



# Royal Manchester Children's Hospital Paediatric Emergency Department

**Advice for Patients and Carers** 

## Wheeze Discharge Advice

### What is wheeze?

Viruses can irritate the airways in the lungs making them swell up. This makes the breathing space smaller. When this happens, it can make it harder for your child to breathe. You may hear a whistling noise when they breathe out, this is called a wheeze.

Sometimes no wheeze will be present. Instead, they will look out of breath. Increased work of breathing can be a useful sign of narrowed airways (see video link below).

## How to treat wheeze?

Over the next few days assess your child every 4 hours to monitor their symptoms.

#### **Child reviewed:**

Are they breathless or wheezy?
Is there increased work of breathing? (See the QR code below)

#### Yes

Give 2 puffs of Blue inhaler one at a time via spacer. Review after a few minutes.

If there is no improvement in symptoms give another 2 puffs and reassess.

If child is still breathless repeat steps above up

If child is still breathless repeat steps above up to a maximum total dose of 10 puffs

#### No

No need for any treatment. Continue to observe and review every 4 hours

Are you still concerned about breathing?

#### No

Assess your child again in 4 hours and repeat steps above

#### Yes

Seek urgent help
Call 999 or attend your local ED

Give up to another <u>10 puffs</u> of blue inhaler one at a time via spacer.

Document all reviews and the treatment given in the treatment log

## **Additional treatment**

If your child normally takes a preventer inhaler, please continue taking this as normal. If your child has been started on steroids, please take them as prescribed.



## **Correct inhaler technique**

- **1.** Hold the inhaler upright and give it a shake.
- 2. Fit the inhaler into the opening at the end of the spacer
- 3. Place the mouthpiece over the child's face or mouthpiece in their mouth ensuring a good seal
- 4. Press the inhaler once and allow your child to take 5 slow breaths or count to 10 whilst they breathe through the spacer
  - 5. Shake the inhaler and repeat steps above if more puffs are needed

Scan the QR codes below to see how to recognise increased work of breathing and how to use your inhaler correctly.

**USING A FACEMASK** 





**USING A MOUTHPIECE** 





**WORK OF BREATHING** 





## Salbutamol (blue inhaler) treatment log

If your child needs further medical attention, please take this log with you.										
	Date	Time	Number of puffs given		Date	Time	)	Number of pu	uffs give	n
After the 1st day of treatment the number of puffs you are giving should be going down.  If you are still giving 10 puffs every 4 hours please seek medical assistance.										
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After the 2nd day of treatment the number of puffs and how often t <mark>hey are</mark> needed should be less.  If you feel that your child is not improving please seek medical assistance.										
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Are you happy that your child is getting better? If they are still requiring a lot of puffs or you are worried then please seek further advice by speaking to your GP, calling 111 or going to your nearest Emergency Department.