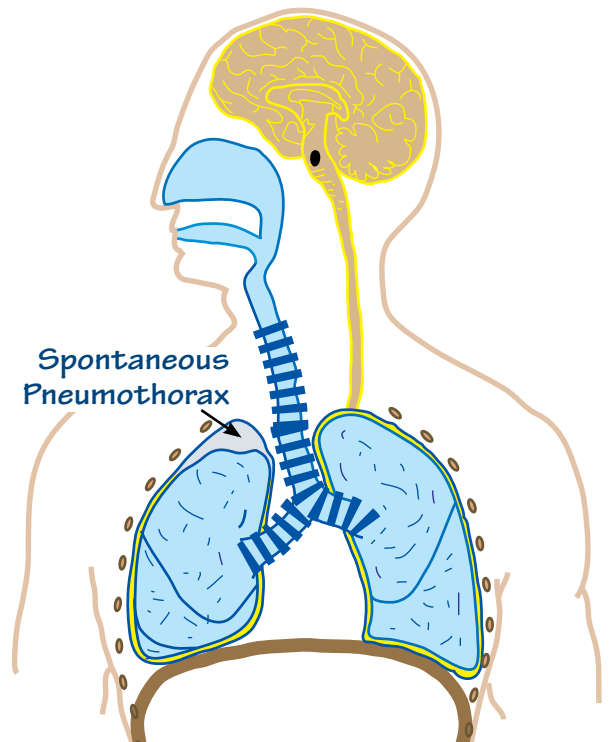




Assessment

Robert may have a primary (first time) spontaneous pneumothorax; they are relatively common in tall, thin adolescent males. A spontaneous pneumothorax occurs when a weak spot in the stuff sack covering the lung (parietal pleura) forms a small blister and eventually ruptures. The rupture occurs without warning—usually at the top of the lung—and permits air to leak into the pleural space collapsing the lung. Healthy patients, like Robert, with no underlying lung disease or damage tolerate the loss of lung capacity fairly well; some may be asymptomatic. Those with an underlying lung problem tend to present with respiratory distress at rest. Severity of the S/Sx vary depending on the size of the rupture; most primary spontaneous pneumothoraxes are mild, some are asymptomatic. Reoccurrence is common and patients may have a history of a similar episode, typically in the same lung. Smoking greatly increases the risk for both conditions; males are at greater risk than females.



Treatment

Remove all weight from Robert's pack and distribute it among group members. Place him at the back of the line and do not permit him to break trail. Proceed to the snow mobile trail at a pace that minimizes Robert's exertion and avoids initiating any respiratory distress; if possible, choose a slightly downhill route. Arrange for Robert's transport/evacuation to a hospital for advanced assessment, likely via snow mobile. If Robert's breathing becomes increasingly difficult while hiking out, see if a helicopter is available.