

Marquette County EMS Medical Control Authority

Albuterol Nebulizer Procedure

Part 1, Sect. 2
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Note: This procedure will apply once the determination has been made that the patient is a candidate for Albuterol therapy.

1. A complete set of vital signs must be obtained for a baseline, (b/p, pulse, respirations, lung sounds).
2. Explain procedure to patient/family. **Determine any known Allergies.**
3. The total volume of Albuterol/diluent to be used is 3.0 ml. The appropriate dose should be measured by syringe:

Adult dose:	2.5 mg (3.0 ml)
Child dose:(over 5 yrs)	2.5 mg (3.0 ml)
Child dose:(5 yrs and under)	1.25 mg (1.5 ml)
4. Place the appropriate volume of medication in the lower half of the Nebulizer unit. Then screw the upper half of the unit in place.
5. Attach the Nebulizer to the base of the T-piece. Then attach the mouthpiece to the T-piece.
6. Attach one end of the oxygen tubing to the base of the Nebulizer and the other end of the oxygen tubing to the oxygen regulator.
7. Set the oxygen liter flow at a sufficient level to administer the solution, or use the liter flow recommended by the nebulizer manufacturer.
8. Instruct the patient to breathe normally through the mouthpiece, taking a deep inspiration every 4 or 5 breaths.
9. Continue the treatment until all the medication has been delivered through the Nebulizer. You may need to gently tap the reservoir once or twice during the treatment to redistribute the medication.
10. Obtain and record another complete set of vital signs after completion of the treatment. If, at any time during the treatment, you note a pulse increase of more than 30 beats above the pre-treatment measurement or the pulse rate exceeds 140, stop the treatment and contact medical control.
11. Initiate 2nd and 3rd Nebulizer treatment if patient remains symptomatic. Treatments should be maintained in a continuous nature as long as patient remains symptomatic.

Special Notes:

12. In intubated patients it may be necessary to connect the T-piece to the endotracheal tube, and BVM the individual while assisting respirations.
13. Don't allow a Nebulizer treatment to delay the transport of a patient who is experiencing severe respiratory distress; it should be administered while enroute to the hospital.
14. Nebulizer treatments with 100% O₂ may cause respiratory depression in COPD patients. Monitor respirations closely.

Authentication and Approval:

Marquette County EMS Medical Director
Initial Approval: 7/17/97, 5/8/98, 9/10/02

Date