5000 HIGH ALTITUDE ILLNESS

Special Notes:

- Oxygen is the mainstay of therapy.
- Descent from altitude is mandatory for severe respiratory distress or altered mental status.
- Most altitude illness occurs above 7,000 ft. However, rapidity of ascent is also a factor so mild cases can be seen at lower altitudes.

Acute mountain sickness (AMS): headache, insomnia, anorexia, nausea, fatigue

High-altitude pulmonary edema (HAPE): dyspnea, cough, headache, nausea, fever

High-altitude cerebral edema (HACE): ataxia, confusion, neuro deficits, seizure, coma, and headache

Symptoms of illness at altitude

- ABCs Oxygen
- Complete history:
  - Rate of ascent, prior altitude illness, rapidity of sx onset
  - Consider non-altitude-related illness

- IV
- Cardiac monitor

AMS

20cc/kg NS bolus

**Odansetron** for nausea or vomiting

HAPE

- O₂ NRB facemask
- Assist ventilations as needed

- Consider **CPAP**
- Do NOT give diuretic
- Airway management as indicated

HACE

- Descent from altitude
- O₂ NRB facemask
- Assist ventilations as needed
- Elevate head of bed
- Assess for need for airway protection

**HACE is rare at elevations in Colorado; always consider alternative cause of altered mental status**