

Pediatric Inpatient Asthma Pathway

Exclusions: Chronic lung disease, cystic fibrosis, heart disease, tracheomalacia, tracheostomy, sickle cell anemia, neuromuscular disease, immune disorders

Supplemental oxygen for SpO₂<90%

	0 POINTS	1 POINT	2 POINTS	3 POINTS
RR 2-3 yr 4-5 yr 6-12 yr >12 yr		≤34 ≤30 ≤26 ≤23	35-39 31-35 27-30 24-27	≥40 ≥36 ≥31 ≥28
Retractions	None	Subcostal or intercostal	2 of the following: subcostal, intercostal, substernal	3 of the following: intercostal, substernal, suprasternal, supraclavicular, OR nasal flaring/head bobbing /grunting
Dyspnea: 2-4 yr ≥ 4 yr	Normal feeding, vocalizations, & play Counts for ≥10 in 1 breath	1 of the following: difficulty feeding, decreased vocalization, or agitated Counts to 7-8 in one breath	2 of the following: difficulty feeding, decreased vocalization, or agitated Counts to 4-6 in one breath	Stops feeding, no vocalization; drowsy/confused Count to ≤3 in one breath
Auscultation	Normal breathing, no wheezing	End-expiratory wheeze	Expiratory wheeze only	Inspiratory or expiratory wheeze OR diminished breath sounds

SIGNS OF CLINICAL DETERIORATION:

- Drowsiness
- Confusion
- Silent chest



- Call RT and provider for assessment
- Consider PICU transfer

INPATIENT STEROIDS:

Transition to prednisone or Prednisolone (1-2mg/kg/day; max 60mg) for a total course of 5 days

DISCHARGE CRITERIA:

- In phase 3 with RS 1-4
- Tolerating oral intake
- No supplemental oxygen
- Follow-up established
- Written asthma action plan provided
- Smoking cessation education

Phase 1: Inpatient

- Albuterol MDI/spacer: 8 puffs every 2 hours
- Assessment every 1 hour with respiratory score (RS)
- Begin discharge teaching and planning

Phase 2: Inpatient

- Albuterol MDI/spacer: 8 puffs every 4 hours
- Assessment every 2 hours with RS

Phase 3: Inpatient

- Albuterol MDI/spacer: 4 puffs every 4 hours
- Assessment every 2-4 hours with RS

PHASE PROGRESSION (Phases 1-3)

- RS 1-4: Advance after one treatment at this phase
- RS 5-8: Continue therapy at this phase
- RS 9-12: Step back to previous phase

RT/RN to notify provider:

- Phase change
- Signs of clinical deterioration
- Failure to advance on pathway after 12 hours in a phase
- Increased oxygen requirement