A. Components of asthma review

- Validated symptom score e.g. ACT
- Exercise tolerance
- Bronchodilator use – both self reported and prescription check
- Time off school / activities?

B. High Risk Patients

- History of severe attacks
- Poor health seeking behaviour amongst carers
- Failure to recognise symptom severity
- Poor adherence to treatment
- Overuse of beta-agonists - Identify and review patients prescribed >3 reliever device a month
- Peanut allergy

C. Red Flag indicators for alternative diagnoses

- Failure to thrive
- Abnormal voice or cry
- Stridor
- Nasal polyps

D. Treatment ladder

1. Non-pharmacological management, e.g. lifestyle & trigger avoidance
2. Optimise treatment of comorbid conditions (e.g. allergic rhinitis)
3. Non-pharmacological management
4. Assessment of response to treatment
5. Upward step on treatment ladder

E. Future attack risk assessment

- Past history of attacks
- Rescue oral steroid use?
- Air quality - indoor & external
- Obesity
- Tobacco exposure
- Weight/ height centile
- Check PEFR
- Failure to recognise symptom severity
- Poor adherence to treatment
- Overuse of beta-agonists - Identify and review patients prescribed >3 reliever device a month
- Peanut allergy

F. Inhaled technique review

- Exercise tolerance
- History of severe attacks
- Poor health seeking behaviour amongst carers
- Failure to recognise symptom severity
- Poor adherence to treatment
- Overuse of beta-agonists

G. Adherence - self report & explanation and provision of personalised asthma action plan

- Clinic management to include
  - Assessment of response to treatment
  - Upward step on treatment ladder

H. Assessment of response to treatment

- Past history of attacks
- Rescue oral steroid use?
- Air quality - indoor & external
- Obesity
- Tobacco exposure
- Weight/ height centile
- Check PEFR

I. Prevention of asthma attacks

- Exercise tolerance
- History of severe attacks
- Poor health seeking behaviour amongst carers
- Failure to recognise symptom severity
- Poor adherence to treatment
- Overuse of beta-agonists

J. Further treatment ladder

1. Non-pharmacological management
2. Assessment of response to treatment
3. Upward step on treatment ladder
4. Treatment plan

K. Medication management

- Non-pharmacological management
- Assessment of response to treatment
- Upward step on treatment ladder
- Treatment plan

L. Medication history

- Non-pharmacological management
- Assessment of response to treatment
- Upward step on treatment ladder
- Treatment plan

M.History of severe attacks

- Poor health seeking behaviour amongst carers
- Failure to recognise symptom severity
- Poor adherence to treatment
- Overuse of beta-agonists

N. Asthma control

- Exercise tolerance
- History of severe attacks
- Poor health seeking behaviour amongst carers
- Failure to recognise symptom severity
- Poor adherence to treatment
- Overuse of beta-agonists

O. Future history of attacks

- Rescue oral steroid use?
- Air quality - indoor & external
- Obesity
- Tobacco exposure
- Weight/ height centile
- Check PEFR

P. Past history of attacks

- Rescue oral steroid use?
- Air quality - indoor & external
- Obesity
- Tobacco exposure
- Weight/ height centile
- Check PEFR

Q. Exercise tolerance

- Rescue oral steroid use?
- Air quality - indoor & external
- Obesity
- Tobacco exposure
- Weight/ height centile
- Check PEFR

R. History of severe attacks

- Poor health seeking behaviour amongst carers
- Failure to recognise symptom severity
- Poor adherence to treatment
- Overuse of beta-agonists

S. Assessment of response to treatment

- Past history of attacks
- Rescue oral steroid use?
- Air quality - indoor & external
- Obesity
- Tobacco exposure
- Weight/ height centile
- Check PEFR

T. Exercise tolerance

- Rescue oral steroid use?
- Air quality - indoor & external
- Obesity
- Tobacco exposure
- Weight/ height centile
- Check PEFR

U. Poor health seeking behaviour amongst carers

- History of severe attacks
- Poor health seeking behaviour amongst carers
- Failure to recognise symptom severity
- Poor adherence to treatment
- Overuse of beta-agonists

V. Failure to recognise symptom severity

- History of severe attacks
- Poor health seeking behaviour amongst carers
- Failure to recognise symptom severity
- Poor adherence to treatment
- Overuse of beta-agonists

W. Poor adherence to treatment

- History of severe attacks
- Poor health seeking behaviour amongst carers
- Failure to recognise symptom severity
- Poor adherence to treatment
- Overuse of beta-agonists

X. Overuse of beta-agonists

- History of severe attacks
- Poor health seeking behaviour amongst carers
- Failure to recognise symptom severity
- Poor adherence to treatment
- Overuse of beta-agonists

Y. Exercise tolerance

- History of severe attacks
- Poor health seeking behaviour amongst carers
- Failure to recognise symptom severity
- Poor adherence to treatment
- Overuse of beta-agonists

Z. Poor health seeking behaviour amongst carers

- History of severe attacks
- Poor health seeking behaviour amongst carers
- Failure to recognise symptom severity
- Poor adherence to treatment
- Overuse of beta-agonists