## Asthma Patient Care Flow Sheet (patients aged < 6 years)

Diagnosis based on:

Asthma history alone

Asthma history and clinical exam

□ Other:\_\_\_\_\_

Asthma triggers: 🗌 Viral infections 🔲 Animals \_\_\_\_\_\_ 🔲 Exercise 🔲 Pollen/Trees 🗍 Dust Mites 🗍 Other \_\_\_\_\_\_

Date				<u> </u>	
ASTHMA CONTROL (each visit)					
Daytime symptoms (days/week)					
Need for reliever (days/week)					
Nocturnal symptoms (nights/week)					
Limitation of activity (Y/N)					
Exacerbations (# since last visit)					
Courses of systemic steroids (# since last visit)					
Last hospitalization or emergency room visit (# since last visit)					
EDUCATION					
Review medication compliance (each visit)					
Evaluate inhaler technique (have patient demonstrate at each visit) and provide handouts*					
Provide written action plan**					
Review purpose of medications					
Review trigger avoidance					
Assess for food allergy and ensure epinephrine autoinjector px is up to date					
Smoking cessation counselling for family***					
Influenza vaccine (annual)					
Pneumococcal vaccine up to date					
INVESTIGATIONS/ASSESSMENTS					
Height (cm)					
Height percentile					
Weight (kg)					
Weight percentile					
Specialist referral					

\*Refer to: www.bcchildrens.ca/KidsTeensFam/A-ZPamphlets/default.htm, \*\* Refer to Associated Document - Asthma Action Plan for Children: aged < 6 years,

\*\*\*Refer to: www2.gov.bc.ca/gov/topic.page?id=8CC17D1F894140748D740853F361D798