

Asthma Discharge Plan

Reliever Medication (Blue Puffer): Salbutamol

Give _____ puffs of reliever medication every _____ hours for 12 hours via a spacer.

When asthma is improving give _____ puffs of reliever medication every _____ hours for 48 hours.

If the patient needs the reliever medication earlier than every 2-3 hours you should give



10 puffs (10 cycles 1 puff / 5 breaths)



If still not getting relief for 2-3 hours



Return to 24 Hour Surgery giving 10 puffs on the way if needed

OR

Call an ambulance if:

- Not talking in sentences
- Talking in short 2-3 word sentences
- Looks exhausted
- Working hard to breathe
- See signs of severity over page

Always use a spacer: Only give one puff of reliever medication at a time via the spacer.

Oral Steroids

Prednisolone liquid (5mg/ml):

Give _____ mls once daily for the next _____ days

OR

Prednisone tables (5mg or 20mg)

Give _____ tablets (_____ mg) once daily for the next _____ days

Continue or start preventer medication _____

Give _____ puffs _____ times every day

The patient should see their regular GP the following morning.

SEEK HELP FROM YOUR USUAL GP, OR IF UNAVAILABLE, THE 24 HOUR SURGERY, IF:

- Asthma is getting worse
- You need to give reliever medication more than every 3 hours
- The reliever does not seem to be working after 20 minutes
- The symptoms continue for more than 24 hours

Asthma Discharge Plan (cont)

Child Symptom Chart

	Mild	Moderate	Severe
Activity	Normal or maybe quieter	May still have bursts of high activity but taking more frequent rests	Not playing at all. Arms and legs limp at side
Wheezing	May have no noticeable, or very slight, wheeze	Obvious whistle when breathing out	Obvious whistle when breathing out. Chest may be silent if very severe.
Muscle Use	Muscles around base of neck may be going in and out slightly	Easy to see neck muscles going in and out with breathing. May see spaces between ribs going in and out.	
Breathing	Breathing rate normal or slightly faster <ul style="list-style-type: none"> • 0-1yr 25-30 breaths per minute • 1-4 yrs 20-30 breaths per minute • 5-14 yrs 15-25 breaths per minute • 14+ yrs 11-23 breaths per minute 	Breathing may be up to 50% faster <ul style="list-style-type: none"> • 0-4 yrs up to 45 breaths per minute • 5-14 yrs up to 37 breaths per minute • 14+ yrs up to 34 breaths per minute 	Breathing may be more than 50% above usual rate <ul style="list-style-type: none"> • 0-4 yrs over 45 breaths per minute • 5-14 yrs over 37 breaths per minute • 14-18 yrs over 34 breaths per minute
Talking	Can say a whole sentence without needing to take a breath	Needs to take a breath after 2-3 words or mid sentence	Needs to take a breath after one or two words
Action	Continue with regular preventer medication. Use blue reliever 1-2 puffs 4 hourly.	Continue with regular preventer medication. Use blue reliever 1-2 puffs 2 hourly via a spacer. See GP same day to check for infection and commence oral steroids. If symptoms persist after ½ day treat as SEVERE	Use blue reliever up to 6 puffs via a spacer. Plus 2 puffs of atrovent if available. Repeat after 5 minutes if no better. SEEK URGENT MEDICAL ATTENTION IF NO BETTER AFTER THAT.

NOTE: Wheezing may not occur in all children. If wheeze disappears but child is still having trouble breathing GET HELP QUICKLY!