

# Asthma/wheeze management plan



Name of Patient	GP surgery Telephone
Date of Birth	Children's Assessment unit/ward telephone
NHS Number	Next appointment
Open access Y/N Until date <i>Some areas may instruct you to take your child to the Children's Emergency Department. Make sure you know what to do in your area</i>	

## Out of hours call 111

- This is your child's discharge plan and treatment until their next review.
- Make an appointment with a GP or asthma nurse within 48hrs of discharge
- **Symptoms of asthma include: Cough, wheeze, shortness of breath, chest tightness** that may cause difficulty in speaking or feeding. Not everyone with asthma will wheeze
- Please note how much treatment your child is requiring and how this helps
- When asthma is **fully controlled** your child should be **symptom free and not require any reliever inhaler** (salbutamol.)
- Preventer medication should be used even when well

## Treatment

Medication	When to use	Name and strength of medication	No. of puffs/dose	Times per day
<b>Preventer inhaler</b> Often brown, orange or purple	Your child should use their (brown/orange/purple) inhaler every day even when well			
<b>Preventer tablet</b> or granules. Use every day	Use every day			
<b>Reliever inhaler</b> usually Salbutamol and blue	Use when your child is coughing or wheezing or their chest feels tight.	As below	2-10 puffs as needed	up to every four hours
<b>Prednisolone</b> (steroids)	Short course when unwell, usually 3-5 days		once per day for ..... days	
Other Medications e.g. Nasal spray or antihistamines				

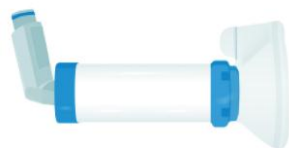
## Remember

- **Your child should use their Preventer inhaler ( brown/orange/purple) every morning and evening** and only stop if their doctor or asthma nurse tells them to.
- **Salbutamol is a reliever. When you child is well they will not need to use this at all**
- Keep a salbutamol inhaler with you at all times.
- Start salbutamol as soon as your child gets symptoms and continue until symptoms have resolved.

## Using salbutamol

- Give 2 puffs. 1 puff at a time, wait for 2 minutes and assess the response, repeat if necessary continuing up to 10 puffs.
- If your child does not respond to 10 puffs call 999 & repeat
- If your child needs to use their blue inhaler more often than every 4 hours you should take them to see their doctor or use the out of hours services. (Call 111)
- If your child repeatedly needs doses of 6-10 puffs every 4 hours you should take them to see their doctor or use the out of hours services. (Call 111) they are likely to need a course of steroids

**How to use an MDI with a small volume spacer and mask – (spacer may be yellow, orange or blue.)**



1. Remove the cap from the inhaler. Shake the inhaler and insert into the back of the spacer.
2. Place the mask of the spacer over the mouth and nose of the child and ensure there is a good seal.
3. Keeping the spacer level press the inhaler canister.

4. Encourage the child to breathe in and out **slowly and gently** for 5 breaths, (if you hear a whistling sound they are breathing in too quickly).
5. Remove the mask from the child's face.
6. If taking another dose, wait 30 seconds and repeat steps 1-4. Replace mouthpiece cover after use.

**How to use an MDI with a small volume spacer**



1. Remove caps from the inhaler and spacer. Shake the inhaler and insert into the back of the spacer.
2. Breathe out gently as far as is comfortable. Put the mouthpiece of the spacer into your mouth and seal your lips around it.
3. Press the canister once to release a dose of medicine. Breathe in **slowly and**

- steadily (if you hear a whistling sound you are breathing in too quickly).
4. Remove spacer from your mouth and hold your breath for 10 seconds, or as long as is possible, then breathe out slowly.
5. If taking another dose, wait for 30 seconds and repeat steps 1-4. Replace the mouthpiece covers after use.

**How to use an MDI with a large volume spacer and mask for infant/small child**



1. Remove the cap.
2. Attach the mask to the spacer mouthpiece.
3. Shake the inhaler and insert into back of spacer.
4. Tip the spacer to an angle of 45° or more to allow the valve to remain open.

5. Place the mask over the mouth and nose of the child to ensure there is a good seal.
6. Press the inhaler canister and keep the mask on the child's face for 5 breaths.
7. Remove the mask from the child's face.
8. For a further dose wait 30 seconds and repeat steps 3 to 7.

Not all types of inhaler are shown here. Ask the doctor or nurse if you are unsure how to use the inhalers you have been given. The type of inhaler and spacer with or without a mask you are given will depend on your child. For more information see <http://www.asthma.org.uk/Sites/healthcare-professionals/pages/inhaler-demos>

<b>Medications reviewed by</b>		
Name:	Signature::	Date
<b>Inhaler technique checked by</b>		
Name:	Signature::	Date
<b>Copy of this plan sent to GP</b>		
Name:	Signature::	Date

**Get help day or night. Do not worry about making a fuss**

<b>Life threatening</b>	<p>If your child is:</p> <ul style="list-style-type: none"> <li>• Drowsy</li> <li>• Has a severe wheeze</li> <li>• Is unable to speak in sentences</li> <li>• Is unable to respond</li> </ul>	<p>Ring 999 You need immediate help Give 2 puffs (1 at a time) every 2 minutes of salbutamol via a spacer until the ambulance arrives</p>
<b>Severe</b>	<p>If your child is:</p> <ul style="list-style-type: none"> <li>• Frightened</li> <li>• Breathless with a heaving chest</li> <li>• Unable to speak in sentences/take fluids and is getting tired</li> </ul>	<p>Ring 999 You need immediate help Give 2 puffs (1 at a time) every 2 minutes of salbutamol via a spacer until the ambulance arrives</p>
<b>Moderate</b>	<p>If your child is:</p> <ul style="list-style-type: none"> <li>• Wheezing and breathless and not responding to usual reliever treatment</li> </ul> <p><b>Monitor your child closely and look for signs to see if they are getting worse</b></p>	<p>Contact your GP to make an appointment for your child to be <b>seen immediately</b>. Out of hours call 111 Continue to give salbutamol as described earlier</p>
<b>Mild</b>	<p>If your child is:</p> <ul style="list-style-type: none"> <li>• Requiring their reliever regularly throughout the day/night for cough or wheeze but is not working hard with their breathing and is able to continue day to day activities</li> </ul>	<p>Arrange an appointment to see your GP as soon as possible/preferably the same day or call 111 if it is out of hours Continue to give salbutamol as described earlier and watch them closely</p>

For more information about asthma <http://www.asthma.org.uk> T 0800 1216244

Smoking, even outside can affect your child's health & asthma. Ask at your surgery for help to quit. For more information [www.smokefree.nhs.uk](http://www.smokefree.nhs.uk)

