

Reversible causes		History	Examination	Investigation	Treatment
Hypoxaemia		Resp disease Drugs that decrease resp drive		Pulse oximetry PaO <sub>2</sub> on ABG	100% oxygen via BMV (Intubate and ventilate)
Hypovolaemia		Trauma Blood loss Surgery Dehydration	JVP Cap return Peripheries Urine output Mucous membranes	BP HR Hb via venous blood gas	IV access Fluids Blood Call surgeon/anaesthetist/theatre
Hypo/hyperkalaemia (electrolytes/BSLs)		Iv fluids Renal failure Drugs (ACEi, spironolactone, diuretics)	ECG changes Palpitations	Venous blood gas	HyperK: - Ca, insulin+dextrose, NaBicard, - salbutamol, resonium, - haemofiltration HypoK
Hypothermia		Drowning victim Exposed, cold environment (hiking)	Temp probe		Cover Room temp Forced air warmer
Toxins		History of drug abuse (opioids, BZDs, antidepressants, Paracetamol, aspirin) And other prescribed drugs (warfarin, anticoagulants, cardiac meds)		Full set of bloods for toxic screen. Venous blood gas (pH, BE)	Drug specific
Thromboembolic	PE	Major surg/trauma/malignancy/coagulopathy		CTPA	ABCs Heparinisation/thrombolysis
	AMI	Cardiac risk factors (age, male, smoker, DM, obese, HTN, chol. PHx)		Trop/CK Angiography	MONA Call Cardiologist Angio Thrombolysis
Tension pneumothorax		Chest trauma PHx COAD with bullous disease	Decreased breath sounds on auscultation Tracheal deviation	(CXR should not delay treatment)	Decompress with 14G cannula Chest drain
Tamponade		PHx Open heart surgery Trauma Malignancy, uraemia, infectious, anticoagulation,	Pulsus paradoxus Hypotension Muffled heart sounds	Echo	ABCs Call surgeon - Pericardiocentesis - Pericardial window - Sternotomy