

## 1 INITIAL VISIT- Diagnose and Code Asthma

- History & physical
- Try to avoid using diagnosis of asthma unspecified
- Recommend spirometry to assist with diagnosis for ages 5 and >
- Document on asthma specific flow sheets or templates
- Document asthma diagnostic code per ICD guidelines

## 2 Assess Asthma Severity

- Use NHLBI Guidelines/Asthma Care Quick Reference to determine severity [www.nhlbi.nih.gov/guidelines/asthma](http://www.nhlbi.nih.gov/guidelines/asthma)
- Identify precipitating & exacerbating factors (triggers) and comorbid conditions

## 3 Initiate Medication and Demonstrate Use

- Use NHLBI Guidelines/Asthma Care Quick Reference
- Help patients/families learn basic facts about asthma
- Teach appropriate use of nebulizer or inhaler with spacer with proper techniques using Teach back (TB)
- Help families understand purpose of medications & explore any cost issues

## 4 Develop Written Action Plan

- Use TB and MI to learn actions & goals to control asthma
- Learn early signs & symptoms of worsening asthma and when/why to take medications
- Give copy to parent, school/child care, and keep copy in chart

## 5 Education/Coordination

- Schedule with asthma education classes or care manager based on identified needs for self-management
- Provide resources/tools to help with self-management using TB, MI and shared decision making
- Recommend discussion with key partners (i.e.; school nurse, child care) for more complex patients & document
- Document status of flu vaccine, varivax and varicella disease

## 6 Schedule Follow-up Appointment

- Schedule every 2-6 weeks while gaining control
- If asthma well controlled, schedule next visit in 2-6 months depending on duration of control & treatment required to assess control
- Review hours of clinic and how to access afterhours provider or care

## Shared Decision Making

### Teach Back (TB)

- Review the key messages about asthma & use of medications
- Ask the parent/child to explain how they would explain the information about asthma and use of medications to other family members & care givers
- Role play to clarify purpose of medications & how they should be used

### Motivational Interviewing (MI)

- Train staff in MI technique & strategies
- Set patient goals collaboratively using shared decision making—especially related to asthma action plan
- Have updated, health literate educational tools that utilize MI strategies
- Consider use of practice asthma educator

# KEY STEPS TO PROVIDE ASTHMA CARE

## KEY STEPS: INITIAL ASTHMA VISIT

Resources in Dark Blue

