## **Additional Information for Respiratory:**

## **Respiratory Care:**

As part of the discharge team the Respiratory Therapist suggests that asthma meds be changed to dry powder inhaler (Advair) given the patient's weakness. A DPI would be easier for patient to use than the pMDI currently receiving. RT also concerned that she may not be using meds on schedule. Doubtful that patient has Asthma Care Plan, either, or that the challenges of following a care plan have been discussed with the patient or the team.

## **Discussion Questions:**

- 1. Why did the RT recommend Advair diskus (i puff BID fluticasone propionate and salmeterol) instead of Symbicort MDI (ii puffs BID budesonide/formoterol fumarate dihydrate)?[DP inhaler does not require the same muscle strength for activation] Which team member needs to agree with/approve the recommended change in meds? [physician to write the order]
  - 2. Should Advair be taken once or twice daily? [i puff BID]
- 3. What could be recommended to aid this patient in taking medications at the prescribed times? [In-home care givers]
- 4. Why should all patients with asthma have an Asthma Action Plan? [Asthma action plan improves patient control of asthma symptoms and reduces number of ER admissions.] Which professionals would be involved in the patient's knowledge and acceptance of the asthma action plan? [Discharge team: physician, RT, PT, OT, SW]