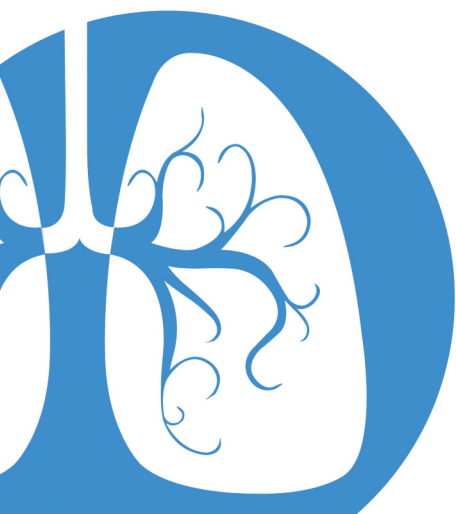




A lifetime of specialist care

Royal Brompton & Harefield **NHS**
NHS Foundation Trust

Your child's difficult asthma assessment





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This leaflet gives you general information about your child's difficult asthma assessment. It does not replace the need for personal advice from a qualified healthcare professional. Please ask us if you have any questions.

What is difficult asthma?

For most children, asthma is easy to control with simple medications.

However, for some children this is not the case. Despite

taking medications, they suffer from a range of symptoms that may result in asthma attacks and generally affect their quality of life. We describe this as difficult asthma.

What is a difficult asthma assessment?

A difficult asthma assessment is a way of finding out as much as possible about your child and his / her asthma. There are lots of different reasons why your child may have asthma that is difficult to control. During an assessment, we work in partnership with

you to identify possible causes so we can suggest the best treatment for your child.

It is important that you read this leaflet before the assessment begins so that you understand what it involves.

Why does my child need this assessment?

We think this assessment may help your child. Once we have completed an assessment, we can often suggest simple

things to improve your child's asthma, without increasing the doses of medication.

What happens during the assessment?

First, we will ask you and your child to visit the hospital. You will meet one of our respiratory clinical nurse specialists and your child will

have some tests (see page 6).

After the hospital visit the specialist nurse will arrange to visit you at home.



How long does the assessment take?

The hospital visit normally takes two to four hours depending on the tests your child needs (the nurse will give you details when he / she arranges the assessment with you).

Both you and your child will have the opportunity to get a drink or lunch during the hospital visit.

The home visit takes around two hours.

Preparing for the assessment

Please bring your child's medications with you to the hospital. If your child takes antihistamine (allergy)

medication, please do not give it to him / her for 48 hours before the assessment unless it is really essential.

If your child uses inhalers

Your child should take his / her regular inhalers on the morning of the assessment, **except for the blue inhaler (salbutamol)**.

We would prefer him / her not to take the blue inhaler in the **four hours** before the

assessment as it will affect the results of the spirometry test (see page 6). However, if your child finds it difficult to manage without this inhaler, please use it and make a note of the time. Then, when you arrive at the hospital, tell us the time your child used the inhaler.

What happens during the hospital visit?

During the hospital visit we will:

- Ask lots of questions about your child's asthma. For example, how often do asthma attacks occur?
 - Review your child's medications.
 - Check your child is using his / her inhaler correctly.
 - Provide a device that attaches to your child's steroid inhaler (called a Smartinhaler) to monitor how often he / or she uses it during a two-month period. The device is expensive, so please look after it carefully and return it when you next visit the clinic.
 - Ask you and your child to complete questionnaires about how asthma affects his / her daily life and mood.
 - We will ask your permission to contact your child's school (see page 8 for details).
- Your child will also have a series of tests.

During the hospital visit, we will check your child's inhaler technique



The tests

- **Spirometry** – a breathing test to check how well your child breathes. We use a device called a spirometer to take the measurements. We will ask your child to breathe in fully and to blow out as hard and fast as he / she can into the mouthpiece of the spirometer.
- **Skin prick tests (allergy testing)** – a safe way of testing for allergies to common substances, for example: grass pollen and house dust mites.
- **Urine test** – a sample of your child's urine will show whether he / she has been exposed to environmental tobacco smoke.
- **Exhaled nitric oxide** – a breathing test that

These tests are not painful, but can cause an itchy rash that lasts up to 30 minutes.

A child using a spirometer



measures inflammation (swelling) in your child's airways. We will ask your child to breathe in and out of a mouthpiece attached to a special machine.

- **Blood tests** – to assess your child's general health.
- **Adrenal gland function tests** – to check your child's adrenal glands are working effectively. This is explained

in more detail in a separate leaflet. If you would like to know more, please ask for a copy.

Note: Sometimes we arrange for your child to have blood and adrenal gland function tests on a different day.

Also, if your child has had any of the tests listed done recently, we may not need to repeat them.

What happens during the home visit?

The same specialist nurse you met at the hospital will arrange to visit you at home at a convenient time. This gives him / her an opportunity to meet you again and to understand more about your child's asthma.

There is no need for your child to be at home during the visit, so if the visit is during term time, please send him / her to school.

Asthma can be caused by triggers (things that irritate your lungs) in the home environment. We may be able

to identify those triggers and give you advice on how best to tackle them.

The nurse will identify any problems in your home that may be affecting your child's asthma. For example, if you live in social housing and your home has mould and is overcrowded, we may be able to help you by supporting your application for re-housing.

Please do not make any special preparations for the nurse's visit to your home. The nurse needs to see what your home is like on a normal day.



Information about your child at school

It is useful to find out how asthma affects your child at school. During the hospital visit, we will ask for your permission to contact the school.

We will ask the school for information about your child's attendance, asthma symptoms and whether he / she is able to take part in physical education (PE) lessons.

This information will help us complete our assessment.

We will check the school has an asthma action plan for your child and offer support in managing his / her condition at school. If needed, we will also visit the school to provide asthma care training or attend meetings about your child's health needs.

What happens when the assessment is complete?

When the assessment is complete, all the health professionals involved in your child's asthma care will meet to discuss the results. We call this a multidisciplinary meeting. Doctors, specialist nurses and pharmacists attend the meeting. Together, we will make recommendations about how to manage your child's asthma.

We will discuss the results and our recommendations

with you at a hospital appointment and send your GP and consultant at your local hospital a summary of the assessment. You will get a copy of the summary.

Most of the time, we find ways to help improve your child's asthma without increasing his / her medication or doing more assessments. If we need further assessments, we will discuss them with you.

What else may happen?

During or after the assessment:

- We may ask a physiotherapist to assess your child's breathing pattern. The physiotherapist can provide advice about breathing control exercises for your child. These can help ease the asthma symptoms, especially during an attack.
- We may refer your child to a specialist asthma psychologist, if we feel that anxiety and stress are affecting your child's asthma. A psychologist can provide treatment to help your child manage his / her asthma and cope with the emotional impact of having the condition.

Getting to the hospital

Your appointment will be in Fulham Wing. You need to make your own way to and from the hospital. Please be aware that there is little or no car parking available.

By bus

Buses 14, 211 and 414 all stop outside the Fulham Wing entrance to the hospital.

Buses 49 and 211 stop outside the Sydney Street entrance, a five-minute walk to Fulham Wing.

Buses 11, 19, 22 and 319 all travel along the King's Road

and stop near the corner of Sydney Street, which is less than 10 minutes' walk from Fulham Wing.

By tube

The nearest tube station is South Kensington on the Circle, District and Piccadilly lines. It is a 10-minute walk from the hospital. The 49 bus travels from South Kensington station to the hospital. Taxis are also available.

By rail

The nearest mainline train stations are Victoria station and West Brompton station.

Both have good tube and bus connections to the hospital.

By car

If a family member is driving you in by car, they can drop off or pick up at the main hospital entrance in Sydney Street. There are no places to stop outside Fulham Wing.

Parking for patients and visitors

Royal Brompton Hospital is in a pay-and-display parking meter zone (street parking).

There is a small public car park

three minutes' walk away on Sydney Street, near King's Road.

Parking for disabled badge holders

A small number of disabled parking spaces are available in:

- Cale Street
- Foulis Terrace
- Sydney Street (near the main hospital entrance).

Remember to display your disabled badge.

Who can I contact for more information?

If you need to cancel or rearrange your appointment / home visit, or want further information, please contact the children's respiratory nursing team:

Tel: **020 7351 8714** (direct line)

Email: paedrespnurse@rbht.nhs.uk

If you have concerns about any aspect of the service you have received in hospital and feel unable to talk to those people responsible for your care, call PALS on:

- Royal Brompton Hospital – 020 7349 7715
- Harefield Hospital – 01895 826 572

You can also email pals@rbht.nhs.uk. This is a confidential service.

Royal Brompton Hospital
Sydney Street
London
SW3 6NP
tel: 020 7352 8121
textphone: (18001) 020 7352 8121

Harefield Hospital
Hill End Road
Harefield
Middlesex
UB9 6JH
tel: 01895 823 737
textphone: (18001) 01895 823 737

Website: www.rbht.nhs.uk

إذا كنت ترغب في الحصول على ترجمة فورية لمضمون هذه الوثيقة إلى اللغة العربية، يرجى منك الاتصال بأحد مستخدمينا بجناح المصلحة التي يتم فيها استشفائك. أحد موظفينا سيسعى لترتيب إجراءات الترجمة وإتمامها في الوقت المناسب لك.

Brosurteki bilginin Türkçe tercumesi için tedavi görüyor olduğunuz bölüme bas vurunuz. Bölüm personeli tercümenin gerçekleşmesini en kısa zamanda ayarlayacaktır.

