

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 Physician: _____ Encounter #: _____
 Address: Street, City, Province, Postal Code
 Telephone Number: _____
 Date of Admission: yyyy/mon/dd Family Physician: _____

Hospital Name: _____ Phone: _____
 Address: _____

Controller Medicine: *(MDI – Metered Dose Inhaler / DPI – Dry Powder Inhaler)*****

- Reduces swelling in the airways.
- Must be used **regularly** to help heal and prevent swelling in airways.
- Must use a spacer with all MDIs: **Spacer with mask** **Spacer with mouthpiece**

Inhale Beclomethasone (Qvar®) MDI **50 mcg** **100 mcg** • _____ puff(s) two times a day (in the morning and at night) until your child is seen by their doctor (in 3 to 7 days).

Fluticasone (Flovent®) MDI **125 mcg** **250 mcg**

Fluticasone (Flovent®) DPI **100 mcg** **250 mcg** **500 mcg**

Budesonide (Pulmicort®) DPI **100 mcg** **200 mcg** **400 mcg**

Ciclesonide (Alvesco®) MDI **100 mcg** **200 mcg** • Drink or rinse mouth with water after inhalation.

Mometasone (Asmanex®) DPI **200 mcg** **400 mcg**

Reliever Medicine:

- Quick, short-acting medicine that **temporarily** relaxes the muscles around the airways.
- Gives quick relief for symptoms such as coughing, wheezing, shortness of breath.
- Must use a spacer with all MDIs: **Spacer with mask** **Spacer with mouthpiece**

Inhale Salbutamol (Ventolin®, Airomir®) MDI **100 mcg** • _____ puff(s) every 4 hours for 24 hours then _____ puff(s) every 4 hours when needed

Salbutamol (Ventolin®) DPI **200 mcg** • _____ puff (s) every 4 hours as needed

Terbutaline (Bricanyl®) DPI **500 mcg**

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. Follow-up with your doctor.

Take Prednisone • _____ mg by mouth every day for _____ day(s)

Dexamethasone

Prednisolone

Other Medicine:

Medicine	Dose	How long	Directions

- If you are concerned about your child, call your doctor or Health Link.
- If your child has trouble breathing or talking, has blue lips or fingernails, or seems to be getting worse, call 911.**
- Bring your child back to the hospital if:
 - your child's symptoms get worse
 - your child's reliever medicine lasts less than 3 hours
 - you aren't sure what to do or 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) Phone Number: _____

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
 - your child’s reliever medicine lasts less than 3 hours
 - your child can’t talk in sentences without taking a breath
 - your child’s nails or the skin around the lips are blue
 - you aren’t sure what to do or 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 Now
www.ucalgary.ca/icancontrolasthma

Asthma Society of Canada
Toll free: 1-866-787-4050
www.asthma.ca

MyHealth Alberta
www.myhealth.alberta.ca

The Lung Association – Alberta and NWT
www.ab.lung.ca