

PULMONARY EDEMA

1. Sit patient up, if possible.
2. Apply cardiac monitor.
3. Establish IV/IO access.
4. Administer high flow **O₂**.
5. If respiratory distress is present, consider **CPAP**.
6. If respiratory distress increases and/or the patient's LOC decreases, consider **endotracheal intubation** and PEEP valve.
7. If BP > 100 systolic, administer 0.4 mg of **nitroglycerin** SL and consider repeating x2, provided systolic BP remains > 100.
8. If BP < 90 mmHg and any symptoms or signs of shock are present, administer dopamine at 5-10 mcg/kg/minute IV/10.