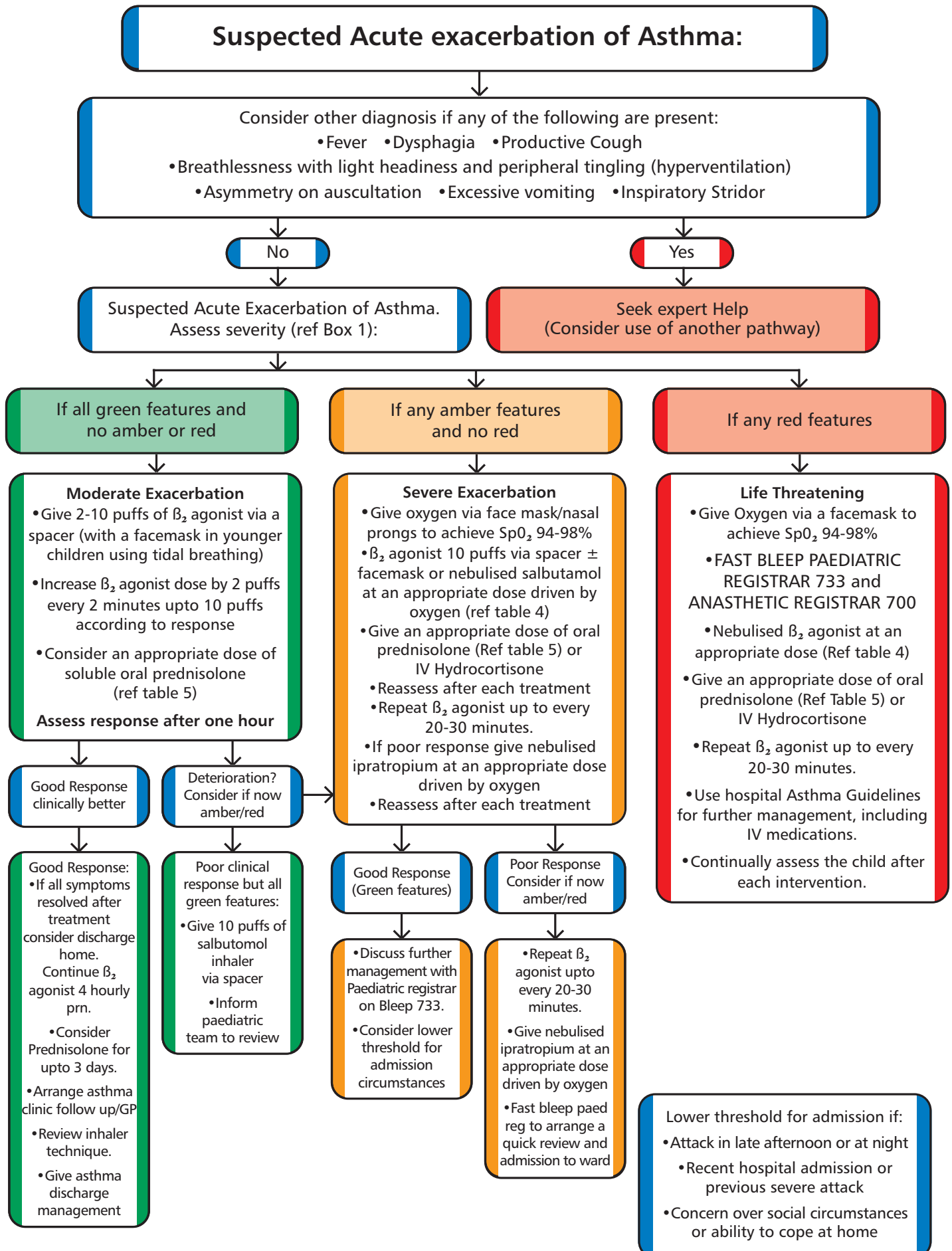


# Clinical Assessment Tool for the Child with Acute Exacerbation of asthma 2-16 Years



Management within Hospital Setting



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Management within Hospital Setting

**Table 1: Traffic Light system for identifying severity of Acute Exacerbation of Asthma**

**Table 2: Normal Paediatric Values:**

<b>Respiratory Rate at Rest:</b>		<b>Systolic Blood Pressure</b>	
2-5yrs	25-30 breaths/min	2-5yrs	80-100 mmhg
5-12yrs	20-25 breaths/min	5-12yrs	90-110 mmhg
>12yrs	15-20 breaths/min	>12yrs	100-120 mmhg
<b>Heart Rate</b>			
2-5yrs	95-140 bpm		
5-12yrs	80-120 bpm		
>12yrs	60-100 bpm		

**Table 4: Guidelines for nebuliser**

- Significantly low sats despite inhaler and spacer use
- Oxygen Saturations persistently below 92%
- Requiring oxygen
- Unable to use volumatic/spacer device
- Severe respiratory dmistress

**Table 3: Predicted Peak Flow: For use with EU / EN13826 scale PEF metres only**

Height (m)	Height (ft)	Predicted EU PEFR	Height (m)	Height (ft)	Predicted EU PEFR (L/min)
0.85	2'9"	87	1.30	4'3"	212
0.90	2'11"	95	1.35	4'5"	233
0.95	3'1"	104	1.40	4'7"	254
1.00	3'3"	115	1.45	4'9"	276
1.05	3'5"	127	1.50	4'11"	299
1.10	3'7"	141	1.55	5'1"	323
1.15	3'9"	157	1.60	5'3"	346
1.20	3'11"	174	1.65	5'5"	370
1.25	4'1"	192	1.70	5'7"	393

**Table 5: Prednisolone Guideline BNF2010-2011**

Give **prednisolone** by mouth:  
 child under 12 years 1–2 mg/kg (max. 40 mg) daily for up to 3 days or longer if necessary, if the child has been taking an oral corticosteroid for more than a few days give prednisolone 2mg/kg (max. 60mg). Child 12-18 years 40-50mg daily for at least 5 days.

## This guidance is written in the following context

This assessment tool was arrived at after careful consideration of the evidence available including but not exclusively use BTS Guidelines and NHS evidence. Healthcare professionals are expected to take it fully into account when exercising their clinical judgement. The guidance does not, however, override the individual responsibility of healthcare professionals to make decisions appropriate to the circumstances of the individual patient, in consultation with the patient and/or guardian or carer.