**DIAGNOSIS of aSTHMA IN A child WHO CAN RECORD PEAK FLOW MEASUREMENTS**

**Context:**

This template should be used for any school age child in whom a diagnosis of asthma is being considered

**Detailed Review**:

* **Record the presence of cough, wheeze** (heard by whom?) and breathlessness
* What do parents mean by wheeze? Whistling, rattling, upper airway sound
* Has a Doctor hear wheeze?
* Did wheeze respond to any treatment?
* **Symptom pattern** (episodic viral wheeze [EVW] versus multiple trigger wheeze [MTW]). Note that symptom patterns may change over time and they should be re-assessed regularly
* EVW – child ONLY wheezes with viral colds
* True EVW rarely responds to prophylactic inhaled steroids (ICS), but a trial (see below for details) of ICS is indicated if (a) there is significant peak flow variability between viral colds; (b) it is felt that symptoms between colds are being under-reported; (c) if there is a strong family and personal history of atopy; and (d) if the child has > one attack in six months necessitating the prescription of oral corticosteroids
* MTW – defined by answering the question ‘Does your child have significant wheeze and breathlessness even when s/he does not have a cold’
* MTW in the school age child is equivalent to asthma, and this diagnosis should be applied
* The relationship between EVW and atopic eosinophilic asthma is unclear; whether the asthma label should be used depends on whether the asthma diagnostic label automatically leads to a prescription of inhaled corticosteroid
* **Other atopic disease recorded**
* **Has variable airflow obstruction been sought?**
* 2 weeks home PEFR
* Acute BDR to inhaled bronchodilator
* Field exercise test
* **Family history of asthma and other atopic conditions**
* **Accurate identification of triggers recorded**
* **Has there been a follow up visit to assess the response to any prescribed therapy**
* Has objective and unequivocal evidence of response been documented?
* Could there have been spontaneous improvement?
* Should a trial off therapy be considered?