Treating Respiratory Emergencies in Children,
The T-RECS Study

Emergency Enrollment
Because treating wheezing in EMS must start immediately, there may not be time to ask parents for permission to enroll their child in the study.

We will make every effort to gain consent prior to participating in research. If we are unsuccessful, parents will be notified after their child is enrolled and will have options to continue or withdraw participation.

STUDY PROCEDURES
Local children’s hospitals in 3 major cities are working with one or more EMS agencies to participate in this research study. EMS will transport children enrolled in the study to an emergency department because of life-threatening wheezing.

Participating EMS agencies will use their standard treatment for the first several months of the study, then they will switch to the new protocol after a training period. This will allow researchers to compare the new standardized treatment plan to current methods. This is a pilot study where our main goal is to learn how we can collect all the data we need for the study.

RISKS
Potential Adverse effects of the treatment bundle include:
- Changes to pulse rate, blood pressure, other cardiovascular symptoms and/or ECG changes with or without cardiac symptoms
- Shakiness or agitation
- Allergic-type reactions
- Bronchospasm, dyspnea, or other respiratory problems
- Blurred vision, eye pain, temporary pupil dilation, or worsening of narrow-angle glaucoma
- Nausea or vomiting
- Behavioral changes

Additional risks include accidental enrollment of ineligible subjects and accidental disclosure of private information. There also may be risks that are unknown at this time.

PEDIATRIC WHEEZING
AND EMS
Respiratory emergencies are one of the most common reasons people call an ambulance, or Emergency Medical Services (EMS), for a child. Paramedics have medications to treat life-threatening wheezing before the child gets to the hospital. Improving treatment options for EMS providers may lead to better outcomes for children.

STUDY PURPOSE
In this study, we will evaluate the impact of training paramedics to give albuterol, ipratropium, and dexamethasone together as a bundled treatment for children with life-threatening wheezing. These medications have been commonly used to treat respiratory emergencies in the hospital but are not routinely used in EMS.

Ipratropium, albuterol, and dexamethasone are widely used to treat wheezing and other breathing emergencies in children.

In this study, we will evaluate the impact of using all 3 medication in a treatment bundle during EMS care.

MORE INFORMATION
Scan the QR code to complete our survey

Visit our website for more information
www.oahsu.edu/t-reces

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