



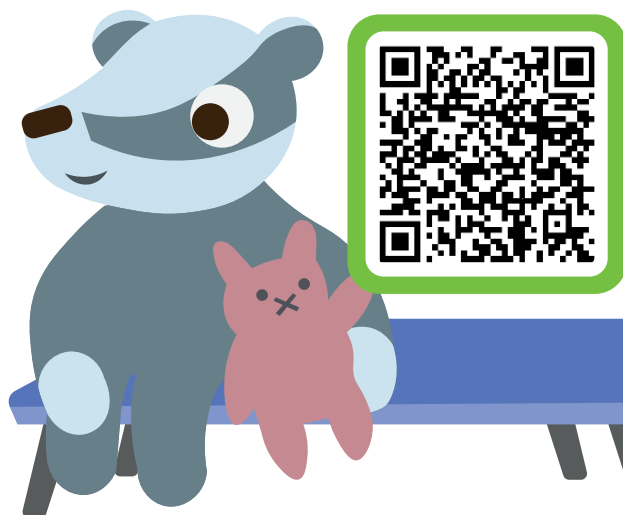
Information for Patients and Carers

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 overleaf).



How to treat a 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 on the back page)

Yes

- Give 2 puffs of blue inhaler one at a time via spacer. Check them again after a few minutes.
- If they are not getting better give another 2 puffs and re-check them after a few minutes.
- If child is still breathless repeat steps above up to a **maximum total dose of 10 puffs**

No

No need for any more puffs of their blue inhaler. Continue to check them at least every 4 hours.

Are you still concerned about breathing?

Yes - GET URGENT HELP

Call 999 or attend your local Emergency Department
Give your child more puffs of their blue inhaler

No

Assess your child at least every 4 hours and repeat steps above.

If your child needed 10 puffs, you must check your child at least hourly for the next 4 hours. If you then need to give your child more puffs of their blue inhaler within the next 4 hours ask for help right away.

Document all checks and the treatment given in the treatment log (see overleaf)

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

Please log how many puffs of the salbutamol (blue) inhaler and when you have given them on the 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 puffs given

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 or you are worried about your child please return to the Emergency Department.

Date	Time	Number of puffs given	Date	Time	Number of puffs given

After the 2nd day of treatment the number of puffs you are giving should be going down and your child improving. If not please seek medical advice from your GP, by calling 111, contacting the Children's Community Nursing team or returning to the Emergency Department.

Date	Time	Number of puffs given	Date	Time	Number of puffs given

If your child has asthma and is no longer needing their blue inhaler regularly, please go back to their personal asthma action plan. School advice: If your child is not finding it hard to breathe and is not needing their blue inhaler every 4 hours they can go back to school.