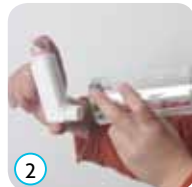


Using a Spacer

If you use a metered dose inhaler (MDI), a spacer will help get the correct dose of medication into your lungs. Ask your doctor about a spacer. If you don't already have one, you need one. Spacers increase your medication's effectiveness by up to 50%.

- 1 shake the inhaler well (holding it upright)
- 2 fit the inhaler into the opening at the end of the spacer
- 3 seal lips firmly around the mouth piece
- press the inhaler once only
- 4 take 1–6 slow breaths in and out through your mouth. Do not remove the spacer from your mouth between breaths.
- remove the spacer from your mouth
- 5 repeat steps 1-4 for further doses.



Cleaning your MDI

All MDIs (Metered Dose Inhalers) need to be washed weekly. Here is how to wash and dry an MDI.

- 1 remove the plastic mouthpiece cap
- 2 remove the metal canister (don't put it in water)
- 3 rinse the mouthpiece and cap under warm water for at least 30 seconds
- 4 shake off any excess water and dry the mouthpiece and cap thoroughly
- 5 put the metal canister back in, and replace cap.

Check the manufacturers' instructions for any special instructions for your type of inhaler.



Wash your spacer once a week with warm water and dishwashing liquid. **DO NOT RINSE. DRIP DRY** to ensure that your medicine gets into your lungs and doesn't stick to the sides of the spacer.

Child Asthma Plan

See your doctor for an influenza vaccination every March



This Asthma Action Plan belongs to:

Name: _____

Date Prepared: ___/___/___

Doctors Signature: _____

Plan to be reviewed when treatment changed

ASTHMA SYMPTOMS

WHAT TO DO

ALERTS



WELL

ASTHMA IS **WELL** CONTROLLED WHEN:

- there is no cough or wheeze
- play or behaviour is the same as other children
- reliever inhaler is used less than 3 times per week

Preventer	puffs	morning and night every day
Reliever	puffs	as needed
Symptom controller	puffs	morning and night every day
Exercise management	puffs	5 – 10 minutes before exercise
Emergency Reliever		

Use preventer and symptom controller inhalers, if prescribed every day **even when well**

If reliever is used **regularly** more than 3 times per week see your doctor

Always use a spacer



WORSE

ASTHMA IS GETTING **WORSE** WHEN:

- child is getting a cold
- occasional cough or wheeze at night
- cough or wheeze when child is excited or playing
- needing reliever inhaler to control asthma symptoms

Continue to use your preventer/symptom controller every morning and night.

Plus take your reliever inhaler.

If not improving within 4 hours of taking reliever inhaler or symptoms worsen move to **worried** zone

If no better after 1-2 days see your doctor:

Phone:

However, If not improving within one hour of taking reliever inhaler move to Emergency zone



WORRIED

ASTHMA IS **WORRYING** WHEN CHILD IS WORKING HARD TO BREATHE:

- breathing is faster than usual
- “sucking in” around ribs/throat (tip: remove clothing and LOOK at chest/tummy)
- change in normal behaviour e.g. tired, miserable, irritable, quiet

Take 6 puffs of emergency reliever inhaler via a spacer – child to take 6 breaths for each puff

- if needed more than every four hours see a doctor **today**
- if needed more than every two hours see a doctor **now**

Other instructions:

EMERGENCY

DIAL 111 FOR AN AMBULANCE WHEN:

- reliever is not working
- child is finding it hard to speak, cry or feed
- child is blue or pale
- parent or child is frightened

While waiting for the ambulance: Keep child calm and sitting upright

Give 1 puff of emergency reliever:

via a spacer — child to take 6 breaths for each puff. Repeat 6 times.

Repeat every 6 minutes until ambulance arrives.