

## Emergency Care Plans for Long Term Conditions: COPD on Nebulised Therapy

### Patient Details

Name:  
(forename/surname)

NHS no:

DOB:

GP:  
(registered GP address)

Hospital No:

Next of Kin:

Next of kin tel no:

**Name of Community Practitioner**

**Tel:**

**Mobile:**

### Action Plan: signs of deterioration

#### Signs & Symptoms to look out for: any two or more of these may indicate an infection

- More short of breath than usual, reduced ability to walk or be generally active
- Your nebuliser is not as effective, or the effect does not last as long
- Change in colour of phlegm, darker than normal- dark yellow, green or brown
- Increased cough
- More or less phlegm than normal
- New or worse cough that doesn't bring anything up
- Runny nose, sore throat, watery eyes or fever
- New or worse wheeze and/or chest tightness

#### What to do for above symptoms: Take usual medication and inhalers as prescribed

- Rest/pace activity/controlled breathing
- Check inhaler technique, use reliever inhaler with spacer
- Increase reliever to 2 puffs four times daily, with extra doses as required, up to 8 times in 24 hrs. Take 2 puffs of reliever prior to activity
- Increase fluid intake and take paracetamol for fever/aches and pains
- If increased cough and breathlessness does not respond to increasing reliever, start prescribed "rescue" course of oral steroids
- If increased cough with change of colour of phlegm start prescribed "rescue course of antibiotics
- Inform your Community Practitioner or GP that you are unwell and have started your "rescue medication"

**For increased breathlessness: take Salbutamol nebuliser 5mg – 2 extra doses in 24hrs**

### Indications for urgent medical attention

If symptoms continue to worsen after starting "rescue" treatment  
 Oxygen saturation consistently below 88% on room air  
 Unable to speak in sentences, respiratory rate above 25 breaths per minute  
 Drowsy/confused or unable to eat or drink  
 Swollen ankles/legs  
 Chest pain, coughing up blood

### Information for emergency services

#### Allergies

Ensure any Oxygen therapy titrated to keep saturations between 88-92%

#### Respiratory Medications

Reliever: \_\_\_\_\_ Spacer: \_\_\_\_\_  
 Combination Inhaler: \_\_\_\_\_  
 Long Acting Reliever: \_\_\_\_\_  
 Mucolytic: \_\_\_\_\_  
 Rescue Antibiotic: \_\_\_\_\_  
 Rescue Oral Steroid: \_\_\_\_\_  
 If giving nebulised therapy use compressor or limit high flow O2 to 6 mins

#### Past medical history

#### Normal baseline observations

##### Target Oxygen saturation: 88-92%

Blood pressure:	Heart Rate:	Respiratory Rate:
Oxygen saturations:	MRC (dyspnoea scale):	Temperature:

#### Professional network

Name	Address	Phone no	Relationship to patient

Name:

Signature:

Designation:

Date: