

UNC Children's Respiratory Care Services

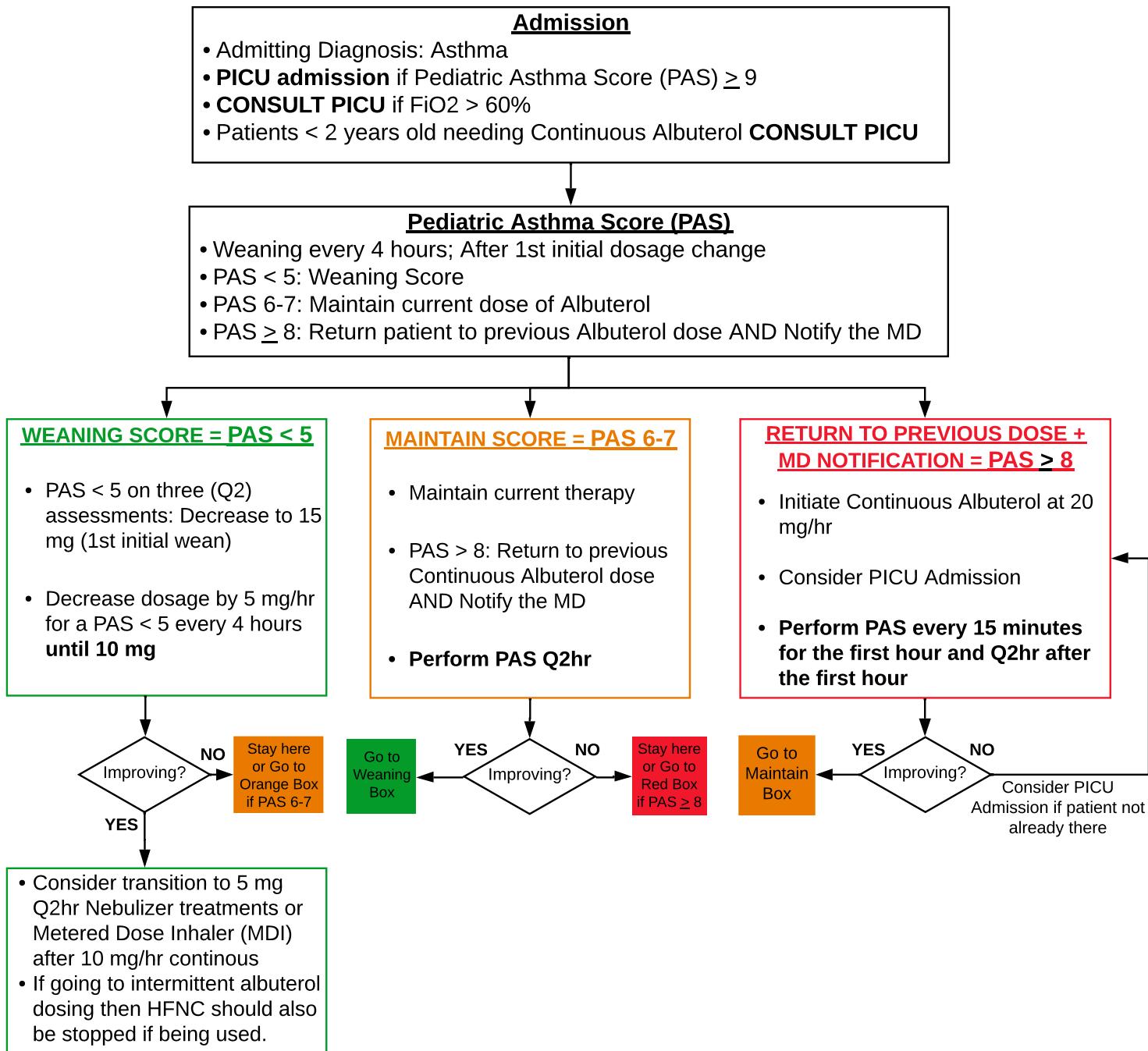
Continuous Albuterol Pathway for Asthma Patients

The following information is intended as a guideline for the acute management of children with asthma.
Management of your patient may require a more individualized approach

Inclusion Criteria: 2 yo or greater with hx of asthma or recurrent wheezing presenting with acute onset wheezing, cough, shortness of breath, hypoxemia, tachypnea, or other signs of increased work of breathing

Exclusion Criteria: Bronchiolitis, Viral pneumonitis, Aspiration Pneumonia, Croup, Cystic Fibrosis, Airway Anomalies, Cardiac disease

ONLY AEROGEN ULTRA FACE MASK TO BE USED TO DELIVER CONTINUOUS ALBUTEROL



PAS SCORE CHART ON NEXT PAGE

PEDIATRIC ASTHMA SCORE (PAS)

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, Scoring Tools, and/or other areas of clinical documentation

ELEMENT	POINTS			
	0	1	2	
1. Respiratory Rate Obtain over 30 sec and multiply by 2	2 - 3 yrs	≤ 34	35-39	≥ 40
	4 - 5 yrs	≤ 30	31-35	≥ 36
	6 - 11 yrs	≤ 26	27-30	≥ 31
	≥ 12 yrs	≤ 23	24-27	≥ 28
2. Auscultation Auscultate anterior and posterior lung fields Assess air entry and presence of wheezing	No Wheezes	Expiratory Wheezes	Inspiratory & expiratory wheezes <u>OR</u> diminished breath sounds	
3. Work of Breathing Assess for nasal flaring or retractions (suprasternal, intercostal, subcostal)	≤ 1 sign	2 signs	≥ 3 signs	
4. Dyspnea * As developmentally appropriate. * If sleeping AND not showing physical signs of respiratory distress, score the patient zero for this category	Speaks full sentences, playful, <u>AND</u> takes PO well	Speaks partial sentences, short cry <u>OR</u> poor PO	Speaks short phrases, grunting, <u>OR</u> unable to take PO	
5. O₂ Requirement ** ** Do not take patients off supplemental oxygen to obtain score	$\geq 92\%$ on RA		Supplemental oxygen required to maintain saturations above 92%	