

Appendix B: Pediatric Asthma – Education Checklist

Instructions for healthcare professionals

Please review education topics with patient/family and initial beside each topic to indicate completion.



Review the basics of asthma.

- Airway inflammation (swelling), increased mucous, tight airway muscles and can be intermittent/variable in nature.



Review symptoms and asthma control.

- Coughing, wheezing, having hard time breathing.
- Knowing what signs to watch for; trouble breathing, breathing faster, nasal flaring, indrawing, can't take a deep breath.



Assess technique and demonstrate optimal technique. Review triggers.

- Assess MDI/spacer technique and device recommendations
- Not everyone has the same triggers and it is important for patients to know what their triggers are (e.g. colds, smoke, allergies). Indicate triggers on the patient's individual action plan.
- Trigger avoidance can reduce the amount of medication needed to control the patient's asthma and can reduce asthma symptoms.



Discuss when and where to go for help. When to go to the Emergency Department.

- Needing Rescue medications more than every four hours
- Or having difficulty breathing even after taking rescue medication



Review asthma medications; what they are for and when to use them.

- *Reliever/Rescue* (often a blue inhaler): Use as needed to help breathing get better. It works by temporarily relaxing muscles around the airway.
- *Preventer/Controller*: Use every day to control airway swelling and inflammation.
- Discharge Plan: Medications, prescription and follow up instructions.



Review asthma action plan.

- Asthma fillable action plans for ages 1-5 years and 6-18 years are available and can be filled out and provided to families on discharge www.bcguidelines.ca