1

Sit the child upright.

Stay calm and reassure the child. Don't leave the child alone.



2

HOW

TO USE

INHALER

Give 4 separate puffs of a reliever inhaler – blue/grey puffer (e.g. Ventolin, Asmol or Airomir)

Use a spacer, if available.

Give one puff at a time with 4-6 breaths after each puff.

Use the child's own reliever inhaler if available.

If not, use first aid kit reliever inhaler or borrow one.

Wait 4 minutes.

If the child still cannot breathe normally, **give 4 more puffs.** Give one puff at a time (Use a spacer, if available).

If the child still cannot breathe normally,

CALL AN AMBULANCE IMMEDIATELY (DIAL 000)

Say that a child is having an asthma attack.

Keep giving reliever.

Give 4 separate puffs every 4 minutes until the ambulance arrives.

WITH SPACER

Use spacer if available*



- Assemble spacer (attach mask if under 4)
- Remove puffer cap and shake well
- · Insert puffer upright into spacer
- Place mouthpiece between child's teeth and seal lips around it OR place mask over child's mouth and nose forming a good seal
- Press once firmly on puffer to fire one puff into spacer
- Child takes 4–6 breaths in and out of spacer
- Repeat 1 puff at a time until 4 puffs taken – remember to shake the puffer before each puff
- Replace cap

WITHOUT SPACER Kids over 7 if no spacer



- Remove cap and shake well
- Get child to breathe out away from puffer
- Place mouthpiece between child's teeth and seal lips around it
- Ask child to take slow deep breath
- Press once firmly on puffer while child breathes in
- Get child to hold breath for at least 4 seconds, then breathe out slowly away from puffer
- Repeat 1 puff at a time until 4 puffs taken – remember to shake the puffer before each puff
- · Replace cap

*If spacer not available for child under 7, cup child's/helper's hands around child's nose and mouth to form a good seal. Fire puffer through hands into air pocket. Follow steps for WITH SPACER.

Give 2 separate doses of a Bricanyl inhaler

If a puffer is not available, you can use Bricanyl for **children aged 6 years and over**, even if the child does not normally use this.

Wait 4 minutes.

If the child still cannot breathe normally, **give 1 more dose.**

If child still cannot breathe normally,

CALL AN AMBULANCE IMMEDIATELY (DIAL 000)

Say that a child is having an asthma attack.

Keep giving reliever

Give one dose every 4 minutes until the ambulance arrives.

BRICANYL

For children 6 and over only



- Unscrew cover and remove
- Hold inhaler upright and twist grip around then back
- Get child to breathe out away from inhaler
- Place mouthpiece between child's teeth and seal lips around it
- Ask child to take a big strong breath in
- Ask child to breathe out slowly away from inhaler
- Repeat to take a second dose remember to twist the grip both ways to reload before each dose
- · Replace cover

Not Sure if it's Asthma?
CALL AMBULANCE IMMEDIATELY (DIAL 000)

If the child stays conscious and their main problem seems to be breathing, follow the asthma first aid steps. Asthma reliever medicine is unlikely to harm them even if they do not have asthma.

Severe Allergic Reactions CALL AMBULANCE IMMEDIATELY (DIAL 000)

Follow the child's Action Plan for Anaphylaxis if available. If you know that the child has severe allergies and seems to be having a severe allergic reaction, use their adrenaline autoinjector (e.g. EpiPen, Anapen) before giving asthma reliever medicine.

For more information on asthma visit: Asthma Foundations www.asthmaaustralia.org.au National Asthma Council Australia www.nationalasthma.org.au If an adult is having an asthma attack, you can follow the above steps until you are able to seek medical advice.

Although all care has been taken, this chart is a general guide only which is not intended to be a substitute for individual medical advice/treatment. The National Asthma Council Australia expressly disclaims all responsibility (including for negligence) for any loss, damage or personal injury resulting from reliance on the information contained. © National Asthma Council Australia 2011.

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