

# EXHALE ACADEMY CSE CHEAT SHEET #2

## INFORMATION GATHERING

### CLICKING ORDER

- Visual: color, general appearance, respiratory pattern, posture, sensorium.
- Bedside: SpO<sub>2</sub>, pulse, BP, breath sounds, percussion, trachea, capnometry.
- Basic tests: ABG, CXR, CBC, electrolytes, 12-lead EKG when indicated.
- Special tests: CT, V/Q, bronchoscopy, PFT, ICP, sweat chloride, Apgar, hemodynamics.

### ALWAYS ASK

Before each click, force the choice to earn its place.

- Is the patient stable enough to gather more data?
- Is this quick, safe, and relevant?
- Will it change what I do next?
- Is a simpler bedside clue available first?

### HIGH-YIELD PICKS

- ABG: acid-base, oxygenation, ventilation, failure.
- CXR: infiltrates, pneumothorax, tube placement, trauma.
- MIP/NIF and VC: neuro weakness or weaning.
- Sputum/CBC: fever, infection, colored secretions.
- Co-oximetry: suspected carbon monoxide poisoning.

### STOP GATHERING WHEN

- The patient cannot protect the airway.
- Severe respiratory distress is obvious.
- Signs point to tension pneumothorax.
- Upper airway obstruction is developing.
- ABG shows severe ventilatory failure.

### AVOID

- PFTs during an acute severe exacerbation.
- Unrelated urine/lab tests.
- Advanced imaging without a reason.
- Delaying emergency treatment for confirmatory testing.

### EXHALE MEMORY LINE

**Look -> Bedside -> Basic Tests -> Special Tests -> Decide.**