

## EMS Subspecialty Certification Review Course

### 1.4.4 Flight Physiology

- 1.4.4.1 Effects of altitude on patient management
- 1.4.4.2 Effects of altitude on healthcare providers

2025



American College of  
Emergency Physicians®  
ADVANCING EMERGENCY CARE

1

---

---

---

---

---

---

---

## Learning Objectives

- Understand basic principles of physiologic effects of atmospheric pressure
- Understand risks to patients and caregivers due to altitude
- Understand and describe applicable physical laws of gases which may negatively affect physiology
- Understand and describe physiologic stressors of flight



American College of  
Emergency Physicians®  
ADVANCING EMERGENCY CARE

2

---

---

---

---

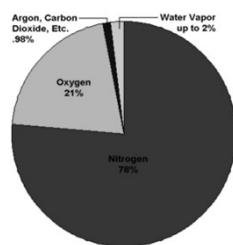
---

---

---

## Atmospheric Considerations

- Composition
  - 78% nitrogen, 21% oxygen at all altitudes
- Pressure is due to the weight of the gases
  - Decreases with altitude
- Gases are subject to physical laws
  - Gases in our bodies will change with the environment



American College of  
Emergency Physicians®  
ADVANCING EMERGENCY CARE

3

---

---



---

---

---

---


---

## Flight Physiology

There are 5 basic laws of gases which affect physiology

- **Boyle:** The effect of altitude on gas volume
- **Dalton:** The effect of altitude on oxygen availability
- **Henry:** Gas equalization due to pressure changes
- **Charles:** The effect of temperature on gas volume
- **Graham:** Diffusion of gases from higher to lower concentrations



Pressure


Number of moles



Temperature

$$PV=nRT$$

Volume

Gas constant



4

---

---

---

---

---


---



---

---

## Boyle's Law

- Volume is inversely proportional to pressure
  - Gases expand when pressure is decreased
    - Ascending in a pool, bubbles get bigger
  - Gas expansion and contraction problems
    - Pneumothorax
    - Middle ear & sinuses
    - Stomach & intestines
    - Medical appliance with cuff/balloon
    - Any air in non-communicating space



5

---

---

---

---

---

---



---

---

## Dalton's Law

- Total barometric pressure = sum of partial pressures (pressure of each gas present)
  - Partial pressure = (Total pressure)(% of gas)

Without adequate partial pressure of oxygen, you cannot absorb oxygen in your lungs
- As you ascend, the percentage of oxygen remains constant, but partial pressures decreases

6

---

---

---

---

---

---

---

---

## Dalton's Law

- Total barometric pressure = sum of partial pressures
  - Partial pressure = (Total pressure)(% of gas)
- At sea level  $P_{\text{total}} = 760\text{mmHg}$ 
  - $P_{\text{O}_2} = 760\text{mmHg} \times 21\% = 160\text{mmHg}$
  - @ 10Kft =  $520\text{mmHg} \times 21\% = 109\text{mmHg}$



American College of  
Emergency Physicians®  
ADVANCING EMERGENCY CARE

7

---

---

---

---

---

---

---

---

## Henry's Law

- The amount of gas dissolved in a liquid is a function of the applied pressure
- When pressure is released, gas comes out of solution in the form of bubbles
- These bubbles in the body cause evolved gas problems (decompression sickness)
- Divers should wait to fly until 12-24 hours after diving



American College of  
Emergency Physicians®  
ADVANCING EMERGENCY CARE

8

---

---

---

---

---

---

---

---

## Graham's Law

- Gases diffuse from higher to lower concentrations
  - Impacts normal gas exchange and cellular respiration
- Rate of diffusion of a gas through a medium is:
  - Directly related to the solubility of the gas
  - Inversely proportional to the square root of its density



American College of  
Emergency Physicians®  
ADVANCING EMERGENCY CARE

9

---

---

---

---

---

---

---

---

### Bonus: Gay-Lussac's Law

- Pressure and temperature are directly related when volume is constant
- E.g. Pressure in an oxygen tank decreases as the temperature decreases



American College of  
Emergency Physicians®  
ADVANCING EMERGENCY CARE

10

---

---

---

---

---

---

---

### Physiological Zones

- Physiological Zone – sea level to 10,000'
  - We can adapt in this zone
- Physiological Deficient Zone – 10,000' to 50,000'
  - Majority of commercial flying
  - Hypoxia due to altitude
  - Trapped gas problems



American College of  
Emergency Physicians®  
ADVANCING EMERGENCY CARE

11

---

---

---

---

---

---

---

### *And a final law... Murphy's Law*

"Whatever can go wrong will go wrong,  
and at the worst possible time"

If you ignore the previous gas laws, Murphy's Law applies



American College of  
Emergency Physicians®  
ADVANCING EMERGENCY CARE

12

---

---

---

---

---

---

---

## Patient Considerations

Hypoxia

Non-solid organs with trapped air

Equipment: any equipment with air chambers

Barotrauma: Ascent / Descent

G-forces

Temperature

Humidity

Vibration



American College of  
Emergency Physicians®  
ADVANCING EMERGENCY CARE

13

---

---

---

---

---

---

---

---

## Crew Considerations

- Hypoxia
- Dehydration
- Noise Hearing loss
- Fatigue
  - Vibration
  - G forces
  - Third spacing
- Situational Awareness / Perception



American College of  
Emergency Physicians®  
ADVANCING EMERGENCY CARE

14

---

---

---

---

---

---

---

---

## Take-Home Points

- Air medical transport requires increased attention to operating environment for both crew and patients
- Air operations, even at low altitudes, present a series of risks which must be proactively anticipated and managed
- Clinicians must have an understanding of aircraft limitations, operating characteristics, attributes, and safety equipment
- The effects of altitude physiology may be insidious, especially hypoxia, affecting both patients and air medical crew
- Crew resource management (CRM) is essential in all operations and especially essential in helicopter operations due to low altitude with limited recovery time



American College of  
Emergency Physicians®  
ADVANCING EMERGENCY CARE

15

---

---

---

---

---

---

---

---

