# **RESPIRATORY**

# **BLOOD GAS ANALYSIS**

A structured approach with some easy steps allows fast interpretation of most blood gases.

## 1. Is the patient hypoxic?

Normal PaO2 is > 10.6 kPa

## 2. Is the patient acidotic or alkalotic?

Normal H+ is 35 - 45

A normal value doesn't rule out a respiratory or metabolic disorder – there may be respiratory or metabolic compensation for an acid-base problem.

|           | H+                    |          |
|-----------|-----------------------|----------|
| <35       | 35 – 45               | >45      |
| Alkalosis | Normal or compensated | Acidosis |

## 3. Is the carbon dioxide normal? This assesses the respiratory component.

Normal PaCO2 is 4.5 - 6 kPa

High PaCO2 causes acidosis

Low PaCO2 causes alkalosis

## 4. Is the bicarbonate normal? This assesses the metabolic component.

Normal HCO3- is 22 – 26

High HCO3- causes alkalosis

Low HCO3- causes acidosis

## 5. Is the acid-base disorder is caused by a respiratory or metabolic problem?

Match either the respiratory or metabolic component to the hydrogen ions. For example a high CO2 fits with an overall acidosis and indicates respiratory acidosis. By contrast a normal HCO3 doesn't fit with an overall acidosis so metabolic acidosis is not the cause.

| H+ high & CO2 high = respiratory acidosis       | H+ low & CO2 low = respiratory alkalosis  |
|---|---|
| H+ high & HCO3- low = <b>metabolic acidosis</b> | H+ low & HCO3- high = metabolic alkalosis |

There is a mixed picture if both CO2 and HCO3- match the overall acid-base disorder.

## 6. Is there compensation?

The body tries to maintain PH at a narrow range and will use either respiratory or metabolic mechanisms to mitigate deviations from this range. Compensation is evident if either the CO2 or HCO3- show a change opposite to the overall acid-base disorder. If compensation is complete then H+ will be normal.

If there is a metabolic acidosis increased ventilation increases CO2 excretion which helps to raise PH. CO2 will be low.

If there is a respiratory acidosis retention of bicarbonate by the kidneys helps to raise PH. HCO3- will be high.

Compensation for alkalosis is possible but less common.

## **Respiratory Acidosis**

**H+:** 70 – acidosis

**CO2:** 17 – respiratory acidosis

**HCO3**: 33 – compensatory alkalosis

## **Respiratory Alkalosis**

H+: 32 – alkalosis

**CO2:** 3.4 – respiratory alkalosis

**HCO3:** 23 – normal, no compensation

#### **Metabolic Acidosis**

**H+:** 70 – acidosis

**CO2:** 3.3 – respiratory compensation

**HCO3:** 10 – metabolic acidosis

#### **Metabolic Alkalosis**

H+: 30 – alkalosis

**CO2:** 5.9 – normal, no compensation

**HCO3:** 34 – metabolic alkalosis