

Pediatric Asthma Discharge Prescription and Short-Term Plan

The doctor will fill out this form before your child is discharged. Follow this plan until you see your child's usual doctor in 3 to 7 days.

HRN:	Site:	DOB: yyyy/mon/dd
Last Name:		First and Additional Names:
PHN:	Gender:	Age in Years:
Admitting Phys		Encounter #:
		ce, Postal Code
Address: Stree	t, City, Provinc	
	t, City, Provinc	ce, Postal Code

Hospital I	Hospital Name:Phone:								
Address:									
Controller Medicine: ***(MDI – Metered Dose Inhaler / DPI – Dry Powder Inhaler)***									
• Longer-acting medicine that reduces swelling in the airways. Must be used regularly to help heal and prevent swelling in airways.									
	use a spacer with all MDIs		mask		Spacer wit	h mouthpiece			
Inhale	Beclomethasone (Qvar®)	MDI	□ 50 mcg	🗆 100 ı	ncg		□ puff(s) two times a		
Inhale	Budesonide (Pulmicort [®]) DPI	□ 100 mcg	🗆 200 ı	mcg	□ 400 mcg	day (in the morning and at		
Inhale	Ciclesonide (Alvesco [®])	MDI	□ 100 mcg	🗆 200 ı			night) until child is seen by their doctor (in 3 to 7		
Inhale	Fluticasone (Flovent [®]) E	PI	□ 100 mcg	□ 250 ı	mcg	🗆 500 mcg	days).		
Inhale	Fluticasone (Flovent [®]) N	IDI	□ 50 mcg	ם 125 ו	mcg	🗆 250 mcg	□ puff(s) once a day		
Inhale	Mometasone (Asmanex	³) DPI	□ 50/5 mcg	□ 100/	5 mcg	□ 200/5 mcg	until your child is seen by their doctor (in 3 to 7		
Inhale	Budesonide/formoterol (Symbicort®) DPI	□ 100/6 mcg	□ 200/6	6 mcg	🗆 400/12 mcg			
Inhale	Fluticasone propionate/s (Advair®/Wixela®) DPI	almeterol	□ 100/50 mcg	□ 200/	50 mcg	🗆 500/50 mcg	Rinse mouth with water after inhalation.		
Inhale	Fluticasone propionate/s (Advair®) MDI	almeterol	□ 125/25mcg	□ 250/2	25 mcg				
Reliever Medicine: ***(MDI – Metered Dose Inhaler / DPI – Dry Powder Inhaler)***									
• Short-acting medicine that temporarily relaxes muscles around the airways. Gives quick relief for symptoms like coughing, wheezing, shortness of breath.									
Must use a spacer with all MDIs: Spacer with mask Spacer with mouthpiece									
Inhale Salbutamol (Ventolin [®] , Airomir [®]) MDI									
Inhale	Salbutamol (Ventolin [®]) DPI								
Inhale	Terbutaline (Bricanyl [®]) [□ 500 mcg	Up to puff(s) every hours when needed.						
Inhale Budesonide/formoterol (Symbicort®) DPI 200/6 mcg Daximum of puff(s) daily.									
Oral Steroid:									
• Brings swelling/inflammation in the airway under control quickly. If your child is using oral steroids often, it means your child's asthma is not well controlled.									
• Take			nisolone			ry day for day(s).			
Other we		Dose		How long			Directions		
 If your child has trouble breathing or talking, has blue lips or fingernails, or seems to be getting worse, call 911. If you are concerned about your child, call your doctor or Health Link.Bring your child back to the hospital if: your child's symptoms get worse; or your child's reliever medicine lasts less than 3 hours; or you aren't sure what to do, or you feel you are having trouble managing your child's symptoms. For 24-hour nurse advice and health information call Health Link at 811. Physician's Signature: Date: (yyyy/mon/dd) Physician Print Name: 									

Asthma can be *life threatening*, especially if not treated.

Remember – **ASTHMA**:

- Airways Asthma affects the airways in your child's lungs. Three main things happen in your child's airways: 1) airways swell and make mucous, 2) muscles around the outside of your child's airways tighten, and 3) your child's airways become sensitive and twitchy.
- Symptoms Your child will cough more, wheeze, and/or be short of breath. Having more symptoms means your child's asthma is out of control.
- Technique & Triggers Have your child show a healthcare provider how he or she uses the asthma medicine devices to make sure they are being used properly. If your child uses a MDI, it is best to add-on a spacer to help the medicine get properly into the lungs. Your child's spacer should fit well: mask-type spacers should cover the nose and mouth snugly. Everyone has different asthma triggers; know your child's triggers and how to avoid them if possible.
- Help Talk to a healthcare provider to learn more about resources that will help you manage your child's asthma. You can also go to the websites below to learn more.
- Medicine Know what your child's asthma medicine does. Your child should take his or her preventer/controller medicine every day even when feeling well.
 - Asthma Action Plan Make a plan with your child's doctor on how to manage changes in your child's asthma. Go to myhealth.alberta.ca to print an Asthma Action Plan. Take it to your child's doctor so it can be filled in together.

Checklist to Do at Home

Go back to the emergency/urgent care department if:

- · your child's symptoms get worse; or
- your child's reliever medicine lasts less than 3 hours; or
- your child can't talk in sentences without taking a breath; or
- your child's nails or the skin around the lips are blue; or
- you aren't sure what to do, or you feel you are having trouble managing your child's symptoms.

Make a follow-up appointment with your child's doctor within 3 to 7 days of leaving the hospital.

If you have been referred for asthma education, call the educator to make an appointment.

For More Information

iCAN Control Asthma

Asthma Canada www.asthma.ca

www.ucalgary.ca/icancontrolasthma

MyHealth Alberta www.myhealth.alberta.ca Alberta Lung & NWT www.ablung.ca