CDU APP Workflow for Asthma

CDU Exclusion Criteria

- Does the patient have pneumonia? If yes, defer to the pneumonia protocol.
- Unstable (vital signs, septic shock, severe systemic illness)
- Current pulse oximetry reading < 92 on 3LNC
- O2 supplementation required to maintain O2 saturation >92% is:
  - more than 2 L/min via NC if not on home O2
  - O2 requirement > than home O2 + 2L via NC (limit 4L)
- Clinical or radiographic pneumonia that significantly contributes to hypoxia or dehydration
- Systemic steroid dependence
- Multiple OR severe co-morbidities likely to significantly complicate disposition
- ESRD on dialysis

→ **If patient excluded, decline request for CDU, admit**

None present

In ED:

- Obtain CXR, labs
- Initiate respiratory treatments if needed
- Initiate steroids
- Antibiotics if needed
- Magnesium 2g IV over 20 minutes

Meets inclusion criteria?

- Clinical picture consistent with mild to moderate asthma exacerbation
- Anticipated stay > 8 hrs and < 24 hrs

→ *No* → **Admit**

Yes

CDU Admission Orders

- Vital signs q4°
- Diet
- FSBS if diabetic
- Albuterol nebulizer q1° x 4 hours, followed by q2° x 8 hours, followed by q4°
- Atrovent q4 hours
- Prednisone 40mg daily
- Peak flows pre and post treatments
- Care bundle
- Symptomatic treatment
- ± antibiotics
- Walk test

Improving symptoms / *Worsening symptoms*

Improving symptoms

- Respiratory improvement
- Able to ambulate without desaturation/worsening symptoms
- Stable vital signs

→ **Discharge Home**
with steroids, completed care bundle, +/- antibiotics, PCP follow-up

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Worsening symptoms

- Worsening respiratory exam
- Failed walk test

→ **Admit**

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