

Appendices

Appendix 1: Asthma attack poster



What to do if a child has an ASTHMA ATTACK

Actions to take if a child has an asthma attack and when to call 999.

- 1** Help them to sit up – don't let them lie down. Try to keep them calm.
- 2** Help them take one puff of their reliever inhaler (with their spacer, if they have it) every 30 to 60 seconds, up to a total of 10 puffs.
- 3** If they don't have their reliever inhaler, or it's not helping, or if you are worried at any time, call 999 for an ambulance.
- 4** If the ambulance has not arrived after 10 minutes and their symptoms are not improving, repeat step 2.
- 5** If their symptoms are no better after repeating step 2, and the ambulance has still not arrived, contact 999 again immediately.

Important: This asthma attack advice does not apply to MART inhalers. Speak to your GP or asthma nurse for more information.

 A school asthma card contains contact details and essential information about a child's asthma. Scan the QR code to get yours.

ASTHMA+ LUNG UK

AsthmaAndLung.org.uk

Asthma and Lung UK is a charitable company limited by guarantee with company registration number 0658584, with registered charity number 347610 in England and Wales, SC036465 in Scotland and 01077 in the Isle of Man.

Appendix 2: Asthma action plan

My asthma triggers

List the things that make your asthma worse so you can try to avoid or treat them.

I will see my doctor or asthma nurse **at least** once a year (but more if I need to)

Date my asthma plan was updated:

Date of my next asthma review:

Doctor/asthma nurse contact details:

Parents and carers – get the most from your child's action plan

- Take a photo and keep it on your mobile (and your child's mobile if they have one)
- Stick a copy on your fridge door
- Share your child's action plan with their school

Learn more about what to do during an asthma attack asthmaandlung.org.uk/child-asthma-attacks

ASTHMA QUESTIONS?

Parents and carers ask our respiratory nurse specialists
Call **0300 222 5800**
WhatsApp **07999 377 775**
(Monday-Friday, 9am-5pm over 16 only)

ASTHMA+ LUNG UK

CHILD ASTHMA ACTION PLAN

Fill this in with your GP or nurse

Name and date:

Always keep your reliever inhaler (usually blue) and your spacer with you. You might need them if your asthma gets worse.

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Asthma and Lung UK, a charitable company limited by guarantee with company registration number 01662614, with registered charity number 202730 in England and Wales, SC038415 in Scotland, and 1177 in the Isle of Man.

1 My every day asthma care

I need to take my preventer inhaler every day.

It is called:

and its colour is:

I take puffs of my preventer inhaler in the morning and puffs at night. I do this every day even if my asthma's OK

Other asthma medicines I take every day:

My reliever inhaler helps when I have symptoms.

It is called:

and its colour is:

I take puffs of my reliever inhaler when I wheeze or cough, my chest hurts or it's hard to breathe.

If I need my reliever inhaler (usually blue) when I do sports or activity, I need to see my doctor or my asthma nurse.

2 My asthma is getting worse if...

- I wheeze, cough, my chest hurts, or it's hard to breathe **or**
- I need my reliever inhaler (**usually blue**) three or more times a week **or**
- I'm waking up at night because of my asthma (this is an important sign and I will book a next day appointment with my GP or nurse).

If my asthma gets worse, I will:

- Take my preventer medicines as normal
- And also take puffs of my reliever inhaler (**usually blue**) every four hours if needed
- See my doctor or nurse within 24 hours if I don't feel better.

URGENT!

If your reliever inhaler is not lasting four hours, you need to take emergency action now (see section 3)

Remember to use my spacer with my inhaler if I have one.

If I don't have one, I'll check with my doctor or nurse if it would help me.

Other things my doctor or nurse says I need to do if my asthma is getting worse (e.g. check my peak flow)

3 I'm having an asthma attack if...

- My reliever inhaler isn't helping or I need it more than every four hours **or**
- I can't talk, walk or eat easily **or**
- I'm finding it hard to breathe **or**
- I'm coughing or wheezing a lot or my chest is tight/hurts.

If I have an asthma attack I will:

- Call for help. Sit up – don't lie down. Try to keep calm.
- Take one puff of my reliever inhaler (with my spacer, if I have it) every 30 to 60 seconds, up to a total of 10 puffs.
- If I don't have my reliever inhaler, or it's not helping, or if I am worried at any time, **call 999 for an ambulance.**
- If the ambulance has not arrived after 10 minutes and my symptoms are not improving, repeat step 2.
- If my symptoms are no better after repeating step 2, and the ambulance has still not arrived, **contact 999 again immediately.**

Even if I start to feel better, I don't want this to happen again, so I need to see my doctor or asthma nurse today.

You can access a MART plan here;

[mart-asthma-action-plan](#)

And an AIR plan here:

[AIR action plan A4 trifold colour Final.pdf](#)

N.B please check the licensed age for MART and AIR inhalers here;

[AIR-and-MART-inhalers.pdf](#)

Appendix 3: Asthma control test for children aged 4-11 years

Name: _____

Date: _____



Childhood Asthma Control Test for Children 4 to 11 years

This test will help your doctor decide if your asthma is well controlled or not.

How to take the Childhood Asthma Control Test:

Step 1: Let your child answer questions 1-4. You may help your child understand the question but let them select the response.

Step 2: Complete questions 5-7 on your own without letting your child's response influence your answers.

Step 3: Write the number of each answer in the score box provided

Step 4: Add up each score box to find out your child's total score

Step 5: Take the total score to your doctors to talk about your child's asthma.

19

If your child's score is less than 19, it may be a sign that their asthma is not as controlled as it could be. Take this score to your doctor to talk about the results.

Have your child answer these questions:

1. How is your asthma today?

0 Very Bad	1 Bad	2 Good	3 Very Good

Score

2. How much of a problem is your asthma when you exercise or play sports?

0 It's a big problem I can't do what I want to do	1 It's a problem and I don't like it	2 It's a little problem but I'm ok	3 It's not a problem

3. Do you cough because of your asthma?

0 Yes, all of the time	1 Yes, most of the time	2 Yes, some of the time	3 No, none of the time

4. Do you wake up during the night because of your asthma?

0 Yes, all of the time	1 Yes, most of the time	2 Yes, some of the time	3 No, none of the time

Please complete the following questions on your own:

5. During the last 4 weeks, how many days did your child have day time asthma symptoms?

5 Not at all	4 1-3 days	3 4-10 days	2 11-18 days	1 19-24 days	0 Everyday
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6. During the last 4 weeks, how many days did your child wheeze during the day because of asthma?

5 Not at all	4 1-3 days	3 4-10 days	2 11-18 days	1 19-24 days	0 Everyday
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7. During the last 4 weeks, how many days did your child wake up in the night because of asthma?

5 Not at all	4 1-3 days	3 4-10 days	2 11-18 days	1 19-24 days	0 Everyday
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**Total
Score**

www.beatasthma.co.uk

Appendix 4: Current STU respiratory searches

- People (including COPD) prescribed ≥ 12 SABA in 12 months
- Non-COPD Patients prescribed ≥ 12 SABA in 12 months
- Non-COPD Patients prescribed 6-11 SABA in 12 months
- Non-COPD Patients prescribed 3-5 SABA in 12 months
- Patients who are only prescribed a SABA
- Patients prescribed LABA without ICS
- Patients prescribed high strength ICS (adults 16 years and over)
- Patients prescribed high strength ICS (children)
- Patients prescribed 14 or more ICS in last 12 months
- Patients prescribed both pMDI and DPI/soft mist inhalers
- Patients prescribed separate inhalers for pMDI or DPI/soft mist where a combination is available
- Patients suitable to be prescribed triple therapy
- Patients prescribed mucolytics > 6 months.