## 36 – DISTRESS, ALTITUDE

**BOLIVIA** 



## THE STORY:

While climbing in Bolivia at 18,000′(5,500m) a 35 y/o male developed shortness of breath, weakness, and slight ataxia. The group of climbers had acclimatized at 13,000′(3,900m) for four days, then 15,000′(4,500m) for two days and were going to set up a high camp with plans to return to sleep at the lower elevation that night. The group had not experienced any problems with altitude up to that point. At 1300hrs., the patient began to complain of SOB and weakness. He was having a hard time

standing up straight. He denied headache or any serious neurologic complaints. The Pt stated he had no allergies, had been taking low doses of acetazolamide throughout the trip, had no previous difficulty at altitude, was well fueled and hydrated, and stated his symptoms had come on gradually over the last two hrs. The Pt had crackles in both lower lung fields when a stethoscope was used to auscultate his chest. Pulse: 116, Resp.: 30 and labored, Skin: normal, B/P: UTA, Pt was alert and anxious.

Put the appropriate information from the story above into the correct spaces provided in the SOAP note. Develop an Assessment for 1300hrs. with Anticipated Problems and an appropriate Treatment Plan.

## **QUESTIONS**

- 1. If the patient had not presented with crackles on auscultation of his chest, would that change your treatment plan?
- **2.** What treatment measures might you utilize if weather or environmental conditions made descent impossible?

ASSESSMENT AND TREATMENT PLAN		
A = Assessment (Problem List)	A = Anticipated Problems	P = Treatment Plan
1300		
Resp. distress 2° HAPE	severe HAPE	immediate descent
Ataxia	fall	assisted descent
NOTES		
What Actually Happened Next		
The Pt was assisted by team members down to the 15,000′(4,572m) level with almost complete relief of		
symptoms. The next day the Pt felt well but slight crackles were still present in the lower lung fields so the		
team continued their ascent without him. Although disappointed, the patient was able to play a helpful role		
in assisting other ill climbers struggling with their own difficulties at altitude.		