THE SAI GROUP: CARE PATHWAY - ASTHMA (SEC. CARE)

Referral with diagnosis of Asthma
(attack within last 30 days)

Initial evaluation within 48 hours of referral or home return whichever is earlier

Begin Telehealth (+ Medication Monitoring if applicable) within 48 hours post evaluation :

- Temperature– at least daily
- Heart rate– at least daily
- BP– at least daily
- Weight– at least daily
- Pulse-oxymetry– at least daily
- Spirometry– at least weekly
- Blood glucose level (if diabetic)- as ordered*
- EKG– once a week for 6 weeks (or as ordered)

Continue telehealth if risks present or for at least 1 episode if asymptomatic/ stable (unless discharged from home health before end of episode).

- **Nursing re-visit** no later than 48 hours post evaluation
- Frequency of nursing and home health aide based on clinical/ functional needs stated on initial evaluation/ physician orders
- Refer to OT and/or PT (if no admission orders)

OT/ PT Care (to include but not limited to):

- ADL trg. as needed
- AE/ trg. as needed
- Pt. education/ FMP design & trg. as needed

Nursing care (includes but not limited to):

- Review of drugs
- Watch for drug interactions/ side-effects
- Patient education w/ handouts / lifestyle management
- Medication administration/ management as needed
- Administration of annual influenza vaccination
- Administration of PPSV (if no history or last dose more than 5 years ago before the age of 65; if previously vaccinated after age 65– none needed) *
- Telehealth monitoring
- Check for s/s for Asthma and temp., BP/ postural BP, HR, respiratory rate, oxygen saturation, weight, blood glucose level (if diabetic) with **each visit**
- Supervision of aide as needed

Check for s/s of exacerbations w/ each visit

Does patient complain of any of the following signs & symptoms:

- Agitated/ confused/ drowsy?
- Wheezy?
- Cyanosed?
- Moderate to marked use of accessory muscles for breathing?

Yes

No

Do any of the following signs exist? (TELEHEALTH OR IN-PERSON)

- Oxygen saturation < 92% ?
- Finger stick glucose < 70 or >400?*
- New or worsening dyspnea?
- Initial PEFR or FEV1 is <50%, <100L/ min, or unable to perform?
- Severe difficulty in speaking?
- Heart rate > 120/ min

No

Yes

Nurse to contact Physician to review treatment plan/ medication reconciliation

Notify Physician Immediately/ consider discharge to hospital

Discontinue services when goals achieved/ potential maximized/ no further skilled needs with physician approval, or as directed by physician