

MEDICAL EMERGENCY RESPONSE PLAN

(For use when individual has a medical condition with sudden, life-threatening complications or frequent need for emergency treatment)

Name: Bob Doe

Date: 12/2/21

Brief Description of the Condition & How you can tell the individual is experiencing its effects:

Asthma is a disease of the lungs. It is chronic. It causes breathing problems which are called “attacks” or “episodes”. Asthma can be mild or severe – even life threatening. Asthma can be controlled and treated. This patient has mild, chronic asthma. When Bob has an asthma attack, his breathing will sound very wheezy and he will be taking rapid little breaths. He may also start coughing a lot.

What Crisis Might Happen Because of the Above Condition:

An asthma attack can occur when Bob breathes something that irritates his lungs (like cigarette smoke, dust or feathers). The air tubes in his lungs become tight and narrow. This makes it hard to breathe; if it gets too bad, he won't be able to breathe at all and could die.

What can staff do to prevent the crisis:

1. Help Bob avoid cigarette smoke, dust and feathers – No smoking around Bob!
2. Remind Bob to use his steroid inhaler every day according to the doctor's prescription.
3. Make sure Bob takes his Albuterol inhaler to work and on outings for quick relief if he has an attack. It should always be with him.

What signs can be observed that an emergency or crisis is happening or about to happen:

Coughing, wheezing, small rapid breaths, trouble talking, finger nails or lips are blue tinged, he uses or tenses up his neck muscles when he breathes.

Steps to take if crisis begins to happen:

1. Measure Peak Expiratory Flow by having Bob take a deep breath, closing his lips completely over the mouthpiece and the blow into his meter. Have him do this three times and compare the highest score to his person best of 480.
2. If the highest peak flow score is below 385, then have Bob use his Albuterol inhaler every 20 minutes for 3 treatments. Notify the nurse on call.
3. Measure Peak Expiratory Flow again after the third treatment of Albuterol :
 - a. if still lower than 480, but 385 or higher, continue Albuterol inhaler every 3-4 hours for 24 -48 hours, then double the dose of inhaled steroids for the next 7 days.

b. if between 225 and 385, give prednisone tablet 25 mg, twice daily, by mouth. Continue Albuterol, notify nurse on call and call Dr. Honest today for further instructions (nurse on call may call Dr. Honest).

c. if lower than 225, repeat Albuterol inhaler immediately, then call 911, or go to the emergency room.

EMERGENCY CONTACTS

Name	Relationship to individual	Phone numbers
Mary Doe	Mother	123-4567
Rita Haywood	Residential Services Director	123-2323

KEY MEDICAL INFORMATION TO BRING

Documents (include list of medications and allergies)	Where kept	Consent for release of information obtained? N/A for parents
Advance Directives/DNR Orders ___Yes ___NO	Front of blue notebook	Yes – see notebook legal section
Medical summary	Front of blue notebook	Yes-see notebook legal section

Training related to this plan

Who needs to be trained	Topics	Date Completed
Rita Haywood	Peak flow meter use and asthma management	1/12/2021
Laurie Smity, house Lead	Peak flow meter use and asthma management	1/12/21
John Franks	Peak flow meter use and asthma management	2/12/21
Joe flores	Peak flow meter use and asthma management	2/12/21