

<h2 style="margin: 0;">Paediatric Asthma/Wheezer Discharge Plan</h2> <p style="margin: 10px 0 0 20px;"><i>Dr David Cremonesini</i></p>	<h2 style="margin: 0;">Patient Label</h2>
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At discharge

Best peak flow	L/min	Date
Inhaler technique checked	<input type="checkbox"/>	Medication reviewed by
Signed by Nurse		Signed by Dr David Cremonesini kidsallergy

Immediately After Discharge

	Number of puffs of Blue inhaler (Salbutamol)	Frequency	Prednisolone (Tick if required)
Day 1	Puffs	Every 4 hours	
Day 2	Puffs	Every 6 hours	
Day 3	Puffs	Every 6 ~ 8 hours	
Day 4	Puffs	Every 8 ~ 12 hours	
Day 5	Puffs	As required	

If your child takes a brown, orange or purple inhaler continue this twice a day even when well. (Ensure good dental hygiene is maintained while on steroid inhalers)

- If your child needs more reliever than 10 puffs 4 hourly see your GP or visit A&E (See next page)**
- Please check on your child overnight

After day 6/Regular Treatment

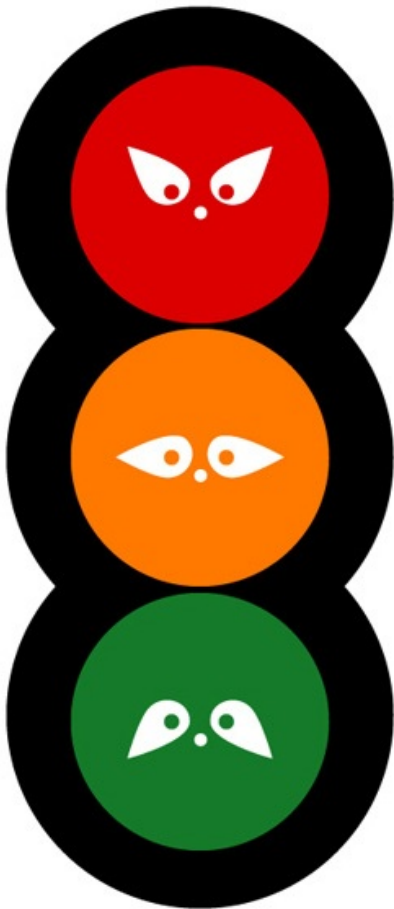
Normal dose of asthma treatment when your child is well: (If unwell, see GP)					
Medicine	Name	Colour	Number of puffs	Times per day	How long for
Reliever					
Preventer					
Preventer					
By mouth					

<h3 style="margin: 0;">Asthma Medicines</h3>	<p>Preventers Your preventer medicine reduces inflammation, swelling and mucus in the airways of your lungs. Preventers need to be taken EVERY DAY, even when you are well.</p> <p>ALWAYS take inhalers using a spacer. If you don't want to consult doctor/asthma nurse for other options.</p>	<p>Relievers Your reliever medicine works quickly to make breathing easier by making the airways wider.</p> <p>ALWAYS carry your reliever with you – it is essential for first aid. Do not use your preventer inhaler for quick relief of asthma symptoms unless instructed by your doctor.</p>
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Follow Up Arrangement (delete as appropriate)

- Outpatient Hospital appointment: weeks
- Make an appointment with your GP/Practice Nurse/Asthma Nurse inweeks
- A letter has will be sent to you GP. You will receive a copy

What to do when asthma gets worse



DANGER if your child

- Is distressed by wheeze and is short of breath
- Won't play because of breathlessness
- Is too breathless to speak
- Has a peak flow below 60% of best
- My reliever not helping much



- Give 10 puffs of reliever with spacer
- If you don't feel better you need URGENT medical input – call 999 or visit your GP/A+E dept
- If feel better, you still must see a doctor or nurse TODAY

If your child

- Is using more of their blue reliever inhaler than stated in the discharged plan
- Is coughing and wheezing more
- Is coughing and waking at night



- Increase reliever inhaler to up to 10 puffs every 4 hours with spacer
- Continue your preventer
- See your GP next day

If your child

- Having daytime symptoms more than 2 times a week
- Daytime activities prevented by their asthma
- You need your reliever more than 2 times a week



- Arrange a review by your GP / asthma nurse within 1 week
- Continue normal treatment but use your reliever as required

What to do in an emergency

1. Take one to two puffs of your reliever inhaler (usually blue), immediately.
2. Sit down and stay upright, loosen clothes
3. If you do not start to feel better, take two puffs of your reliever inhaler (one puff at a time) every two minutes. You can take up to ten puffs.
4. If you do not feel better after taking your inhaler as above, or if you are worried at any time, call 999.
5. If an ambulance does not arrive within 10 minutes and you are still feeling unwell, repeat step 3.

**After an emergency you should call your G.P. and ask for an urgent appointment (even if you feel better)
Do not ignore worsening asthma Get medical help immediately. Day or Night**

How to use paediatric spacers

1. Remove the cap from the mouthpiece of the inhaler and shake the inhaler vigorously.
2. If the inhaler has not been used for a week or more, or it is the first time the child has used the inhaler, spray it into the air before it is used to check that it is working.
3. Attach the mask to the mouthpiece of the spacer. If child over 3 years, should not need a mask and request a new spacer with a mouthpiece – ensure you are showed how to use it.
4. Place the mask over the child's nose and mouth so that it makes a seal with the face.
5. Press down on the inhaler canister to spray one puff of medicine into the spacer.
6. Hold the mask in place and allow the child to breathe in and out slowly for five breaths.
7. If you need to give another dose, wait 30 seconds, shake the inhaler again then repeat steps 3 to 6.
8. For babies: Reassure the baby by cradling them in your arms or on your knee. Gently stroke the baby's face with the mask so that they get used to it. Talk to the baby and smile - the baby will sense if you are anxious. You can hold the mask over the baby's nose and mouth to give them a dose while they are sleeping. Babies get very little medicine in if they're crying so keep them calm as much as you can

For more information contact asthma UK – www.asthma.org.uk OR phone 0800 121 6244 (9-5pm week days)