

Indications:

- Relief of bronchospasm in reversible obstructive airway disease (i.e.-Asthma and COPD)
- Treatment of *hyperkalemia* = Beta2-adrenergic agonists will promote cellular reuptake of potassium.

Precautions/Contraindications:

- Known hypersensitivity to albuterol
- Cardiac arrhythmias associated with tachycardia

Dosing:

ASTHMA/COPD and HYPERKALEMIA

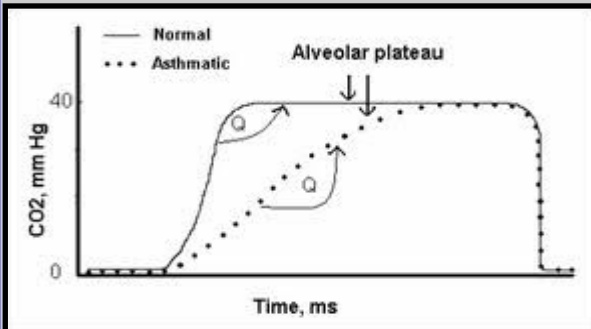
ADULTS= 2.5mg NEB with 6-10 LPM O₂

PEDS=

< 6 MONTHS 1.25mg (1/2 of a prefilled vial) NEB with 6-10 LPM O₂

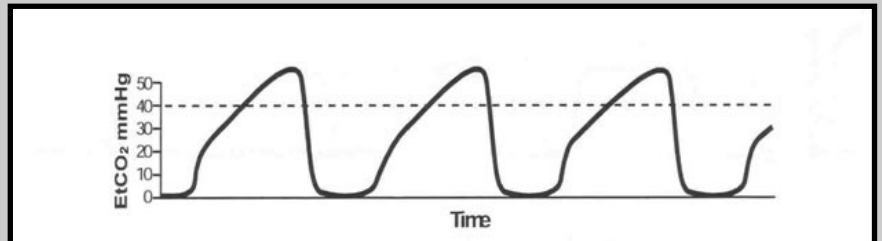
> 6 MONTHS 2.5mg NEB with 6-10 LPM O₂

**May repeat up to 3 times.*



Scenario:

18 y/o Male c/o dyspnea x4 hours.



Pt states he ran out of his albuterol

inhaler yesterday. Pt denies any other symptoms. Capnography waveform to the right is representative of pt's condition.

RR 36, HR 110, SPO₂ 92% RA, ETCO₂ 55 mmHg, BP 136/80

Plan of care:

Frequent Vital Signs

Capnography waveform monitoring, confirm bronchoconstriction

Obtain SAMPLE history to rule out contraindications

Albuterol 2.5mg NEB with 6-10 LPM O₂, repeat up to 3 times

IV access

ECG monitoring

*For pt with status asthmaticus refractory to Albuterol, consider Epinephrine IM, Magnesium Sulfate IV, corticosteroids IV, BIPAP, or intubation.