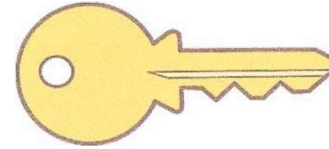


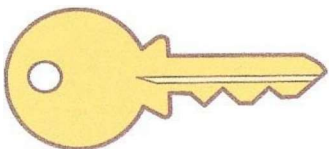
Asthma in a Minute

*How Busy School Nurses Can
Teach Key Asthma Lessons,
One Minute at a Time*



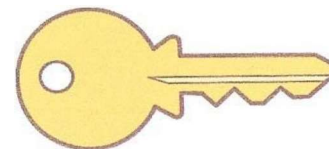
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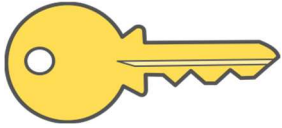
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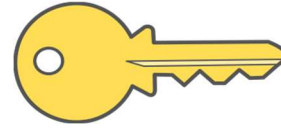


1

Respiration 101: Lungs and airways, how does breathing work?

- Airways are like tubes, carrying air deep into your lungs
- Shaped like an upside down tree, branches get smaller
- Air sacs, called alveoli, at the end of the tiniest airways, allow oxygen to pass into your blood stream
- Oxygen is carried by blood to your brain and organs
- Inhale to bring air *in* to the respiratory system
- Exhale to let the air *out* after your lungs have absorbed oxygen

Asthma symptoms can be *intermittent* [sometimes] or *persistent* [most of the time]. Which describes you? _____

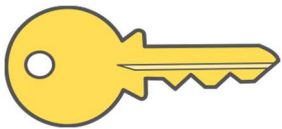


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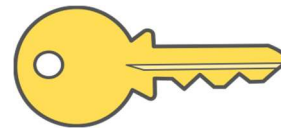


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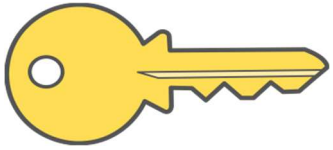


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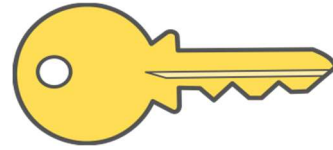


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Airways with Asthma: What makes it so hard to breathe?

- Lining of airways is overly-sensitive in people with asthma
- Inflammation [swelling] of the airway
- Constriction [tightening]of airway muscles
- Excess mucous blocking the the airway

Persistent asthma can be mild, moderate, or severe. Which describes your asthma? _____

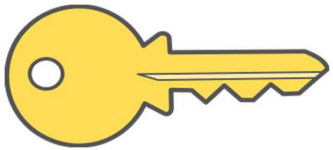


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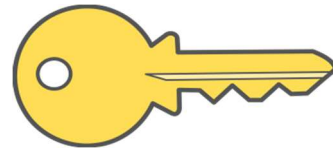


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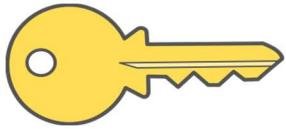


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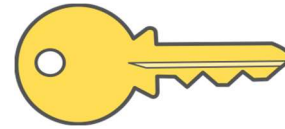


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Recognize Asthma Symptoms: How do you know when your asthma is not under good control?

- Short of breath
- Wheezing
- Coughing
- Tight chest
- Can't play comfortably
- Waking up during the night

Take the Asthma Control Test every season to monitor your control.
What is your ACT score this season? _____

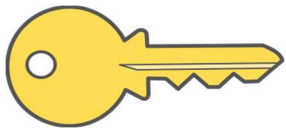


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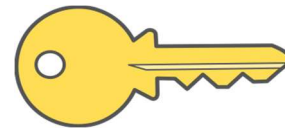


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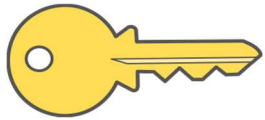


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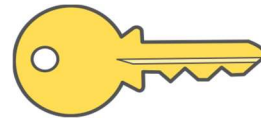
Measure Airflow: Find your PEF and FEV1

- Use the “ASMA1” digital airflow meter
- Inhale deeply
- Seal your lips around the mouthpiece
- Exhale ***hard and fast!***
- Repeat at least 3 good efforts, record your best

Peak Expiratory Flow [PEF] tells you *how fast* you can exhale

Forced Expiratory Volume 1 [FEV1] tells you *how much* air you can exhale in the first second

What are your PEF and FEV1 numbers? _____



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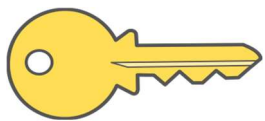
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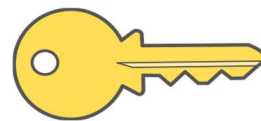
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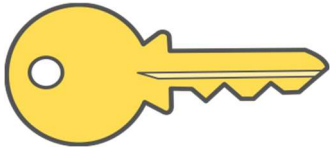
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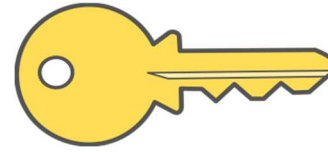


5

PEF and FEV1 Skill Check: Practice makes perfect!

- Watch a video demonstration or
- Coach another student
- What are your numbers today? _____

FEV1 is the Vital Sign of asthma: know your numbers, and always take your record to show your doctor at every visit.

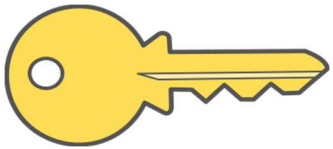


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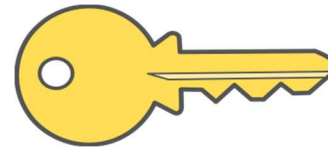


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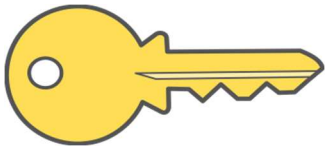
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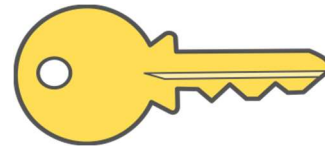


6

Quick-Relief Medication: When should you use a quick relief [“rescue”] inhaler?

- When you *have* symptoms
- Before activity to *prevent* exercise-induced symptoms
- MDI stands for Metered Dose Inhaler
- Metered dose means the device measures a dose when you take a “puff”
- Albuterol is the most common quick relief medicine
- Always tell an adult if you don’t get relief after 2 puffs

Your quick-relief MDI is _____



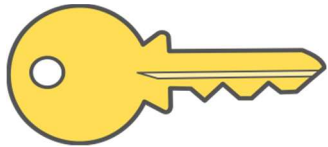
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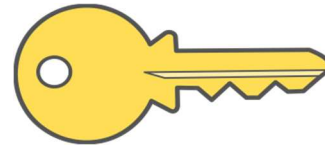
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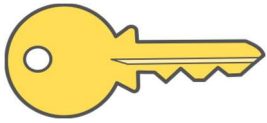
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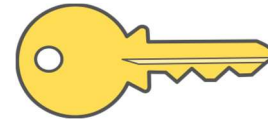


7

Control Medication: Daily, long-term medicine to prevent symptoms of persistent asthma.

- If prescribed by your doctor, take every day
- Control medications prevent airway swelling [inflammation]
- Control medicines take several days to work: *not* quick relief
- ICS, [Inhaled Corticosteroids] are the first, best medicine for persistent asthma, according to the expert guidelines
- ICS is a safe, low dose steroid, not a “bad” steroid
- If you’ve been in good control for a while, ask your doctor about “stepping down” from ICS: don’t stop on your own

Do you take control medicine? _____

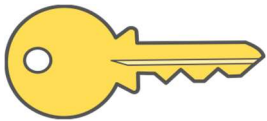


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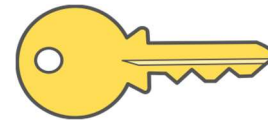


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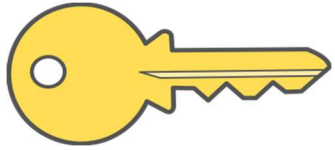


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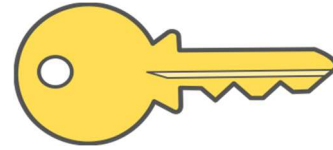


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Other Medications: What if ICS and quick relief are not enough?

- Allergy medications
- Combination medicines
- Long-term bronchodilators
- Your other medications are _____

Persistent asthma sometimes needs a combination of 2, 3 or even more medicines to achieve control of symptoms.

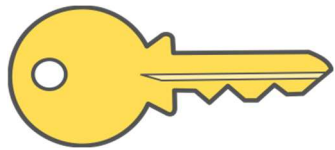


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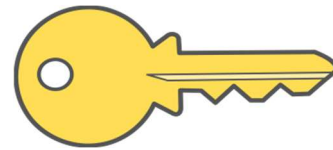


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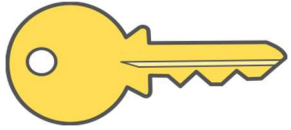


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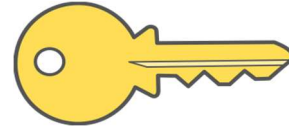


9

Metered Dose Inhaler [MDI]: How to use an MDI correctly?

- Exhale completely
- Seal your lips around the mouthpiece
- Press down the canister
- Inhale *soft and slow...*
- Hold your breath a few seconds
- Wait one full minute between puffs
- Rinse your mouth after
- If you don't get good relief from 2 puffs, tell an adult!
- Practice with the InCheck Dial

Calculate your target inhalation speed _____

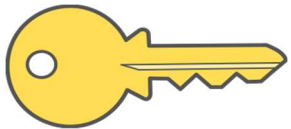


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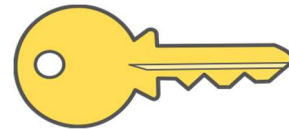


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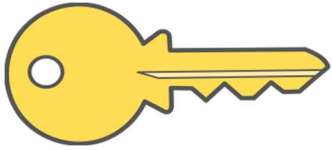


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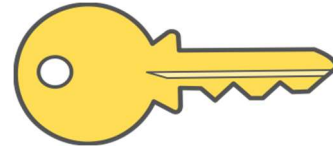
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Spacer or Valved Holding Chamber: Do I need this? How does it work?

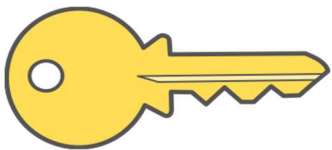
- Holds the medicine so you can inhale deeply
- Delivers more of the medicine to your lungs
- Take 3-5 breathes per puff
- Use whenever possible



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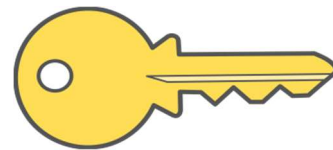
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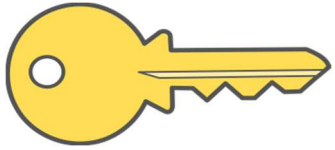
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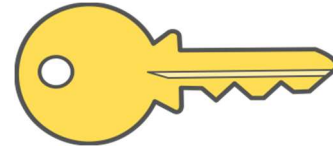
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- Take 3-5 breathes per puff
- Use whenever possible



11

Nebulizer: Do I need this? How does it work?

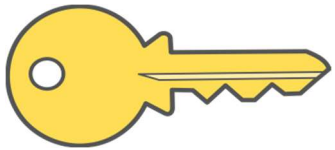
- Mixes the quick-relief medicine with liquid to make a mist
- Breathing in the mist over several minutes delivers the medicine more deeply into your lungs
- Usually ordered by your doctor...
- or, if you use it for worsening symptoms, means you need to see your doctor very soon



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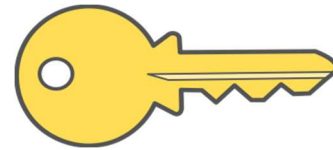
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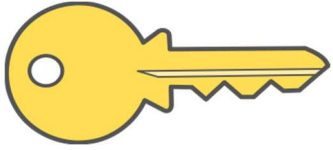
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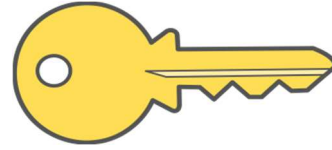
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12

Dry Powder Inhaler: How to use a DPI correctly? What's the difference?

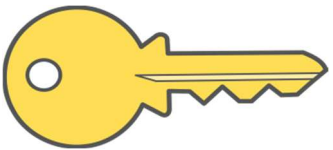
- Practice with the InCheck Dial
- Find your target speed
- Exhale completely
- Seal your lips around the mouthpiece
- Press down the canister or click the disk
- Inhale ~~soft and slow~~....
- Follow the instructions



12

Dry Powder Inhaler: How to use a DPI correctly? What's the difference?

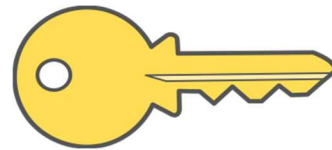
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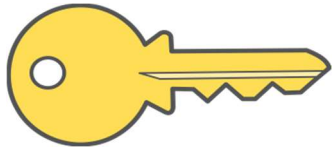
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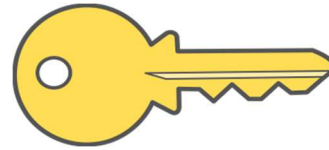
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Inhaler Skill Check with the InCheck Dial: Practice makes perfect!

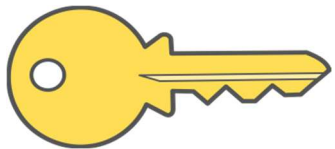
- Watch video demonstration
- Breathing in at the right speed assures the medicine will be pulled deep into your airways instead of landing in your mouth.
- Picture the mist “hitchhiking” a ride on your inhaled breath, deep into your airways.
- Coach another student



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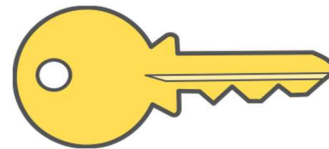
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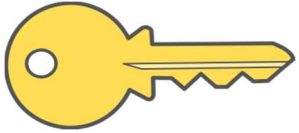
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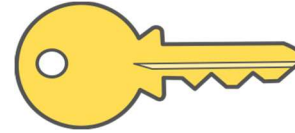
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Triggers: Things that make your asthma worse. How can you avoid allergens and irritants?

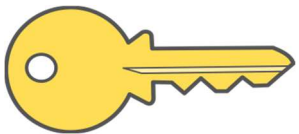
- Tobacco smoke...don't go there
- Allergens like pollen, trees & grasses
- Dust mites in pillows and mattresses
- Bug stuff...cockroaches
- Pollution, dust, strong smells
- Perfume, paint fumes, air fresheners
- Strong emotions, like laughing or crying
- Illnesses, like colds and flu
- Cold air
- Physical exertion



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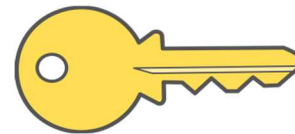
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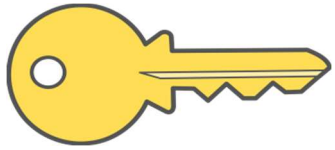
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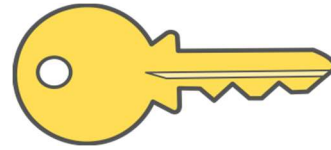
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Exercise-Induced Asthma: Can kids with asthma play sports?

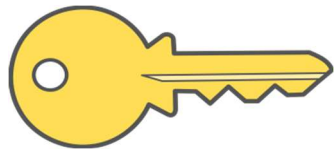
- Yes! People with well-controlled asthma can play any sport or game they chose
- Use your quick-acting inhaler to avoid shortness of breath *before* activities you know from experience might cause symptoms
- Like PE!
- Exercise ...stay in control so you don't miss a minute of fun and fitness!



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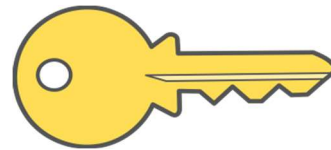
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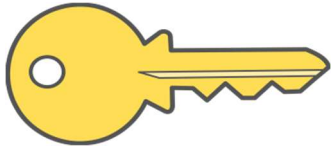
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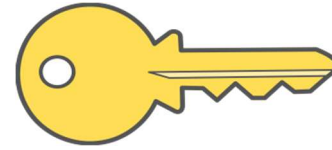
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Your Personal Best: What are my airflow numbers?

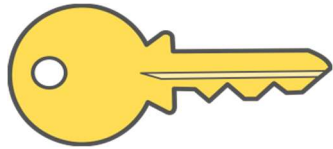
- Gather and record 2 weeks of data
- Morning and late afternoon are ideal
- Calculate 80% and 50% of personal best
- Compare to the expected values for your age and gender



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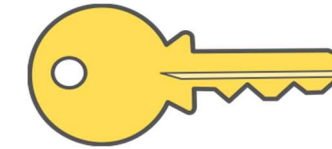
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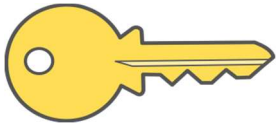
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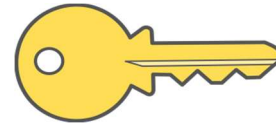
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17

Asthma Action Plan: What is it? What does it do for me?

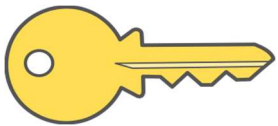
- A written plan: your asthma game plan
- Guides daily management when doing well
- Helps you recognize and respond to worsening asthma
- Based on airflow data [PEF & FEV1] or symptoms, or both
- Think of a traffic light: Go, Caution, Stop!
- Green zone: *I feel good*, no limitations, >80% of personal best
- Yellow zone: *I do not feel good*, some asthma symptoms, 50-80%, caution!
- Red zone: *I feel awful*, serious symptoms, <50%, medical alert!



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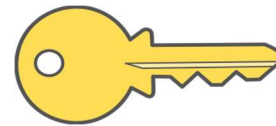
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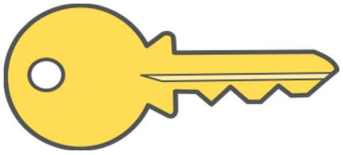
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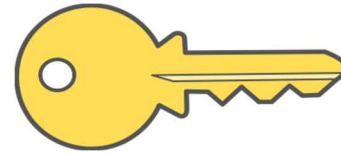
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Bonus Topic, your choice!

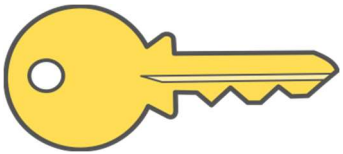
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- What questions are on your mind?



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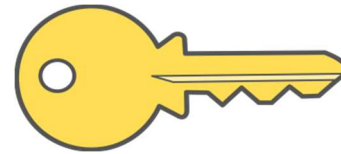
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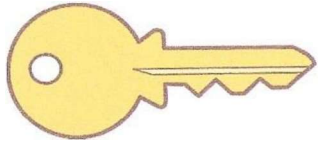
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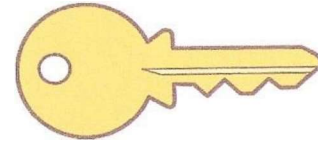
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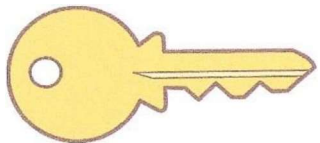
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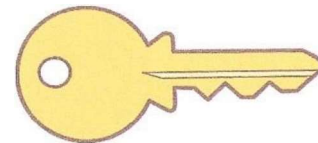
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