



Four Visit Education Plan for the Asthma Prevention Office Visit

RECOMMENDATION: After initial asthma diagnosis, patient should be seen every month for 3 months

	PROVIDER	NURSE
INITIAL VISIT	<ul style="list-style-type: none"> ▪ Principles of asthma (airway inflammation, hyperresponsiveness, mucous production) ▪ Medications (rescue versus control) ▪ Develop action plan for patient ▪ When to seek medical advice- recognition of intensity and frequency of symptoms - provide appropriate phone numbers ▪ Refer to CAPP 	<ul style="list-style-type: none"> ▪ Review medications ▪ Have parent restate medication information; be sure rescue and preventive principles are understood. Remind parent to bring in medications at next visit ▪ Teach devices – have parent demonstrate device operation ▪ Review medicine plan ▪ Refer to CAPP
FIRST FOLLOW UP VISIT	<ul style="list-style-type: none"> ▪ Self-evaluation of progress in asthma control - review symptoms ▪ If applicable, stress importance of daily peak flow monitoring ▪ Take peak flow measurement during the exam 	<ul style="list-style-type: none"> ▪ Review medications, devices and peak flow diary- have parent demonstrate use of peak flow meter, inhaler and other devices ▪ Use of asthma action plan
SECOND FOLLOW UP VISIT	<ul style="list-style-type: none"> ▪ Assist family to identify triggers in the environment ▪ Identify avoidance strategies ▪ Review all medicines and interpret peak flow and symptoms from peak flow diary ▪ Discuss school and sports issues 	<ul style="list-style-type: none"> ▪ Provide trigger sheet for parent to complete <u>prior to exam</u> ▪ Review triggers and avoidance techniques ▪ Obtain peak flow diary from patient at assessment ▪ Review action plan
ALL FOLLOW-ING VISITS	<ul style="list-style-type: none"> ▪ Review and reinforce: <ul style="list-style-type: none"> - medicines - environmental control strategies - peak flow monitoring - when to seek medical advice ▪ Periodically review and adjust written management plan 	<ul style="list-style-type: none"> ▪ Review asthma action plan and device technique ▪ Confirm patient knows what to do for exacerbation ▪ Review any other area of concern

Remind patient to bring asthma medications and devices to every visit!

ASSESSMENT QUESTIONS:*

Focus on: Patient Concerns, Goals of Therapy, Quality of Life, Expectations

Initial Visit

- What worries you most about your asthma?
- What do you want to accomplish at this visit?
- What do you want to be able to do that you can't do now because of your asthma?
- What do you expect from treatment?
- What medicines have you tried?
- What questions do you have today?

First Follow-Up Visit

- What medicines are you taking?
- How and when are you taking them?
- What problems have you had using your medicines?
- Please show me how you use your inhaled medicines.

Second Follow-Up Visit

- Have you noticed anything in your home, work or school that makes your asthma worse?
- Describe for me how you know when to call your doctor or go to the hospital for asthma care.
- What questions do you have about your asthma management plan? Can we make it easier?
- Are your medicines causing you any problems?

All Subsequent Visits

- Ask relevant questions from previous visits
- How have you tried to control things that make your asthma worse?
- Please show how you use your inhaled medicine.

Asthma Severity	Minimum Recommended Frequency for Follow Up Visits
Mild Intermittent	Every six months (twice a year)
Mild Persistent	Every 4 months (3 times a year)
Moderate Persistent	Every 3 months (4 times a year)
Severe Persistent	Every 1- 2 months (six times a year)

“To obtain maximum impact, asthma education needs to be relevant, realistic and repeated.”
(Kolbe et al. Chest, 1996)

*Excerpted from *Practical Guide for the Diagnosis and Management of Asthma*, based on the Expert Panel Report2: *Guidelines for the Diagnosis and Management of Asthma*.