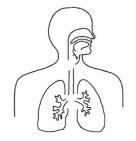
Mississippi Department of Health/Asthma Coalition of Mississippi

F.L.A.R.E. Plan for Inpatient Hospital Discharge



Asthma

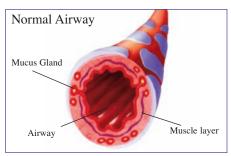
Asthma is a life-long disease that can make it hard to get air in and out of the lungs. Asthma triggers make the air tubes that carry air in and out of the lungs get smaller.

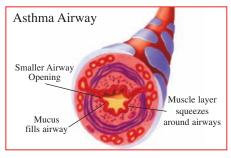
Here is what happens:

- Breathing tubes in the lungs swell and make extra mucus
- Muscles around the breathing tubes get tight and make them smaller
- Smaller breathing tubes then get clogged with the extra mucus
- Swelling, muscle tightness and mucus make it harder to breathe
- Coughing, wheezing, chest tightness or pain may start

Not all asthma flare-ups are the same. Some are worse than others. In severe asthma flare-ups, breathing tubes get so small that air cannot get in and out of the lungs

People can die if an asthma flare-up is severe.





Common Triggers:

Tell your doctor about the things that make your asthma worse

- Breathing in chemicals, dusts, fumes
- · Colds, flu, or respiratory infections
- Animals
- Cockroaches
- Dust
- Mice
- Pollen and mold
- Food allergies (nuts, dairy products, etc.)
- Strong odors
- Climate changes (weather, temperature, etc.)
- Exercise
- Cigarette, wood, and other smoke
- Medicines:______
- Other things:__

What started, or triggered, your asthma flare-up this time?

Asthma Medicines:

- Quick-relief/Rescue medicine: should help for about four hours; relaxes muscles around the breathing tubes so air can get in and out. If quick-relief medicine is needed more than two times per week, asthma is not under control. Ask a doctor about long-term control medicine.
- Long term control medicine: must be taken every day to work right. It keeps the breathing tubes from swelling, preventing most asthma flare-ups.

 This medicine can't stop a flare-up once it starts.

 During flare-ups, use quick-relief medicine right away and take long-term control medicine as usual.
- Steroid pills or syrup: can help swelling in the breathing tubes go away. This medicine must be taken as the doctor says. DON'T skip a dose, and DON'T stop taking it unless a doctor says to stop.

If the doctor provides an extra round of steroid pills or syrup, always call the doctor before using.

Most people with asthma do not get sick enough to stay in the hospital. Since it was needed, it may mean:

- ◆ Long term control medicine is not being taken the right way
- Long term control medication has been prescribed, but is not enough; or none prescribed
- Triggers that start asthma symptoms are still in the home, work, or school environment

Avoid flare-ups by using this F.L.A.R.E. plan until a primary doctor can be seen.

If you smoke,
talk to a doctor
for help quitting.
Never let others
smoke near you or
your children.

Mississippi Department of Health/Asthma Coalition of Mississippi F.L.A.R.E. Plan for Inpatient Hospital Discharge

${f F}$ ollow up with a primary doctor. Call to make an appointment to be seen within $___$ days.

Ask to speak to the office nurse if it is difficult to make an appoint	tment
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- At the follow up appointment: bring all medications and this plan; ask the doctor to help set up an Asthma Action Plan (using the attached copy) to follow every day to keep asthma under control; write down questions and the doctor's answers.

Learn about asthma medicines. Take ALL these medicines as the doctor says, even if feeling better.

Kind of medicine	Name of medicine	How much	How often & how long to take it
Quick-relief/Rescue	1.		
	2.		
	3.		
Long-term control	1.		
	2.		
	3.		
Steroid pills or syrup	1.		

Asthma is a life-long (chronic) disease.

Even if breathing gets better after emergency care, long-term control is necessary. Without it, there are risks of more severe flare-ups, hospital visits, and even death.

- ☐ If quick-relief medicine (usually an albuterol inhaler) is used more than twice a week, symptoms disturb sleep more than twice a month, or exercise increases symptoms, asthma is NOT under control. See a doctor or asthma specialist to make a plan to take control.
- ☐ Take long-term control medicine every day as ordered by the doctor.
- ☐ Figure out what makes asthma flare up and try to stay away from these "triggers."

Respond to these warning signs that asthma is getting worse:

- ☐ Chest feels tight/chest pain
- ☐ Short of breath
- ☐ Wheezing
- ☐ Repeated/persistent coughing
- ☐ Wake up 2 nights in a row with symptoms
- ☐ Peak flow is getting low (Low less than 80% of best; in "yellow zone". The doctor can prescribe a peak flow meter if needed, so be sure and ask.)

Keep taking/giving medicines as prescribed and call the doctor.

${f E}$ mergency care may be needed if:

- ☐ Talking/walking is hard because of breathing trouble
- □ Nostrils flare open wide when breathing
- Breathing is hard work (skin sucks in at rib cage or above breast bone)
- Ouick-relief medicine used more than every 4 hours
- □ Peak flow continues to drop (<u>Very low less than 50% of best; in "red zone."</u>)

Take/give quick-relief medicine and wait 20 minutes. If not feeling better, take/give it again and wait 20 minutes.

If still not better, take it again and call the doctor or 911!

To Learn More...

Mississippi Department of Health, Asthma Program: 1-601-576-7415 or www.msdh.state.ms.us/asthma

Asthma Coalition of Mississippi AND American Lung Association of Mississippi: 1-601-206-5810, 1-800-LUNGUSA, or www.lungusa.org

Allergy & Asthma Network/ Mothers of Asthmatics: www.aanma.org

Partnership for Prescription Assistance: 1-888-477-2669 or www.pparx.org





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Asthma Action Plan General Information: Name ■ Emergency contact _____ Phone numbers _____ ■ Physician/Health Care Provider _____ Phone numbers _____ Physician Signature — __ Date __ Severity Classification Triggers Exercise O Mild Intermittent O Moderate Persistent O Colds O Smoke O Weather 1. Pre-medication (how much and when) • Mild Persistent • Severe Persistent O Exercise O Dust • Air pollution O Animals O Food 2. Exercise modifications _____ Other Green Zone: Doing Well Peak Flow Meter Personal Best = **Symptoms** Control Medications ■ Breathing is good How Much to Take Medicine When To Take It ■ No cough or wheeze Can work and play ■ Sleeps all night **Peak Flow Meter** More than 80% of personal best or _____ **Yellow Zone:** Getting Worse Contact Physician if using quick relief more than 2 times per week. Continue control medicines and add: **Symptoms** ■ Some problems breathing How Much to Take Medicine When To Take It ■ Cough, wheeze or chest tight ■ Problems working or playing ■ Wake at night IF your symptoms (and peak flow, if used) IF your symptoms (and peak flow, if used) **Peak Flow Meter DO NOT return to the GREEN ZONE after** return to Green Zone after one hour of the Between 50 to 80% of personal best or quick relief treatment, THEN 1 hour of the quick relief treatment, THEN ___ to ____ • Take quick-relief medication every O Take quick-relief treatment again 4 hours for 1 to 2 days O Change your long-term control medicines by O Change your long-term control medicines by • Call your physician/Health Care Provider O Contact your physician for follow-up care within _____ hours of modifying your medication routine Red Zone: Medical Alert **Ambulance/Emergency Phone Number:** Continue control medicines and add: **Symptoms** ■ Lots of problems breathing How Much to Take Medicine When To Take It ■ Cannot work or play

- Getting worse instead of better
- Medicine is not helping

Peak Flow Meter

Between 0 to 50% of personal best or

____ to ____

Go to the hospital or call for an ambulance if

- O Still in the red zone after 15 minutes
- O If you have not been able to reach your physician/health care provider for help

Call an ambulance immediately if the following danger signs are present

- Trouble walking/talking due to shortness of breath
- O Lips or fingernails are blue