuterol Escalation for Pediatrics

To determine whether albuterol should be given earlier than scheduled, evaluate the patient for:
Clinical impression
Clinical Asthma Score



GENERAL GUIDELINES

1. Notify the MD/DO/APP and RT if:
 - a. Albuterol is needed earlier than scheduled or escalated to Q2
 - b. Clinical impression that patient is not doing well, is deteriorating, or is not improving as expected while receiving albuterol
2. Within initial 24 hours of exacerbation, patient may benefit from the addition of ipratropium bromide.
3. PICU transfer indications include:
 - a. Requirements of supplemental oxygen >10 LPM by non-rebreather face mask
 - b. Progressive pneumomediastinum or pneumothorax
 - c. Patients has apneic episodes
 - d. CBG with a pCO₂>45 mm Hg or trending towards hypercapnia in serially obtained blood gases
 - e. Any change in mental status
4. This algorithm was designed to help facilitate the albuterol escalation process, but it may not apply to all patients with asthma
5. If the clinical impression does not support the decision recommended by this algorithm, notify the Physician/APP. In general, the clinical impression overrules the escalation protocol.

Clinical Asthma Score			
Score	0	1	2
RR (age 1-5)	<40	40-60	>60
RR (age >5)	<25	25-35	>35
Wheezing	None	Expiratory Only	Insp and Exp or Markedly Decreased
Retraction	None	Subcostal Only	Subcostal and Intercostal
Observed Dyspnea	None	Mild	Marked
I:E Ratio	I > E	I = E	I < E
Respiratory Distress: 1-3 Mild, 4-6 Moderate, 7-10 Severe			