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You are entitled to a copy of any letter we write about you. Please ask if you want one when you come to the hospital.

If you are unhappy with the advice you have been given by your GP, consultant, or another healthcare professional, you may ask for a second (or further) opinion.

The evidence used in the preparation of this leaflet is available on request. Please email: patient.information@salisbury.nhs.uk if you would like a reference list.

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Discharge Wheeze Management Plan

Hospital Number _____
Name _____
Date of birth _____

Date: _____

Asthma

Asthma is a condition that affects the small airways of the lungs, making them swollen and sensitive. These sensitive airways can react to certain triggers such as viral infections (catching a cold), cigarette smoke, house dust mite, pets, pollen and exercise.

When your child comes into contact with one or more triggers, the muscles in the airways tighten up and the lining swells causing them to become narrow. Sticky mucus (phlegm) may also be produced.

Symptoms of asthma

- Cough
- Wheeze
- Breathlessness
- Chest tightness

Your child has had an asthma attack

They may continue to have mild symptoms over the next few days and the following information should help you manage your child's asthma or wheeze.

Your treatment is:

Peak Flow on discharge: _____

Usual / Predicted Peak Flow: _____

Reliever (Blue) SALBUTAMOL with Spacer

give

- 5-10 puffs every 4 hours (day + night) for first 24 hours
- 5-10 puffs four times a day for the next 24 hours
- 5 puffs four times a day for the next 24 hours
- 2 puffs four times a day, for the next 24 hours

Preventer _____ with Spacer

Prednisolone _____ mg (_____ tablets) once daily

for a further _____ days

Other medication _____

If your child's condition gets worse or does not seem to be improving, contact the Children's Unit (if discharged in the last 48 hours) or see your GP.

We recommend that your child is reviewed by your GP following this admission. Please arrange for your child to see your GP to review ongoing care.

Future Wheeze Management Plan

This plan may be used to help you manage any future asthma or wheezy episodes.

If you feel the symptoms are not improving after 8-12 hours, there is deterioration, or you are worried about your child go to the next stage or contact your GP.

Symptoms	Actions
<p>1</p> <ul style="list-style-type: none"> Well No cough or wheeze Doing normal activities 	<p>Continue using usual Preventer medication everyday</p> <p>Use Reliever (Blue) inhaler only when necessary</p>
<p>2</p> <ul style="list-style-type: none"> Unwell Getting a cold Coughing or wheezing day and/or night Reliever (Blue) inhaler is working via spacer (with/without a mask) 	<p>Give usual medication</p> <p>And also</p> <p>2 – 5 puffs Reliever (Blue) inhaler & spacer 4 – 6 times a day for 5 – 7 days</p>
<p>3</p> <ul style="list-style-type: none"> Coughing or wheezing getting worse, especially at night Reliever (Blue) inhaler is not lasting 4 hours or is not working within 15 minutes 	<p>Give usual medication</p> <p>And</p> <p>5-10 puffs Reliever (Blue) inhaler & spacer 4 hourly</p> <p>And</p> <p>See GP, out-of-hours GP or Emergency Department urgently</p>
<p>4</p> <ul style="list-style-type: none"> Very unwell Reliever (Blue) inhaler not helping Using tummy or neck muscles to breathe Breathing fast and hard Too breathless to talk or eat Tired and lethargic Lips or fingers looking blue Peak Flow below 50% of usual 	<p>Call 999</p> <p>Or go to Emergency Department</p> <p>Give Reliever (Blue) inhaler 1 puff every 30-60 seconds by spacer</p> <p>You should continue to give 1 puff every 30-60 seconds until help arrives</p>