

## **Respiratory distress in the post-operative period**



**History, physical, review CXR**



- 1. Treat pain/anxiety**
- 2. Aggressive pulmonary toilet, incentive spirometry, chest PT, bronchodilators (beta-agonists)**
- 3. Diuretics if volume overload is suspected**
- 4. Consider drainage of large pleural effusions associated with atelectasis**
- 5. If hemothorax is noted – correct coagulopathy, consult transplant surgery**
- 6. Broad spectrum antibiotics if pneumonia suspected**
- 7. Consider corticosteroids for suspected lung injury secondary drug toxicity (e.g. thymoglobulin) & stopping the offending agent**
- 8. Consider initiation of non-invasive or mechanical ventilation to stabilize respiratory status in patients with severe respiratory distress**