

**SELECT HEALTH NETWORK, INC.
PHYSICIAN PRACTICE GUIDELINES**

SUBJECT: Asthma Management Guidelines

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Source: National Asthma Education and Prevention Panel
National Heart, Blood and Lung Institute, Expert Panel Report 3 (EPR3),
2007

- I. Introduction
 - A. Modern asthma management is evidence based and is summarized in the National Asthma Education and Prevention Program Expert Panel Report 3 by the National Institutes of Health, 2007.
 - B. This information is available online at:
<http://www.nhlbi.nih.gov/guidelines/asthma/asthgdln.pdf>
 - C. Select Health Network endorses and adopts these guidelines for the care of our asthma patients.
- II. Goals of Asthma Management
 - A. Relief of symptoms, prevention of disability and mortality
 - B. Normalization of lung function
 - C. Avoidance of Emergency Room visits or hospitalization
 - D. Avoidance of school/work absences
 - E. Avoidance of complications of therapy, especially adverse effects of long-term corticosteroids
 - F. Adequate patient education so that the patient can co-manage the illness with his/her physician
- III. Routine Management
 - A. Initial Routine H&P
 - B. Pulmonary Function Testing, age appropriate (generally age ≥ 5 yo).
 - C. Patient education: Medication, PEFr monitoring, Asthma Action Plan, appropriate inhaler/nebulizer techniques.
 - D. Medication initiated and monitored per the NAEPP-3 Guidelines (see guidelines at the web site listed above, or contact Select Health Network for a copy)
 - E. Yearly influenza vaccination ≥ 6 months old.
 - F. Pneumococcal vaccination per ACIP guidelines.
 - G. Smoking cessation as indicated. Consideration of second hand smoke exposure.
 - H. Consider screening laboratory: CBC/diff, IgE level, RAST for specific suspected allergens, chest radiography, if indicated.
- IV. Specialty Referral
 - A. When the diagnosis is in question.
 - B. When the patient becomes unstable or does not respond to therapy as expected.
 - C. When consideration is given to the initiation of therapy outside the Guidelines, or when Xolair (anti-IgE monoclonal antibody) therapy is considered