

PHASE III-V Progression

- MPASS 1-5: Advance to next phase after 1 treatment at this phase
- MPASS 6-10: Continue therapy at this phase
- MPASS 11-15: Step back to previous phase

Notify MD:

- All Phase transitions
- Failure to advance on pathway after 3 hours on continuous or after 12 hours in all other phases
- O₂ requirement in Phase IV

Consult Pulmonology:

- ≥2 ED/urgent care asthma related visits in last year
- ≥1 asthma related admission in last year or >2 asthma related admissions ever
- Any asthma related ICU admission
- Current severe asthma exacerbation

NOTE: All patients admitted for asthma should be on an appropriate course of Oral or IV Steroids

Supplemental O₂ should be administered to keep O₂ sat >90%

Indications for Continuous Pulse Oximetry:

- First 2-4 hr of any asthma admission
- Supplemental oxygen requirement + 2-4 hours following discontinuation of supplemental oxygen
- SEVERE asthma exacerbation
- Patients requiring continuous albuterol
- **All other patients: intermittent O₂ sat checks q4 hr with vitals

Phase II: Inpatient - start here for MPASS score >8

- Albuterol continuous neb 20mg/hour
- Assessment q1 hour x 1. if change is made need to assess q1 hour until stable; if no change then assess q2 hours in this phase
- Advance to Phase III after 1 hour of treatment for MPASS score 1-8
- Consider pulmonology consult and ipratropium if worsening or not advancing in this phase



Phase III: Inpatient - start here for MPASS score 5-8

- Albuterol MDI 8 puffs OR 5 mg nebulizer treatment q2 hours
- Assessment 1 hour after change to Phase III, then q2 hours thereafter
- Begin discharge teaching/planning



Phase IV: Inpatient

- Albuterol MDI 8 puffs q4 hours
- Assessment 2 hours after change to Phase IV, then q4 hours thereafter
- Discharge teaching/planning



Phase V: Inpatient

- Albuterol MDI 4 puffs q4 hours
- Assessment q4 hours

Discharge Instructions:

- AMP: written copy and verbal explanation
- Follow up with PCP 24-48 hr
- Watch UCSF Pediatric Pulmonary Asthma Teaching Video
- Give "Living with Asthma" handout
- MDI/Spacer and, if applicable, nebulizer teaching > p/family to demonstrate use prior to discharge
- If followed by Pulmonology or other asthma specialist, schedule follow up within 1 month
- Prescribe inhaled corticosteroid

Discharge Criteria

- In Phase V with MPASS 1-5
- Observe minimum 2 hours after initial treatment in Phase V
- Tolerating oral intake
- No O₂ requirement
- Asthma education completed
- Follow up established
- See full Guideline for criteria for referral to Pulmonology

General Inpatient Guidelines

S Ashworth



General Inpatient Guidelines:

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