

Asthma Clinic Provider

Susan Montag, CRNP

Susan has over 10 years experience working with patients diagnosed with asthma. Her doctorate research was on school-aged children with asthma in Western Pennsylvania. She is a member of multiple organizations that support lung and asthma health. In consultation with onsite Respiratory Therapists, Pulmonologist, and Otolaryngologist Specialists, Susan creates a patient specific action plan.



CONTACT US

Punxsutawney Area Hospital
81 Hillcrest Drive Suite 100
Punxsutawney PA 15767
814-938-7066
www.pah.org

ASTHMA CLINIC

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All Inclusive Comprehensive Visit

Visits Include:

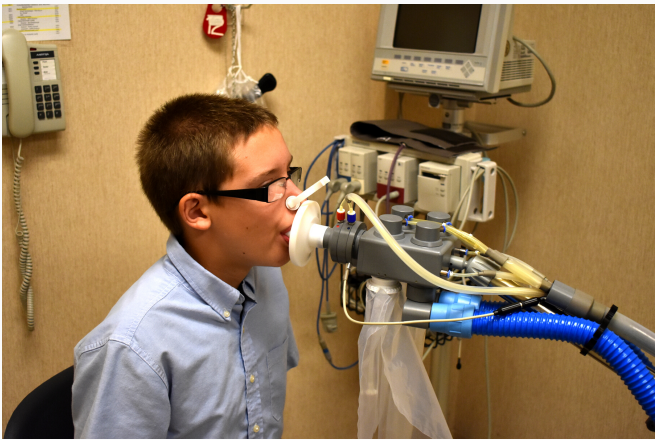
Pulmonary Function Testing
Asthma Education
Action Plan Creation & Management
Medication Education & Management
Peak Flow Assessment

ASTHMA ACTION PLAN

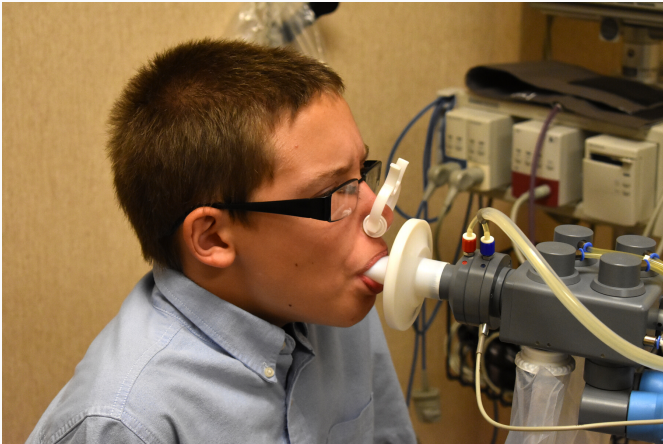
An asthma action plan is an important tool to share with caregivers of children with asthma, including daycare providers, schools and aftercare programs. Use the school-aged asthma action plan, Asthma Action plan for Home and School that includes language for school-aged children to self-carry their asthma inhaler in school.

Your asthma action plan should include:

- Factors that make your asthma worse, "asthma triggers".
- Medicines you take to treat your asthma with specific names of each medicine.
- Symptoms or peak flow measurements (if used) that indicate worsening asthma.
- Medicines to take based on your signs, symptoms or peak flow measurements (if used)
- Symptoms or peak flow measurements (if used) that indicate the need for urgent medical attention.
- Telephone numbers for an emergency contact, your healthcare provider, and your local hospital.



By measuring how much air you exhale, and how quickly you exhale, spirometry can evaluate a broad range of lung diseases. In a spirometry test, while you are sitting, you breathe into a mouthpiece that is connected to an instrument called a spirometer. The spirometer records the amount and the rate of air that you breathe in and out over a period of time. When standing, some numbers might be slightly different. For some of the test measurements, you can breathe normally and quietly. Other tests require forced inhalation or exhalation after a deep breath. Sometimes, you will be asked to inhale a different gas or a medicine to see how it changes your test results.




PEAK FLOW

About

Peak flow meter measurements can help your healthcare provider make decisions about your treatment and adjust your medicines, and the measurements also can alert you when your asthma symptoms are worsening. Asthma sometimes changes gradually. Your peak flow may show those changes before you feel them. Peak flow readings can show you when to start following the steps on your asthma action plan that you developed with your healthcare provider. It can help you determine the severity of the episode; decide when to use your rescue medicine; and decide when to seek emergency care. A peak flow meter may help you and your healthcare provider identify causes of your asthma at work, home or play, and it can help parents determine what might be triggering their child's asthma.

Peak Flow Rates

A "normal" peak flow rate is based on a person's age, height, sex and race. A standardized "normal" may be obtained from a chart comparing the person with asthma to a population without breathing problems. A patient can figure out what is normal for them, based on their own peak flow rate. Therefore, it is important for you and your healthcare provider to discuss what is considered "normal" for you. Once you have learned your usual and expected peak flow rate, you will be able to better recognize changes or trends in your asthma. Three zones of measurement are commonly used to interpret peak flow rates. It is easy to relate the three zones to the traffic light colors: green, yellow and red. In general, a normal peak flow rate can vary as much as 20 percent.



My Asthma Action Plan

Name: _____ DOB: ____/____/____

Severity Classification: ☐ Intermittent ☐ Mild Persistent ☐ Moderate Persistent ☐ Severe Persistent

Asthma Triggers (list): _____

Peak Flow Meter Personal Best: _____

Green Zone: Doing Well

Symptoms: Breathing is good – No cough or wheeze – Can work and play – Sleeps well at night
Peak Flow Meter _____ (more than 80% of personal best)

Control Medicine(s)	Medicine	How much to take	When and how often to take it

Physical Activity ☐ Use Albuterol/Levalbuterol _____ puffs, 15 minutes before activity
☐ with all activity ☐ when you feel you need it

Yellow Zone: Caution

Symptoms: Some problems breathing – Cough, wheeze, or tight chest – Problems working or playing – Wake at night
Peak Flow Meter _____ to _____ (between 50% and 79% of personal best)

Quick-relief Medicine(s) ☐ Albuterol/Levalbuterol _____ puffs, every 4 hours as needed

Control Medicine(s) ☐ Continue Green Zone medicines
☐ Add _____ ☐ Change to _____

You should feel better within 20–60 minutes of the quick-relief treatment. If you are getting worse or are in the Yellow Zone for more than 24 hours, THEN follow the instructions in the RED ZONE and call the doctor right away!

Red Zone: Get Help Now!

Symptoms: Lots of problems breathing – Cannot work or play – Getting worse instead of better – Medicine is not helping
Peak Flow Meter _____ (less than 50% of personal best)

Take Quick-relief Medicine NOW! ☐ Albuterol/Levalbuterol _____ puffs, _____ (how frequently)

Call 911 immediately if the following danger signs are present:

- Trouble walking/talking due to shortness of breath
- Lips or fingernails are blue
- Still in the red zone after 15 minutes

Emergency Contact Name _____ Phone (____) _____ - _____

Emergency Contact Name _____ Phone (____) _____ - _____

Date: ____/____/____

1-800-LUNGUSA | Lung.org