



## Summary of Changes Report – June, 2010

# Diagnosis and Management of Asthma Guideline

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### Algorithm

#23, #24, #26, #28--The FEV<sub>1</sub> and PEF ranges stated on the algorithm were adjusted to greater than or equal to 70 for good response, 40-69 for incomplete response, and less than or equal to 40 for poor response to be consistent with the document.

### Annotations

- #3) A statement was added to Tables 1 and 2, “see figures on pages 73 and 74 of the NHLBI Expert Panel (2007) for classifying severity in patients after asthma becomes well established.
- #5) Assessment of tobacco use and/or second-hand exposure was added to the history taking.
- #8) A recommendation not to use LABA monotherapy in an asthma exacerbation was added. The initiation of inhaled corticosteroids is recommended to prevent future exacerbations.
- #11) The reference Yawn, 2006 was added to the section on Self-Assessment. This describes the APGAR tool to use in primary care. The implementation is associated with improved asthma compliance management.

A table from the NHLBI guideline was added to the section on allergens. This table is a comparison of skin tests with in vitro testing.

- #13) The Conclusion Grading Worksheet comparing leukotriene receptor antagonists to inhaled corticosteroids was deleted since there is now sufficient literature to support the contained recommendations.

The recommendation for Pneumococcal vaccine from CDC was added to the pharmacologic treatment annotation. The reference Talbot, 2005 was added.

- #25) The section on anticholinergics was updated. The Conclusion Grading Worksheet was deleted since there is now sufficient literature to support the contained recommendations.
- #32) Special Populations The section on Asthma in pregnancy was reviewed. The reference Schatz, 2009 was added to support the existing recommendations and discussion.

Appendix B—The albuterol dose of 1-2 puffs for children can be given 5-30 minutes prior to exercise.

Appendix D—Triamcinolone acetone was deleted. Mometasone DPI 110 and 220 mcg was added. Ciclesonide MDI 80 and 160 mcg was also added.

### **Clinical Highlights**

Early intervention with bi-level PAP was deleted.

### **Aims and Measures, Measurement Specifications**

All of the Aims, Measures, and Measurement Specifications were revised with clarifying language.

Numerator and Denominator definitions were expanded upon for better clarity.