Chronic Respiratory Failure

Very common in patients with severe COPD

- **Clinical Indicators:**
  - Hypoxemia of variable severity (often with baseline $pO_2 < 60$ mmHg on RA)
  - Elevated $pCO_2$
  - Elevated bicarbonate level (reported on ABG or basic metabolic panel)
  - Normal pH (7.35 – 7.45)
  - Chronic dependence on supplemental $O_2$ ('home $O_2$')

*For patients treated with home $O_2$, the $pO_2$/SpO2 criteria can be applied, not on room air, but while receiving usual supplemental oxygen flow. E.g. If the $pO_2$ has dropped below 60 mmHg (or SpO2 < 91%) on the usual supplemental oxygen flow rate, now have acutely decompensated respiratory failure. Also pt may have already increased their home $O_2$.*

Resource: Revisiting Respiratory Failure, Dr Richard D Pinson, MD, FACP, CCS, January 2014 HCPro

Acute on Chronic Respiratory Failure

An acute exacerbation or decompensation of Chronic Respiratory Failure

- **Clinical Indicators:**
  - Worsening symptoms (usually with a need for increased supplemental oxygen), and/or
  - Greater Hypoxemia (decreasing $pO_2$ from baseline) and/or
  - Increased $pCO_2$ with pH < 7.35 (Hypercapneic)

*Check out the latest on TFHS’ ICD10 Website for Physicians: [www.tfhd.com/icd10](http://www.tfhd.com/icd10)*