

**General Instructions:**

Carefully read the assignment guidelines and rubric and complete each section of the asthma protocol below.

**1) RATIONALE**

- a) This protocol will assist in the differentiation between treatment needs for clients with asthma based on symptom frequency and severity, including the process for identification of clients in need of referral to improve asthma control. The design of the protocol for asthma encompasses these principles.

**2) SYMPTOMS****a) ASTHMA**

- i) History of respiratory symptoms that vary over time with varying intensity, including:
  - (1) Wheezing
  - (2) Shortness of breath
  - (3) Chest tightness
  - (4) Cough
- ii) Triggers for exacerbation can include:
  - (1) Exercise
  - (2) Allergens
  - (3) Season changes
  - (4) Laughter



- iv) Client responses on the Asthma Control Test (ACT) or the Asthma Control Questionnaire (ACQ)
- v) Reduced lung function and responsiveness with medications
  - (1) Reduced expiratory airflow (forced expiratory volume in one second, a.k.a. FEV<sub>1</sub>)
  - (2) Variable peak expiratory flow (PEF)

### 3) **PHYSICAL EXAM**

- a) Perform the following examinations:
  - i) Vital Signs (blood pressure, pulse, oxygenation, respiratory rate)
  - ii) Auscultation for wheezing
  - iii) Identify increased work of breathing
  - iv) Identify retractions
  - v) Cardiac assessment
  - vi) Lower extremities for edema and pulses
  - vii) Neurological
- b) Consult supervising physician if findings of:
  - i) Respiratory distress

### 4) **LAB TESTS**

- a) Depending on severity, can include:
  - i) Arterial or venous blood gas
    - (1) ph
    - (2) O<sub>2</sub>
    - (3) CO<sub>2</sub>
    - (4) Bicarbonate
    - (5) Base excess



eosinophils

- iii) Total or specific IgE levels
- iv) Consult supervising physician if:
  - (1) Abnormal blood gas results or severe anemia

**5) PULMONARY FUNCTION TESTS**

- a) Forced expiratory volume in one second (a.k.a. FEV<sub>1</sub>)
- b) Peak expiratory flow (PEF)

**6) PHARMACOLOGICAL TREATMENT**

- a) List the preferred and alternative asthma drug classifications and examples you would prescribe for each step according to clinical practice guidelines. (*Provide generic names for not needed or required.*)