Asthma

What is asthma?

Asthma is a lung condition that results in swelling and irritation of the airways and causes wheezing, coughing, and shortness of breath. The airways are the tubes that carry air in and out of your lungs. If you have asthma, the airways in your lungs are always a little swollen, even when you do not have any symptoms. Your airways are always more sensitive than normal and may react strongly to triggers that irritate them, like dust, pollen, and colds. The reaction causes them to become more swollen and make more mucus. Also, the tiny muscles in the walls of the airways tighten, which cause the airway openings to become smaller. This makes it harder for air to move in and out. Asthma may be mild, moderate, or severe. Symptoms may occur throughout the year, at specific times of year, or only very rarely.

What can I expect in the hospital?

You may need to stay in the hospital because:

- · You are having a lot of trouble breathing
- · Your oxygen level is very low
- You have other medical conditions which are making your asthma symptoms worse

Several things may be done while you are in the hospital to monitor, test, and treat your condition. They include:

Monitoring:

- · You will be checked often by the hospital staff.
- Your blood oxygen level will be monitored by a sensor that is attached to your finger or earlobe.
- · Your heart rate, blood pressure, and temperature will be checked regularly.

Testing:

Testing may include:

- Spirometry: A breathing test that measures how well you breathe in and out. You may be tested before and after taking medicine to see how your symptoms respond to medicine.
- X-rays: Pictures of the inside of the chest and lungs to check for infections or other abnormalities
- · A blood test called an arterial blood gas (ABG) test to measure the levels of oxygen and carbon dioxide in your blood
- Sputum culture: A test in which fluid made in the lungs is tested to check for cancer cells or infections
- Bronchoscopy: A test in which a slim, flexible, lighted tube called a bronchoscope is passed through your mouth and down into your lung to see

abnormal areas. Sometimes one or more pieces of tissue are removed to help make a diagnosis. This is called a biopsy.

Treatment:

Your healthcare provider will determine what treatments you need based on how you feel and how quickly you get better with the treatments given.

- You may get oxygen through a small tube placed under your nose or through a
 mask placed over your face. In very severe cases, you may need a breathing
 tube put down your throat to help you breathe.
- You will have a small tube (IV catheter) inserted into a vein in your hand or arm. This will allow for medicine to be given directly into your blood and to give you fluids, if needed.
- · Your provider may prescribe medicine to:
 - · Relax your airways and prevent asthma attacks
 - Stop asthma symptoms
 - · Reduce swelling in the airways
 - Reduce acid in the stomach

What can I do to help?

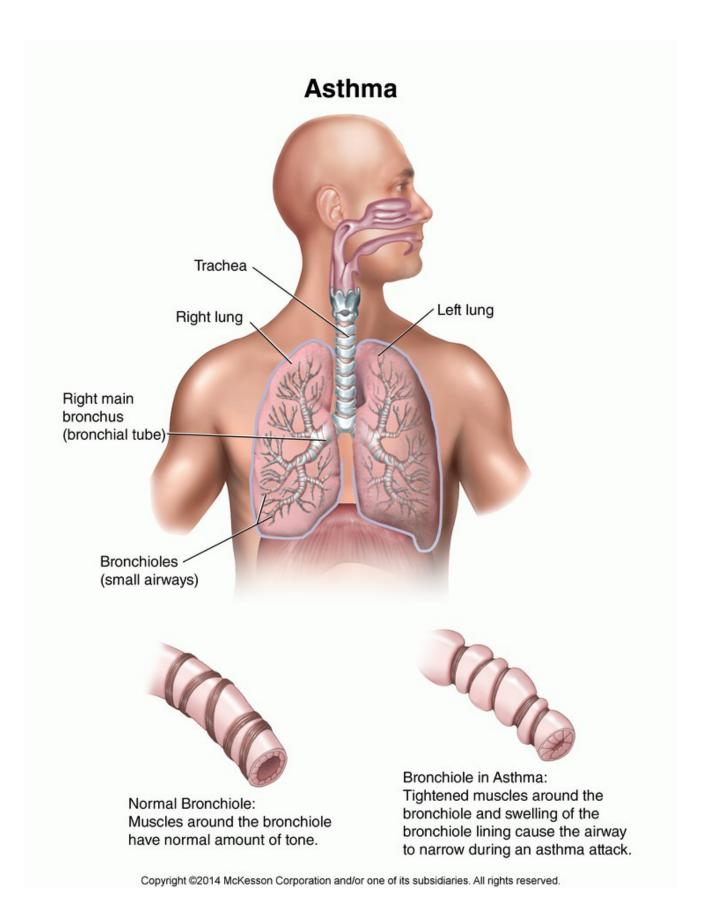
- · Tell your healthcare team if you have new or worsening:
 - Trouble breathing
 - · Wheezing (a high-pitched whistling sound when you breathe in or out)
 - Chest tightness
 - Cough
- Ask questions about any medicine or treatment or information that you do not understand.

How long will I be in the hospital?

How long you stay in the hospital depends on many factors. The average amount of time to stay in the hospital to treat asthma is 3 to 4 days. Your provider will make sure that you are breathing easily, your oxygen levels and other medical conditions are stable, and that you will be able to care for yourself when you go home

Developed by RelayHealth.

This content is reviewed periodically and is subject to change as new health information becomes available. The information is intended to inform and educate and is not a replacement for medical evaluation, advice, diagnosis or treatment by a healthcare professional.



My Asthma Action Plan

Name: _					Date:	
Parent/Guardian:						
Healthcare Provider:						
Phone for healthcare provider:						
Phone fo	Phone for taxi or friend: Emergency #911_					
Other ins	structions:					
	 Breathing is easy. No cough or wheeze. 	Use asthma				
8 =	Can work and play	Medicine:	How taken:	How much:	When: times a day	
GO	and play				times a day	
feel GOOD (Green)					times a day	
=	Peak Flow Numbers:		• • • • • • • • • • • • • • • • • • • •	take puffs o		
	Cough	TAKEpuffs of	of quick-relief medi	cine. If not back in th	ne Green Zone within 20 to 30	
b	WheezeHard to breathe	Medicine:	How taken:	How much:	When:	
do NOT feel good (Yellow)	 Wake up at night. Can do some, but not 				everyhours	
ig (€	all activities.	KEED HOING I		4		
VOT feel (Yellow)		KEEP USING long Medicine:	-term control medic		When:	
일논						
ор					times a day	
	Peak Flow Numbers: to	Call healthcare pro happen more than	wider if quick-relief twice a week.	medicine does not v	vork OR if these symptoms	
	 Medicine does not help. 	Get help now!	Take these quick-re	elief medicines until :	you get emergency care.	
	 Breathing is hard and fast. 	Medicine:	How taken:	How much:	When:	
ᆿ	Can't walk well. Can't					
M (talk. 🚅					
feel AW (RED	• Feel very					
l fee	scared					
	Peak Flow Number: Under				athe OR if lethargic OR if skin or fingernails are gray or blue.	

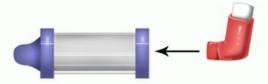
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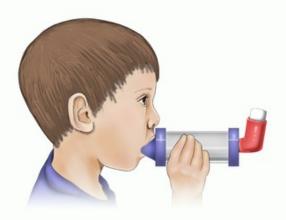
Metered-Dose Inhaler: How to Use with a Spacer



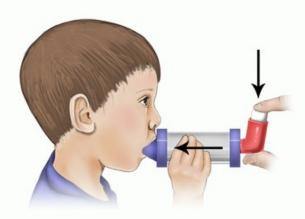
1. Shake the medicine.



2. Insert the mouthpiece of the inhaler into the rubber-sealed end of the spacer.



Breathe all of the air out of your lungs. Then put the spacer into your mouth between your teeth. Make a tight seal around the mouthpiece with your lips.



 Press the metered-dose inhaler down once to release a spray of medicine.
 The medicine will be trapped in the spacer. Breathe in slowly and deeply.



 Hold your breath for 5 to 10 seconds and then breathe out slowly.
 If you cannot hold your breath, another method is to breathe in and out slowly for 3 to 5 breaths.

Metered-Dose Inhaler: How to Use



1. Shake the medicine.



Or



2a. Hold the inhaler so that the mouthpiece is 1 and 1/2 to 2 inches (about 2 to 3 finger widths) in front of your open mouth. Breathe out normally. Press the inhaler down once so it releases a spray of medicine into your mouth while you breathe in slowly. Continue to breathe in as slowly and deeply as possible.

2b. If holding the inhaler in front of your mouth is too hard, breathe out all the way and then place the mouthpiece in your mouth and close your lips around it. Press the inhaler down once to release a spray of medicine into your mouth while you breathe in slowly.



 Hold your breath for 10 seconds, or as long as is comfortable.
 Breathe out slowly.

How to Use a Nebulizer



1. Put medicine into the medicine cup.



Attach the mouthpiece or mask to the medicine cup.



3. Attach the medicine cup to the compressor tubing.



 Place the mouthpiece in your mouth or place the face mask over your nose and mouth.
 Breathe through your mouth until all of the medicine is gone.

Ask your healthcare provider or pharmacist if you should wear gloves when you use a nebulizer to give medicine to someone else.

Peak Flow Record

Date	Time	Peak Flow
-		

Respiratory System

