Nebulized Bronchodilators

Purpose: Proper administration of nebulized bronchodilator medications.

Indication

1. Patient with respiratory distress and wheezing.
2. When indicated under specific treatment protocol.

Pre-Medical Control

EMT/SPECIALIST/PARAMEDIC

1. Obtain vital signs and lung sounds.
2. Place the appropriate volume of medication in the lower half of the nebulizer unit. Then screw the upper half of the unit in place.
3. Attach the nebulizer to the base of the T-piece. Then attach the mouthpiece to the T-piece or connect neb chamber to NRB mask.
4. Attach one end of the oxygen tubing to the base of the nebulizer and the other end of the oxygen tubing to the oxygen source.
5. Set the oxygen liter flow at 6-7 L/min.
6. Instruct the patient to breathe normally through the mouthpiece, taking a deep inspiration every 4 or 5 breaths.
7. 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 redispurse the medication.
8. Obtain and record another complete set of vital signs and lung sounds after completion of the treatment.

Medication Dosage

EMT/SPECIALIST

1. Administer Albuterol 2.5 mg/3 ml NS nebulized, if available, repeat as indicated.

PARAMEDIC

1. Administer treatment number one as Albuterol 2.5 mg/3 ml NS and Ipratropium 500 mcg/3 ml NS nebulized if wheezing or airway constriction.
2. Per MCA selection administer additional bronchodilator treatments as Albuterol 2.5 mg/3 ml NS nebulized OR Albuterol 2.5 mg/3 ml NS and Ipratropium 500 mcg/3 ml NS nebulized, as needed, if wheezing or airway constriction persists.

ADDITIONAL BRONCHODILATOR TREATMENTS OPTIONS

☐ Albuterol 2.5 mg/3 ml NS nebulized

OR

☐ Albuterol 2.5 mg/3 ml NS and Ipratropium 500 mcg/3 ml NS nebulized

Pediatric Considerations

1. Infants and small children may not be able to use adult mouth piece and may need to use blow-by.