

Emergency protocol for treating respiratory distress in undesignated students

Is this SEVERE respiratory distress?

- Struggling to breathe or gasping
- Difficulty speaking (cannot speak in full sentences)
- Blueness around the lips or fingernails (*might look gray or "dusky"*)
- Chest retractions (*chest/neck are pulling in*)
- Use of accessory muscles (*stomach muscles are moving up and down*)
- Student appears weak, limp, or overly tired
- Severe anxiety, panic, or confusion

YES

CALL 911
and follow the steps for
severe respiratory
distress below

Steps for severe respiratory distress

1. Immediately administer 8 puffs of albuterol with valved holding chamber, each puff 15-30 seconds apart.
2. Restrict physical activity, encourage slow breaths and allow the student to rest. **Do not recline the student or leave them alone.**
3. Instruct office staff to contact the student's parents and school nurse and/or principal.
4. Document the time 911 was called.
5. Document the time EMS services arrived and the name of the EMS provider.
6. If EMS has not yet arrived, observe individual again after 15 minutes.

No improvement after 15 minutes and EMS has not yet arrived

1. Repeat 8 puffs of albuterol with valved holding chamber, each 15-30 seconds apart.

If the student shows improvement

1. Wait for EMS to arrive and assess the individual. No additional albuterol to be given unless symptoms worsen again.

NO

Steps for mild-to-moderate respiratory distress

1. Administer 4 puffs of albuterol with valved holding chamber, each 15-30 seconds apart.
2. Restrict physical activity and allow the student to rest. **Do not recline the student or leave them alone.**
3. Instruct office staff to contact the student's parents and school nurse and/or principal.
4. Observe individual again after 10-15 minutes.

If there is NO improvement after 15 minutes:

1. Administer 4 more puffs of albuterol with valved holding chamber, each 15-30 seconds apart.
2. **If there is still no improvement, immediately call 911 AND follow steps for severe respiratory distress.**

If the student shows improvement:

1. Keep the student in the health office until their breathing returns to normal, do not leave student alone.
2. Follow the steps for post-incident documentation below.

Improvement:

- Individual should demonstrate the following:
- No more chest tightness or shortness of breath
 - Can walk and talk easily.



Steps for post-incident documentation:

1. Document what happened in the student's school health record.
2. Follow-up with the school nurse and principal.
3. Follow-up with the student's parent or caregiver.

For treating emergency respiratory distress

This protocol is intended for use by trained personnel to respond to an undesignated student experiencing respiratory distress while at school. It is not intended to replace a student's Asthma Action Plan. Instead, it should be used when a student doesn't have an Asthma Action Plan on file or if the student does not have a prescribed short-acting bronchodilator inhaler (albuterol inhaler) are not available or easily accessible.