

Nebulizers for Young Children

Controller Medications

Controller medications are used **EVERY DAY** even if your child feels well to help prevent mucus and asthma attacks. Rinse child's mouth after use and wash face where mask was.



Pulmicort Respules

Rescue Medications

These fast-acting medications help to relax tight muscles in the lungs and make it easier to breathe. Use this medication when your child is breathing hard, your child is coughing or wheezing, or your child is in the yellow or red zone.



Xopenex Nebulizer Solution



Albuterol Nebulizer Solution

Examples of Patient Self-Help Tools

Asthma Action Plan

Emergency Contact: _____ Phone number: _____ Date: _____
 Doctor's Name: _____ Please number: _____ Pharmacy: _____

CONTROL - Green

• Breathing is good
 • No cough or wheeze
 • Can play and work

Peak Flow: _____ (90-100% of best)

CAUTION - Yellow

• Coughing (may be worse at night or with exercise)
 • Wheezing
 • Chest tightness

Peak Flow: _____ (60-80% of best)

EMERGENCY - Red

• Breathing hard and fast (shortness of breath)
 • Noisy breath out
 • Staying in bed (lips become blue and work increasing)
 • Grogginess
 • Grey or blue lips or fingertips

Peak Flow: _____ (0-60% of best)

Asthma Action Plan



Air Compressor with Nebulizer Set-Up for Mouthpiece



Air Compressor with Nebulizer Set-Up for Mask

Nebulizadores para niños pequeños

Medicamentos de control

Los medicamentos de control se utilizan **TODOS LOS DÍAS** inclusive si su hijo se siente bien para prevenir los ataques de mocos y asma. Enjuague la boca de su hijo(a) después de su uso y lave la cara en el lugar de la máscara.



Pulmicort Respules

Medicamentos de rescate

Estos medicamentos de acción rápida ayudan a relajar los músculos tensos en los pulmones y facilitan la respiración. Use este medicamento cuando su hijo tenga dificultad para respirar, está tosiendo o jadeando o si su hijo(a) está en la zona amarilla o roja.



Solución Nebulizante Xopenex



Solución Nebulizante Albuterol

Ejemplos de herramientas de auto ayuda para los pacientes

Asthma Action Plan for _____		DOB: _____
Emergency Contact: _____ Phone number: _____ Date: _____		
Doctor's Name: _____ Phone number: _____ Pharmacy: _____		
Common Triggers: <input type="checkbox"/> Insecticides <input type="checkbox"/> Mold <input type="checkbox"/> Pets <input type="checkbox"/> Perfumes <input type="checkbox"/> Tobacco <input type="checkbox"/> Dust <input type="checkbox"/> Detergents <input type="checkbox"/> Cleaning products <input type="checkbox"/> Air pollution <input type="checkbox"/> Weather changes <input type="checkbox"/> Exercise <input type="checkbox"/> Stress	Asthma Triggers: <input type="checkbox"/> Viral Colds <input type="checkbox"/> Allergens (hay or pollen) <input type="checkbox"/> Cold/Flu viruses <input type="checkbox"/> Strong odors or irritants <input type="checkbox"/> Weather changes <input type="checkbox"/> Exercise <input type="checkbox"/> Stress	Let's Start: <input type="checkbox"/> Change in temperature <input type="checkbox"/> Dust, mold, pollen, cockroaches <input type="checkbox"/> Stress <input type="checkbox"/> Other: _____
CONTROLLED - Green • Breathing is good • No cough or wheeze • Can play and work Peak Flow: _____ (80-100% of best)		
CAUTION - Yellow • Coughing (may be worse at night or with exercise) • Wheezing • Chest tightness Peak Flow: _____ (50-80% of best)		
EMERGENCY - Red • Breathing fast and feet (shininess of hands) • Slow SpO2 sat • Sinking in of ribs between ribs and neck protruding • Clammy • Gray or blue lips or fingertips Peak Flow: _____ (<50% of best)		

Plan de acción de Asma



Compresor de aire con nebulizador para boca



Compresor de aire con nebulizador con máscara

