

Inhaler Technique Assessment Tool

Patient:

Date:

All Devices			
Must demonstrate:	Y	N	Advice
Can remove cap where applicable	<input type="checkbox"/>	<input type="checkbox"/>	Counsel
Exhales fully	<input type="checkbox"/>	<input type="checkbox"/>	
Seals lips around mouthpiece	<input type="checkbox"/>	<input type="checkbox"/>	
Inhales fully and holds breath for as long as comfortable after inhalation (approx 5-10secs)	<input type="checkbox"/>	<input type="checkbox"/>	
For a 2 nd dose, waits for approx 30s before repeating	<input type="checkbox"/>	<input type="checkbox"/>	
Demonstrates awareness of how to check for expiry date	<input type="checkbox"/>	<input type="checkbox"/>	
Aware to rinse mouth after use (ICS only)	<input type="checkbox"/>	<input type="checkbox"/>	

MDI			
Must demonstrate:	Y	N	Advice
Removes protective cover & check for debris	<input type="checkbox"/>	<input type="checkbox"/>	Counsel
Shakes inhaler	<input type="checkbox"/>	<input type="checkbox"/>	
Able to activate/ depress canister	<input type="checkbox"/>	<input type="checkbox"/>	Use HalerAid®
Able to co-ordinate depressing the canister and inhaling at the same time	<input type="checkbox"/>	<input type="checkbox"/>	Use holding chamber

MDI via Holding Chamber			
Must demonstrate:	Y	N	Advice
Removes protective cover & check for debris	<input type="checkbox"/>	<input type="checkbox"/>	Counsel
Shakes inhaler	<input type="checkbox"/>	<input type="checkbox"/>	
Able to attach spacer device	<input type="checkbox"/>	<input type="checkbox"/>	Demonstrate
Able to activate/ depress canister	<input type="checkbox"/>	<input type="checkbox"/>	Use HalerAid®
Demonstrates tidal breathing	<input type="checkbox"/>	<input type="checkbox"/>	Counsel
Awareness of how to clean holding chamber	<input type="checkbox"/>	<input type="checkbox"/>	

Turbohaler			
Must demonstrate:	Y	N	Advice
Able to open Turbohaler	<input type="checkbox"/>	<input type="checkbox"/>	1)Demonstrate 2)offer alternative
Able to twist and activate Turbohaler	<input type="checkbox"/>	<input type="checkbox"/>	Use ClickAid®

HandiHaler			
Must demonstrate:	Y	N	Advice
Able to open protective HandiHaler® and chamber	<input type="checkbox"/>	<input type="checkbox"/>	1)Demonstrate 2)offer alternative
Able to retrieve capsule from blister packaging	<input type="checkbox"/>	<input type="checkbox"/>	
Able to insert capsule into the Handihaler® device	<input type="checkbox"/>	<input type="checkbox"/>	
Able to close mouthpiece	<input type="checkbox"/>	<input type="checkbox"/>	
Able to pierce the capsule	<input type="checkbox"/>	<input type="checkbox"/>	
Holds device horizontally and takes two breaths from same capsule	<input type="checkbox"/>	<input type="checkbox"/>	Counsel
Checks that capsule is empty after inhalation	<input type="checkbox"/>	<input type="checkbox"/>	

Easibreathe			
Must demonstrate:	Y	N	Advice
Shakes device	<input type="checkbox"/>	<input type="checkbox"/>	
Able to open mouthpiece cover	<input type="checkbox"/>	<input type="checkbox"/>	Use a table edge
Demonstrates awareness of need to close and re-open mouthpiece cover for subsequent doses	<input type="checkbox"/>	<input type="checkbox"/>	Counsel
Seals lips around mouthpiece without blocking vents	<input type="checkbox"/>	<input type="checkbox"/>	

Accuhaler			
Must demonstrate:	Y	N	Advice
Able to open Accuhaler	<input type="checkbox"/>	<input type="checkbox"/>	1)Demonstrate 2)offer alternative
Able to depress lever for dose activation	<input type="checkbox"/>	<input type="checkbox"/>	
Holds device horizontally	<input type="checkbox"/>	<input type="checkbox"/>	

Soft Mist Inhaler			
Must demonstrate:	Y	N	Advice
Able to load the canister into the device	<input type="checkbox"/>	<input type="checkbox"/>	Push down on a hard surface.
Able to twist to prime the inhaler	<input type="checkbox"/>	<input type="checkbox"/>	1)Demonstrate 2)offer alternative
Able to open the mouthpiece cover	<input type="checkbox"/>	<input type="checkbox"/>	Counsel
Able to co-ordinate activation with breathing	<input type="checkbox"/>	<input type="checkbox"/>	

Inspiratory flow: L/min

Peak flow today: L/min

Completed by:

Outcome: Recheck in ... months | Refer to GP | HalerAid ClickAid Holding Chamber

Advice Given: