

Bronchospasm Management

Manifestations

Respiratory

- Wheezing
- Prolonged expiratory phase
- Hypercarbia
- Decreased End Tidal CO₂
- Air Hunger in awake patient

Immediate Actions

- Administer 100% O₂
- Auscultate chest
 - Wheezing may be absent in severe cases
- Remove Suspected Initiator/Antigen
 - Blood Products, Antibiotic, NMR
- Check ETT patency/depth
- Inform Surgeon(s)
- Administer epinephrine IV for hypotension or severe bronchospasm
 - 10-50 mcg increments repeated as necessary
 - 500-1000 mcg boluses for shock
 - Optimize vent I:E ratio

Treatment for Bronchospasm

- Increase Fi Inhalational Agent
- Administer Inhaled Bronchodilators
- Administer IV Bronchodilators
- Administer corticosteroids