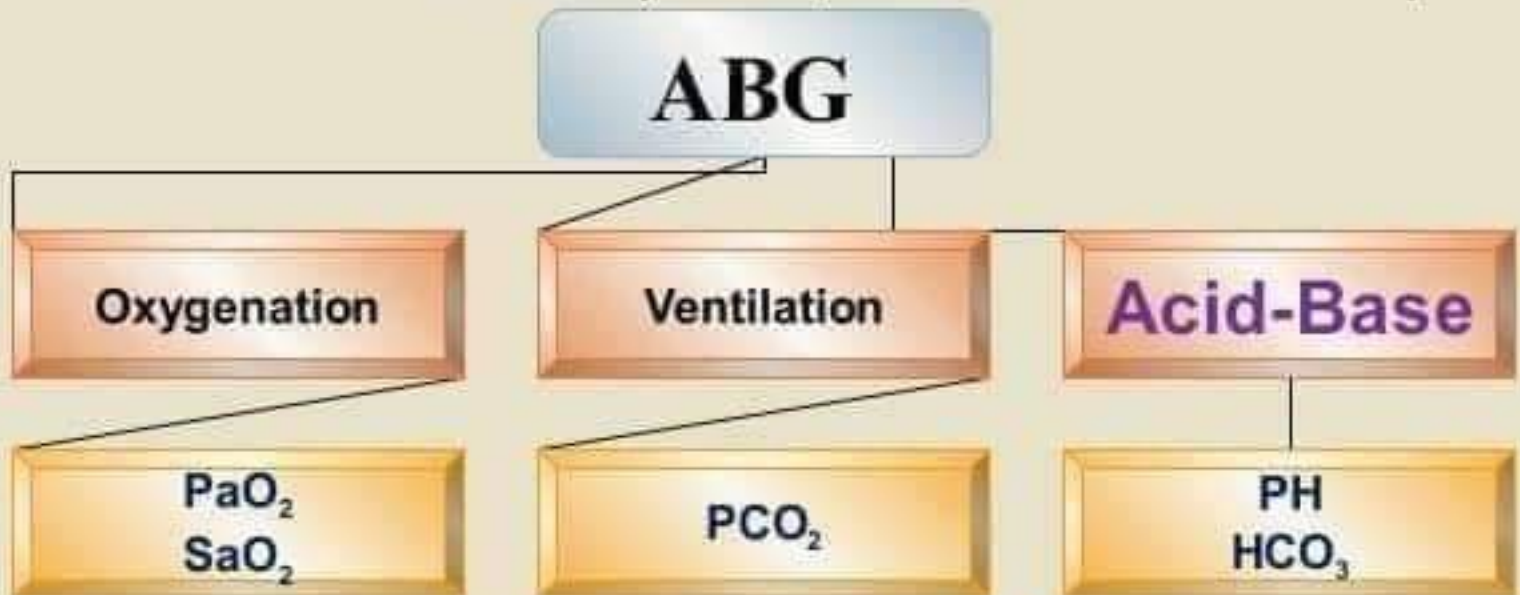


# What is the ABG?

- Arterial blood gas analysis is an essential part for diagnosing and managing the patient's oxygenation status, ventilation status and acid base balance.
- Drawn from **arteries**( radial, brachial and femoral)



# What are the components of ABG?

**pH**

Measurement of acidity or alkalinity, based on the hydrogen (H<sup>+</sup>)

**7.35 - 7.45**

**PaO<sub>2</sub>**

2

The partial pressure oxygen that is dissolved in arterial plasma.

**80 - 100 mm Hg**

**PaCO<sub>2</sub>**

The amount of carbon dioxide dissolved in arterial blood.

**35 - 45 mmHg**

## What are the components of ABG?

**HCO<sub>3</sub>**

The calculated value of the serum concentration of bicarbonate  
**22 – 26 mEq/L**

**SaO<sub>2</sub>**

The arterial oxygen saturation.  
**>95 %**

## ACID-BASE BALANCE

❖ The primary aim of keeping this delicate balance is to preserve the Homeostasis i.e. the highly complex interactions that maintain all body systems to functioning within a normal range.

❖ Any extreme change in this balance (PH < 6.8 or > 7.8) may result in disastrous changes e.g. denaturation of proteins & shut down of all enzymatic and metabolic processes. Such disturbed environment would be *incompatible with life*.

# (I) Respiratory Acidosis

- ❑ It is defined as a pH less than 7.35 with a PaCO<sub>2</sub> greater than 45 mmHg.
- ❑ Acidosis is the accumulation of CO<sub>2</sub> which combines with water in the body to produce **carbonic acid**, thus lowering the pH of the blood.

ABG	pH	PaCO <sub>2</sub>	HCO <sub>3</sub>
Respiratory Acidosis			normal

## (II) Respiratory Alkalosis

- ❑ It is defined as a **pH** greater than 7.45 with a **PaCO<sub>2</sub>** lesser than 35 mmHg.
- ❑ Alkalosis is due to excessive **wash** of **CO<sub>2</sub>** (**hyperventilation**), thus increasing the pH of the blood.

ABG	pH	PaCO <sub>2</sub>	HCO <sub>3</sub>
Respiratory Alkalosis			normal

## (III) Metabolic Acidosis

- It is defined as a pH less than 7.35 with a  $\text{HCO}_3$  less than 22 mEq/L.
- Toxic Causes** : Any disorder that will lead to tissue hypoperfusion whatever the cause will lead eventually to increase in lactic acid production resulting in Metabolic Acidosis.

- 1) Late salicylate
- 2) Methanol
- 3) Ethylene glycol
- 4) Iron

ABG	pH	PaCO <sub>2</sub>	HCO <sub>3</sub>
Metabolic Acidosis	↓	normal	↓

## (IV) Metabolic Alkalosis

- It is defined as a **pH greater than 7.45** with **HCO<sub>3</sub> greater than 28 mEq/L**
- Causes**

It is due to **excessive acid loss** (repeated vomiting and nasogastric suction) **OR bicarbonate retention** e.g. overuse of sodium bicarbonate .

ABG	pH	PaCO <sub>2</sub>	HCO <sub>3</sub>
Metabolic Alkalosis		normal	



## Pattern of Changes in Acid-Base Disorders

<i>Primary disorder</i>	<i>Initial change</i>	<i>Compensatory change</i>
Metabolic acidosis	↓ $\text{HCO}_3$	↓ $\text{PCO}_2$
Metabolic alkalosis	↑ $\text{HCO}_3$	↑ $\text{PCO}_2$
Respiratory acidosis	↑ $\text{PCO}_2$	↑ $\text{HCO}_3$
Respiratory alkalosis	↓ $\text{PCO}_2$	↓ $\text{HCO}_3$

# Normal Values

<b>ANALYTE</b>	<b>Normal Value</b>	<b>Units</b>
pH	7.35 - 7.45	
PCO <sub>2</sub>	35 - 45	mm Hg
PO <sub>2</sub>	72 - 104	mm Hg`
[HCO <sub>3</sub> ]	22 - 30	meq/L
SaO <sub>2</sub>	95-100	%
Anion Gap	12 ± 4	meq/L
ΔHCO <sub>3</sub>	+2 to -2	meq/L

# Arterial Blood Gases

PH      acidosis      <      7.4      >      alkalosis

PH	7.35 - 7.45
PaCO <sub>2</sub>	35 - 45
HCO <sub>3</sub>	22 - 28

← Respiratory

← Metabolic

**R** Respiratory

PH ↑ PCO<sub>2</sub> ↓ Alkalosis

**O** Opposite

PH ↓ PCO<sub>2</sub> ↑ Acidosis

**M** Metabolic

PH ↑ HCO<sub>3</sub> ↑ Alkalosis

**E** Equal

PH ↓ HCO<sub>3</sub> ↓ Acidosis

Uncompensated : CO<sub>2</sub> or HCO<sub>3</sub> normal

Partially Compensated : Nothing is normal

Compensated : PH is normal (7.4 baseline/neutral)