Inclusion Criteria: 2 years old and older with a diagnosis of asthma with wheezing, difficulty breathing, cough or hypoxia

Exclusion Criteria: < 2 years of age, diagnosed with viral bronchiolitis or croup. Patient history of Cystic Fibrosis, Chronic Lung Disease (BPD), Cardiac Disease, Airway Anomalies

Management of your patient may require a more individualized approach.

Review orders and ensure systemic steroids have been given prior to admission to floor. Contact Licensed Independent Practitioner (LIP) if not given.

Review orders and ensure medications (albuterol, oxygen to keep saturations >90%, systemic steroids and home medications) have been ordered.

Identify triggers for asthma exacerbation. (allergies, reflux, infections, medication adherence).

Advise parents of how to contact nurse if patient's condition worsens.

Registered nurse (RN) to obtain vital signs and Admission Pediatric Asthma Score (Admission PAS) within 30 minutes of patient’s arrival to the floor.

Review most recent PRE-albuterol Pediatric Asthma Score (PRE-Albuterol PAS).

Use the greater of the most recent PRE-Albuterol PAS and Admission PAS to determine initial standing albuterol orders.

Severe = PAS 6-10
- Albuterol MDI 8 puffs
  Alternative: Albuterol 5mg nebulized
- Notify LIP immediately
- Consider Rapid Response
- Repeat PAS within 15 min. after albuterol.
  (Preferably by the same provider)
- Rapid Response if PAS is equal to or greater than 6 after albuterol.

Moderate = PAS 4-5
- Albuterol MDI 8 puffs Q2 x 6 hours
  Alternative: Albuterol 5mg nebulized Q2 x 6 hours
- Repeat PAS 15 min. after albuterol
  (preferably by the same provider)
- Notify LIP if PAS increases above this level or does not decrease following albuterol
- LIP to reassess after 12 hours of Q3 treatment

Mild - Moderate = PAS 3
- Albuterol MDI 8 puffs Q3 x 12 hours
  Alternative: Albuterol 2.5mg nebulized Q3 x 12 hours
- Repeat PAS 15 min. after albuterol
  (preferably by the same provider)
- Notify LIP if PAS increases above this level or does not decrease following albuterol
- LIP to reassess after 12 hours of Q4 treatment

Mild = PAS 0-2
- Albuterol MDI 4 puffs Q4 x 12 hours
  Alternative: Albuterol 2.5mg nebulized Q4 x 12 hours
- Repeat PAS 15 min. after albuterol
  (preferably by the same provider)
- Notify LIP if PAS increases above this level or does not decrease following albuterol
- LIP to reassess after 12 hours of Q4 treatment

Discharge Criteria
- Patient on room air
- Albuterol spaced to every 4 hours
- Asthma education completed
- Contact PCP for follow up
- Rx for albuterol Q4 hours for 48 hours
- Rx for oral corticosteroids for 3-10 days
- Ensure patient has inhaled corticosteroids
- Provide asthma action plan
- Consider flu shot when appropriate

Please contact UNC Pediatric Pulmonology at 919-966-1055 with questions or comments.
1. PAS should be done prior to treatment and repeated 15 minutes afterward (preferably by the same provider).
2. Add elements into a single score.
3. Document score in Epic flowsheet

<table>
<thead>
<tr>
<th>Element</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>0</strong></td>
<td><strong>1</strong></td>
</tr>
<tr>
<td><strong>1. Respiratory Rate</strong></td>
<td>2-3 yrs</td>
</tr>
<tr>
<td>Obtain over 30 sec and multiple by 2.</td>
<td>4-5 yrs</td>
</tr>
<tr>
<td></td>
<td>6-11 yrs</td>
</tr>
<tr>
<td></td>
<td>≥ 12 yrs</td>
</tr>
<tr>
<td><strong>2. Auscultation</strong></td>
<td></td>
</tr>
<tr>
<td>Auscultate anterior and posterior lung fields.</td>
<td></td>
</tr>
<tr>
<td>Assess air entry and presence of wheezing.</td>
<td></td>
</tr>
<tr>
<td><strong>3. Work of Breathing</strong></td>
<td></td>
</tr>
<tr>
<td>Assess for nasal flaring or retractions.</td>
<td></td>
</tr>
<tr>
<td><strong>4. Dyspnea</strong></td>
<td></td>
</tr>
<tr>
<td>As developmentally appropriate.</td>
<td></td>
</tr>
<tr>
<td>*If sleeping AND not showing physical signs of respiratory distress, score the patient 0 (zero) for this category.</td>
<td></td>
</tr>
<tr>
<td><strong>5. O₂ Requirement</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Do not take patients off supplemental oxygen to obtain score.</strong></td>
<td></td>
</tr>
</tbody>
</table>