

# RATING ASTHMA BOOKLETS

**E**FFECTIVE TEACHING WILL SAVE TIME AND IMPROVE your patient's understanding during a visit and beyond. Your teaching will be easier if you use an effective asthma booklet everywhere patients are waiting to be seen or need to be educated. A booklet is superior to a single page handout because most patients are ready to learn more.

Eleven asthma experts agreed that patients need knowledge in ten basic areas to achieve optimal asthma control.<sup>1</sup> Of the more than 20 booklets published since 2003, only *One Minute Asthma* covered each area completely and scored 100 points. The others scored between 6 and 55 points. Use the chart below to compare booklets you are considering for use in your practice. The top score for each item is 10. It requires that items 3 and 6 are also present. Score 0 if an area is missing or if there is an error.

If you use a free or cheap booklet, you and your staff will have to spend valuable time teaching basic information. A good booklet will pay for itself many times over in staff time saved, improved asthma control and patient satisfaction.

<sup>1</sup> Plaut, T. F., "Basic Elements of Education for Childhood Asthma," *American Journal of Asthma & Allergy for Pediatricians*, 1991; 4:220-222.

Title	<i>One Minute Asthma</i> <sup>1</sup>	<i>Booklet 1</i>	<i>Booklet 2</i>
1. Expectations	10		
2. Signs	10		
3. Triggers	10		
4. Peak Flow	10		
5. Medicines	10		
6. Devices	10		
7. Asthma Reaction	10		
8. Diary	10		
9. Action Plan	10		
10. Choice	10		
<b>Total Score</b>	<b>100</b>		

<sup>1</sup> Plaut, T. F., *One Minute Asthma: What You Need to Know*, 8<sup>th</sup> edition, Pedipress, Inc., 2008. [www.pedipress.com](http://www.pedipress.com)

## 1. SETS PROPER EXPECTATIONS FOR WELL-CONTROLLED ASTHMA

- 3 Fully active
- 6 Symptoms 2 or less days a week
- 10 Awakened by cough or wheeze 2 or less times per month

## 2. DESCRIBES THE FOUR MAIN SIGNS OF ASTHMA

- 3 Cough, wheeze, retractions and increased respiratory rate
- 6 Scores each sign
- 10 Lists emergency signs

## 3. DISCUSSES TRIGGERS

- 3 Defines a trigger
- 6 Lists pollution, allergen, viral, cold air, exercise
- 10 Discusses avoidance and that effects of triggers add up

## 4. EXPLAINS PEAK FLOW MONITORING

- 3 Recommends home use
- 6 Provides instructions
- 10 Explains peak flow zones

## 5. DESCRIBES ASTHMA MEDICINES

- 3 Presents concepts of quick relief and controller medicines
- 6 Presents good and bad effects of inhaled steroids, leukotriene modifiers, short and long acting beta-agonists and oral steroids
- 10 Lists generic and brand names of medicines

## 6. EXPLAINS DEVICES FOR INHALING ASTHMA MEDICINES

- 3 Describes reasons to use a metered dose inhaler, holding chamber, dry powder inhaler, compressor driven nebulizer
- 6 Gives proper instructions for four of five devices
- 10 Gives proper instructions for all five devices

## 7. EXPLAINS THE ASTHMA REACTION

- 3 Inflammation and bronchoconstriction
- 6 Accurate illustration
- 10 Hyper-reactivity

## 8. PRESENTS AN ASTHMA DIARY

- 3 Sample diary
- 6 Displays peak flow zones graphically
- 10 Tracks peak flow, medicines, asthma signs and triggers

## 9. PRESENTS AN ASTHMA ACTION PLAN

- 3 Plan shows asthma care zones
- 6 Presents clear example of zone management
- 10 Covers daily and emergency asthma situations

## 10. TELLS HOW TO CHOOSE A PROVIDER

- 3 Gives printed instructions
- 6 Observes use of all devices prescribed
- 10 Checks air flow (peak flow, FEV<sub>1</sub>, or PFT) at each visit