Definition
• Difficult or labored breathing is also known as respiratory distress.
• Apneic episodes are included (no breathing for more than 20 seconds).
• Triage Aid: For complaints of noisy breathing, always listen to the child. Have the caller place the phone near the child’s mouth. Do not trust the caller’s imitation of the sound.
• Caution: You must rule out respiratory distress in these calls.

Respiratory Distress Severity Is Defined As:
• **Mild:** No shortness of breath (SOB) at rest, mild SOB with walking, speaks normally in sentences, can lie down flat, no retractions. Rapid respiratory rate (tachypnea). Mild stridor or wheezing may also be present.
• **Moderate:** SOB at rest, speaks in phrases, prefers to sit (can’t lie down flat), mild retractions. If present, stridor or wheezing are now tight and easily heard with each breath.
• **Severe:** Severe SOB at rest, speaks in single words, struggling to breathe, severe retractions. (Exception: These symptoms are transient and only present when coughing.)
• **Respiratory Arrest Imminent:** Struggling to breathe, barely able to move air, unable to speak, gasping for breath, drowsy, or confused. Cyanosis of the face, lips, and mouth occurs with low blood oxygen \( (\text{Po}_2 < 80\%) \).

**TRIAGE ASSESSMENT QUESTIONS**

**Call EMS 911 Now**
- Severe difficulty breathing (struggling for each breath, making grunting noises with each breath, unable to speak or cry because of difficulty breathing)
  *Triage Tip: Listen to the child’s breathing.*
- Breathing stopped and hasn’t returned
  *First Aid: Begin mouth-to-mouth breathing.*
- Wheezing or stridor starts suddenly after allergic food, new medicine, or bee sting
  *R/O: anaphylactic reaction*
- Slow, shallow, and weak breathing
  *Reason: impending apnea*
  *R/O: sepsis, poisoning*
- Bluish (or gray) color of lips or face now
  *R/O: cyanosis and need for oxygen*
- Choked on something, with difficulty breathing now
  *First Aid: Discuss the Abdominal Thrust maneuver briefly before transferring the call to 911.*
- Very sleepy and not alert
  *R/O: severe hypoxia*
- Can’t think clearly
  *R/O: severe hypoxia*
- Sounds like a life-threatening emergency to the triager

**See More Appropriate Protocol**
- Choking
  *Go to Protocol: Choking, Inhaled Foreign Body on page 361*
- Anaphylactic reaction
  *Go to Protocol: Anaphylaxis on page 355*
  *First Aid: Give epinephrine IM, if you have it.*
- Wheezing (high-pitched whistling sound) and previous asthma attacks or use of asthma medicines
  *Go to Protocol: Asthma Attack on page 147*
- Wheezing (high-pitched purring or whistling sound produced during breathing out) and no history of asthma
  *Go to Protocol: Wheezing (Other Than Asthma) on page 353*
- Stridor (harsh, raspy, low-pitched sound on breathing in) and a hoarse, seal-like, barky cough
  *Go to Protocol: Croup on page 177*
- Difficulty breathing and only present when coughing
  *Go to Protocol: Cough on page 171*
- Difficulty breathing (< 1 year old) and relieved by cleaning the nose
  *Go to Protocol: Colds on page 161*
- Noisy breathing with snorting sounds from nose and no respiratory distress
  *Go to Protocol: Colds on page 161*
- Noisy breathing with rattling sounds from chest and no respiratory distress
  *Go to Protocol: Cough on page 171*