

COMMUNITY PEDIATRIC ASTHMA SERVICE

PREPARING FOR MY TELEPHONE APPOINTMENT

Please note: We will reschedule this appointment if we determine the location you are at is not suitable for a call - for example, if you are driving or you are in a public place.

The good news about a telephone or virtual appointment is that other family members or caregivers can join the call. Just have their phone number(s) handy when we call you.

HOW TO GET READY FOR YOUR APPOINTMENT?

- ✓ Gather all your asthma medicines, even if you are not taking them right now
- ✓ If you have a computer or tablet, get ready for your call by opening this ["Understanding Asthma"](#) document or view it on our website home page
- ✓ You can view the complete Telephone Patient Package on our website home page.

WHAT IS IN THE TELEPHONE PATIENT PACKAGE?

- ✓ "Does my child have asthma?" What we look for to diagnose asthma in young children
- ✓ Where and When to Get Help: What to do when asthma symptoms increase
- ✓ Asthma Control and links to our most popular asthma resources
- ✓ Alberta Asthma Action Plan: A personal action plan to manage asthma
- ✓ Control Asthma Now! Everything you need to know about asthma. If English is not your first language, we make our most popular asthma information available in 14 languages. Visit our website and click on the [Languages](#) tab.

If you have any questions about your upcoming appointment, please call us:

403-943-9139





Does My Child Have Asthma?

“Does my child have asthma?” is a common question families ask. Asthma can make it hard to breathe and can cause coughing, wheezing, shortness of breath or tightness in your chest. These things we see and feel are called symptoms. Asthma symptoms can come and go, making it hard to know if a child has asthma.

It may take weeks, months or even years to confirm asthma, but there are ways to help us know if it is more likely or less likely that a child has asthma. The information you share with health professionals helps us understand if it is asthma. These are the 5 important things to think about:

1. SYMPTOMS

2. TRIGGERS

3. MEDICAL HISTORY

4. RESPONSE TO MEDICINE

5. BREATHING TESTS (when a child is about 6 years old)

The information below includes ideas to help you learn what to look for and what to write down to share with your doctor or asthma educator.

Visit our website at www.ucalgary.ca/icancontrolasthma for more information and other resources.

1. SYMPTOMS

Common asthma symptoms include:

- **Cough** – Cough may come and go. It can be worse during the middle of the night. Some children cough so hard they struggle to breathe or throw up
- **Wheeze** – This is a whistling sound you hear when your child takes a breath in or out. Visit our website to hear wheezing (see “Videos” tab → “A Little Asthma Story”)
- **Tight Chest** – Some children say asthma feels like being squeezed or having something heavy sitting on your chest. This can be hard for children to describe
- **Shortness of Breath** – Children often say they cannot get a full breath in. They may need to stop playing to catch their breath or they can’t keep up with their friends when running or playing

2. TRIGGERS

Triggers can cause **asthma symptoms** or may make the symptoms you already have worse. Triggers are different for everyone. Some common asthma triggers include:

- **Colds/Flu** – the most common trigger
- **Allergies** – animals, pollen, mold, dust
- **Emotions/Stress**
- **Environment** – strong smells, weather changes
- **Exercise/Play**

3. HISTORY

It is important to share your child's medical history with a healthcare professional:

- **Patient History** – Children who have asthma symptoms or hospital visits for breathing trouble are more likely to have asthma. Children who have allergies or eczema are also **more likely** to have asthma
- **Family History** – Children who come from families with asthma or allergic conditions (such as eczema, hay fever and even food allergies) are **more likely** to have asthma

4. RESPONSE TO MEDICINE

If your child has a pattern of symptoms that look like asthma, they may be given a trial of asthma medicine. Asthma medicine must be taken properly to work. Visit our website to watch videos on how to take your asthma medicines (Click “Devices” tab).

There are two different types of asthma medicine:

Relievers

- These puffers are blue and give temporary relief of asthma symptoms
- They should work quickly and relieve symptom for 3 or 4 hours
- Be sure to tell your child's doctor if this medicine is NOT helping

Controllers or Preventers

- These medicines are usually orange, red or brown. They control asthma and help prevent symptoms
- These medicines must be used every day for them to work and it often takes 2 weeks or more to have the best effect
- If your child was given a puffer at the hospital, it is important that you see your family doctor before stopping this medicine

5. BREATHING TESTS

- When children are about 6 years old, they can do a simple breathing test called spirometry. Spirometry is only one part of the overall picture we build to decide if a child has asthma
- Since asthma symptoms come and go, the breathing test only tells us about the lungs on the day the test is done. This means a normal breathing test **does not** rule out asthma

OTHER THINGS TO THINK ABOUT

- Asthma can be diagnosed at any age. Watch for asthma symptoms and see if taking asthma medicine relieves those symptoms
- Children who regularly have asthma symptoms are treated with puffers to lessen the impact of colds. Research shows that half of these children will not have asthma by the time they reach school age
- Finally, don't be confused by words like **reactive airway disease**, **wheezy bronchitis**, **happy wheezer** and **bronchospasm**. These are just words some people use to describe asthma symptoms



*If your child does have asthma, the good news is that asthma can be well controlled and should not prevent children from doing **anything they want to do!***



This document has been designed for information purposes only. It should not be used in place of medical advice, instruction and/or treatment. If you have specific questions, please consult your doctor or appropriate health care professional.

WHEN AND WHERE TO GET HELP FOR ASTHMA

- Uncontrolled asthma can lead to emergency visits and admission to hospital. See your doctor, asthma educator or pharmacist for more information about how to control your asthma
- Know the emergency numbers in your area. In Alberta, Health Link is a 24-hour telephone advice line staffed by experienced nurses. **If you have any urgent questions, dial 811 in Alberta**

	SEE YOUR DOCTOR	GO TO AN EMERGENCY	CALL 911
What You See/Feel	<ul style="list-style-type: none"> • If you are using or giving reliever medicine (blue) more than 2 times/week 	<ul style="list-style-type: none"> • If the skin at the base of your child's neck, between the ribs, or below the breastbone pulls in when your child breathes • If your child has no energy to play or even move around • Your baby will not eat or drink 	<ul style="list-style-type: none"> • If you have or see symptoms that are very serious - breathing very fast, gasping for breath, trouble speaking, blue-grey lips or fingernails, CALL 911
What To Do	<ul style="list-style-type: none"> • If asthma symptoms are getting worse, take or give preventer/controller medicine at the highest dose recommended by the doctor • If you do not see improvement in 12 – 24 hours, make an appointment to see a doctor as soon as possible 	<ul style="list-style-type: none"> • Give or take reliever medicine (blue). This medicine should make breathing easier within 5 - 10 minutes. Relief should last for 3 - 4 hours • If the dose needs to be repeated before 3 hours, please go to Emergency • You know best. If you are worried, go to Emergency 	<ul style="list-style-type: none"> • Stay calm • CALL 911 and give the reliever medicine (blue) every few minutes until help arrives
What Usually Happens	<ul style="list-style-type: none"> • Everyone with asthma should have an Asthma Action Plan. Your plan will help you know how to adjust medicine to control asthma • Make an appointment with your doctor or asthma educator to develop an Asthma Action Plan • Print a blank copy of an Asthma Action Plan to take to your doctor or health care provider 	<ul style="list-style-type: none"> • It is normal to stay several hours for treatment/observation. You or your child may be admitted to hospital until asthma symptoms are in better control • Along with regular medicine, you may also be prescribed a short course of oral steroids to help get asthma back in control more quickly • Ask for an Emergency Asthma Action Plan • Ask to be referred for asthma education 	<ul style="list-style-type: none"> • Paramedics will treat you • You may go to Emergency for more treatment • It is normal to stay several hours for treatment/observation. You may be admitted to hospital until asthma is in better control

OTHER THINGS YOU CAN DO:

1. If possible, remove yourself or your child from any known triggers
2. Sit up. Loosen tight clothing
3. Make an appointment with your family doctor/pediatrician as soon as possible after an asthma emergency visit



This material is for information purposes only. It should not be used in place of medical advice, instruction, and/or treatment. If you have questions, talk with your doctor or appropriate healthcare professional.

COMMUNITY PEDIATRIC ASTHMA SERVICE

Asthma Control

My asthma is **not well controlled** if I answer 'Yes' to **any 1** of these questions
(at any point in time)

Question	Yes	No
1. Do I cough, wheeze, or have a tight chest because of my asthma?	<input type="checkbox"/>	<input type="checkbox"/>
2. Does coughing, wheezing, or chest tightness wake me at night?	<input type="checkbox"/>	<input type="checkbox"/>
3. Do I stop exercising because of my asthma?	<input type="checkbox"/>	<input type="checkbox"/>
4. Do I miss work or school because of my asthma?	<input type="checkbox"/>	<input type="checkbox"/>
5. Do I use my reliever medicine 3 or more times a week?	<input type="checkbox"/>	<input type="checkbox"/>



Resources in one click!

Our most popular information with fast, easy access using QR codes



Our Asthma Website

Visit the Community Pediatric Asthma Service website and see "Resources" tab for popular patient resources



Asthma Information in 14 Languages

Asthma information in 14 languages including a Little Asthma Plan, A Little Asthma Story (video) and how to use asthma puffers



When and Where to Get Help

What to do when asthma symptoms gets worse



Does My Child Have Asthma?

What we look for

ASTHMA Action Plan

My Name: _____ Date: _____

What Matters To Me: _____

Circle My Triggers



smoke



colds



animals



pollens



mold



dust



strong smells



weather changes



strong emotions



other _____

Circle My Usual Symptoms: Cough / Wheeze / Short of Breath / Tight Chest / Other _____

Is my asthma well controlled?



Yes

No symptoms, regular activities








No

Cough, wheeze, short of breath, tight chest, colds, allergies



Not at all

Very short of breath, trouble speaking, blue/grey lips/fingernails

1. Daytime symptoms 	None	3 or more times a week	Continuous & getting worse
2. Nighttime symptoms 	None	1 or more times a week	Continuous & getting worse
3. Reliever use (other than if prescribed for exercise) 	None	3 or more times a week	Relief for less than 3 to 4 hours
4. Physical activity or exercise 	Normal	Limited	Very limited
5. Can go to school or work 	Yes	Maybe	No

What to do:	STAY CONTROLLED & AVOID MY TRIGGERS	TAKE ACTION See a doctor if no improvement in ____ days	GET HELP
Controller: Use EVERY DAY to control asthma and prevent flare-ups. 1. _____ (name / colour / strength) 2. _____ (name / colour / strength) 3. _____ (name / colour / strength) 4. _____ (name / colour / strength)	1. Take _____ <input type="checkbox"/> AM <input type="checkbox"/> PM (amount) 2. Take _____ <input type="checkbox"/> AM <input type="checkbox"/> PM (amount) 3. Take _____ <input type="checkbox"/> AM <input type="checkbox"/> PM (amount) 4. Take _____ <input type="checkbox"/> AM <input type="checkbox"/> PM (amount)	Continue this dose for _____ 1. Take _____ <input type="checkbox"/> AM <input type="checkbox"/> PM (amount) 2. Take _____ <input type="checkbox"/> AM <input type="checkbox"/> PM (amount) 3. Take _____ <input type="checkbox"/> AM <input type="checkbox"/> PM (amount) 4. Take _____ <input type="checkbox"/> AM <input type="checkbox"/> PM (amount)	EMERGENCY (911) Notes:
Reliever: Quickly and temporarily helps asthma symptoms. _____ (name / colour / strength)	Take reliever before exercise? <input type="checkbox"/> Yes Take _____ as needed (# of puffs)	Continue this dose for _____ Take _____ as needed (# of puffs)	Take 5 to 10 puffs of my reliever medicine every 10 to 20 minutes while I get help.

Patients can view this Asthma Action Plan at: www.myhealth.alberta.ca

Clinicians can download a fillable version of this Asthma Action Plan at: www.ucalgary.ca/icancontrolasthma

Completed with: _____

I share and complete this plan with my healthcare team.

Steps to Control My Asthma

Avoid My Triggers

I avoid my triggers as an important step to control my asthma. I may need less medicine when I avoid my triggers and keep control of my asthma.



Take My Medicines

I take my medicines as directed by my doctor. This helps me lead an active life and have healthy lungs. My asthma medicines are safe and effective for controlling asthma.



Check My Technique

I bring my asthma medicines to every medical appointment to make sure I am using them correctly. I ask my healthcare team to review my technique, to make sure my lungs get the medicine they need to stay healthy. If I use a metered-dose inhaler (MDI), I should add-on a spacer to help the medicine get properly into my lungs.



Follow My Action Plan

I use my Asthma Action Plan to take ACTION early - this is the best way to get my asthma well controlled. I review my Asthma Action Plan with my healthcare team (doctor, asthma educator, pharmacist, nurse) **every 6 months**.



Asthma Control

My asthma is **not well controlled** if I answer 'Yes' to **any 1** of these questions (at any point in time):

1. Do I cough, wheeze, or have a tight chest because of my asthma? Yes No
2. Does coughing, wheezing, or chest tightness wake me at night? Yes No
3. Do I stop exercising because of my asthma? Yes No
4. Do I miss work or school because of my asthma? Yes No
5. Do I use my reliever medicine 3 or more times a week? Yes No

My Healthcare Team Contacts:

My Questions and Things to Remember:

Asthma Resources:

Alberta's Information and Tools
www.ucalgary.ca/icancontrolasthma

Alberta's Information and Tools in Other Languages
www.ucalgary.ca/icancontrolasthma/languages

Asthma Society of Canada
www.asthma.ca

The Lung Association of Canada
www.lung.ca

This Asthma Action Plan was developed by Alberta's health care professionals in collaboration with COPD & Asthma Network of Alberta, Alberta Asthma Centre, Alberta Strategy To Help Manage Asthma & COPD, Family Physician Airways Group of Canada, Alberta Health Services' Respiratory Health Strategic Clinical Network™ and The Lung Association of Alberta & NWT™. 'Steps to Control' are adapted from Alberta's Community Pediatric Asthma Service.

A Little Asthma Action Plan for: _____ Date: _____ Goal(s): _____



Controller (Every day)

	# of Puffs		# of Puffs
_____ / _____ / _____			
medicine	dose	colour	
_____ / _____ / _____			
medicine	dose	colour	

Reliever (When you need it)

	# of Puffs	
_____ / _____ / _____		
medicine	dose	colour

Controller

	# of Puffs		# of Puffs
_____ / _____ / _____			
medicine	dose	colour	
_____ / _____ / _____			
medicine	dose	colour	

Reliever (Can use every 4 hours)

	# of Puffs	
_____ / _____ / _____		
medicine	dose	colour

See a doctor if you are not better in 2-3 days

See a Doctor soon if:

- your asthma symptoms are not getting better, even with more medicine
- you need your reliever medicine more often



Go to Emergency if:

- reliever medicine does not last at least 3 hours
- skin at the base of the neck, between ribs or below the breast bone pulls in with breathing
- children have no energy to play or move around
- babies refuse to eat or drink



Call 911 if:

- very serious symptoms – breathing very fast, gasping for breath, having difficulty speaking, blue-grey lips or fingernails
- give reliever medicine every few minutes until help arrives
- comfort your child by trying to stay calm until help arrives



Control Asthma Now!

Living with Asthma

www.ucalgary.ca/icancontrolasthma



January 2023

Questions or concerns? In Alberta, call 811 for the 24/7 health information and advice line.



Control Asthma Now!

Living with Asthma

Asthma can make it hard to breath and can cause coughing, wheezing, shortness of breath or tightness in your chest.

Avoid Your Triggers + Medicines + Take Your Inhalers Properly = Asthma Control

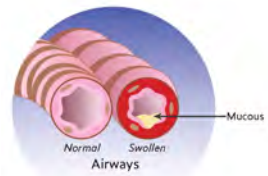
Asthma Triggers	What Can You Do?
Tobacco Smoke	Don't smoke. Never allow smoking in your home or car.
Colds & Flu	Wash hands often. Follow your Asthma Action Plan at the first sign of a cold or flu.
Pet Dander	Avoid pets with fur, hair or feathers. Wash pets regularly.
Pollen	Close windows during pollen season (Spring and Fall). Use air conditioning in your car or home. Avoid freshly cut grass.
Mould	Avoid rotting leaves, garden waste and brown grass in the Spring and Fall. Keep humidity below 50% in your home. Keep bathrooms and basements dry.
Dust Mites	Wash bedding in hot water. Vacuum and dust often. Use mite-proof covers for pillows and mattresses.
Strong Smells	Avoid fumes and chemicals when you can.
Weather	Changes in the weather can trigger asthma. Stay inside when outside weather may trigger your asthma.
Air Pollution	Stay indoors when air quality may trigger your asthma. Avoid campfire smoke.
Emotions	Try to avoid stressful situations. Learn to manage stress.
Activity	Exercise regularly for good health. Use your reliever medicine 10-15 minutes before exercise if you need it.

Asthma medicines have been used for many years and have proven to be safe and effective.

There are two types of inhaled medicines, "controllers" and "relievers."

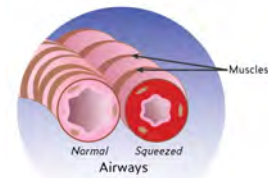
Controllers

- Controller medicines are corticosteroids to help heal and reduce swelling and mucus in your airways, making them less sensitive to triggers
- Take every day, even when you have no symptoms, to help keep your asthma well controlled



Relievers

- Reliever medicines temporarily relax the muscles around your airways to reduce symptoms like coughing, wheezing, shortness of breath or tightness in your chest
- Use when you need it




Important Reminders


- Know when your medicines are empty or expired
- Replace spacer if valves are missing or broken
- Bring ALL your asthma medicines to every asthma appointment.

It's important to use your inhaler properly so the most medicine can reach your lungs. See videos on our website under the "Devices" tab. Show your health provider how you use your inhalers.


INHALER WITH SPACER AND MASK (UP TO 4 YEARS)




INHALER WITH SPACER AND MOUTHPIECE (4+ YEARS)




DISKUS (6+ YEARS)




TURBUHALER (6+ YEARS)



TWISTHALER (6+ YEARS)



NASAL SPRAY



Asthma is well controlled when you have:

- No daytime symptoms
- No nighttime symptoms
- No limits to normal physical activity
- No missed school or work
- No need for reliever medicine except sometimes for exercise

Steps to take...

- 1) Avoid your triggers
- 2) Use your medicines
- 3) Take your inhalers properly
- 4) Follow your Asthma Action Plan

You CAN control your asthma now!

This information is provided by the Community Pediatric Asthma Service, a program to help children and families learn to control asthma.