

ALS - Asthma Script.

GLOBAL MARK			
CLEAR PASS	BORDERLINE PASS	BORDERLINE FAIL	FAIL

Criteria

Introduces Self, confirms patient identify, Washes hands,	2, 1
PPE	1
Confirms team competencies	1
Explains Plan	
Summons appropriate help	
A – applies 15L O2	
B – quick assessment Quiet chest, not talking, bilateral breath sounds Notes low sats, high RR	
C –notes BP, cannulates, sends bloods, asks for ABG	
D – GCS 12, Checks BM	
E – Brief Assessment	
Treats things appropriately Starts back to back nebulisers, gives 200mg IV hydrocortisone 2g IV MgSO4,	
Re-assesses	
Recognises blood gas shows -life-threatening asthma	
Asks for IV salbutamol 250mcg IV bolus. Then 3-20mcg/min infusion.	
Verbalises need for urgent intubation	
Recognises cardiac arrest	
Starts CPR 30:2	
Manages airway – BVM and adjuncts	
Applies defibrillator pads if not already done so	
Recognises rhythm	
Considers Reversible Causes Hypoxia, Hypovolaemia, Hypothermia, Hyperkalaemia Thrombosis, Tamponade, Toxins, Tensions Pneumothorax	
Continues CPR	
Recognizes Tension pneumothorax	
Considers ECHO in life support	
Minimizes interruptions to CPR	
Once intubated, ROSC achieved	
Knows optimal ventilatory settings for asthmatic Reversed I:E ratio 1:4 Permissive hypercapnia Little or no PEEP Wary for gas trapping	
Plans for chest drain	
Thanks team	

Plans for disposition of patient	
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Tom Bircher 2019