

Asthma Action Plan Wizard

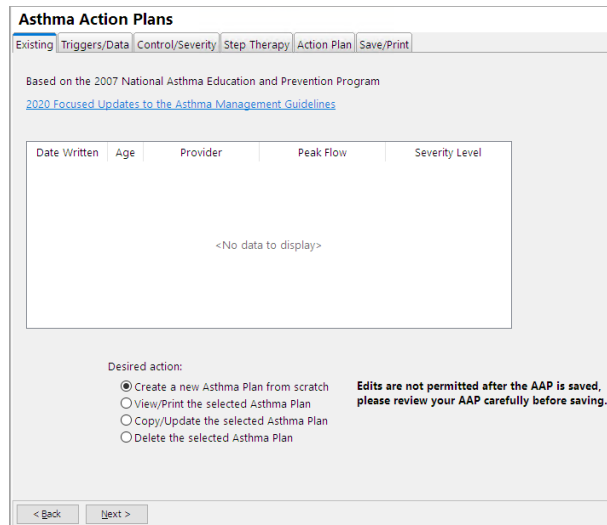
Last Modified on 12/28/2022 8:41 am EST

Version 21.0

Path: Clinical, Practice Management or Billing tab > Patient Chart > Asthma Plans

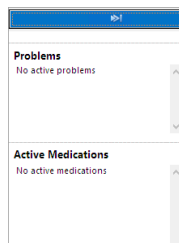
Create a New Asthma Plan

1. Navigate to Asthma Action Plan using the above path.
2. Select the **Create a new Asthma Plan from scratch** radio button and click the **Next** button or the **Peak Flow/Triggers** tab.



3. The Triggers/Data window displays.

Note: A collapsible banner is available throughout the Triggers/Data - Action Plan tabs that display the Patient's Problem List and Active Medications, if any.



Triggers/Data

1. Select a radio button, Best or Predicted, for **Peak flow type**.
 - **Best:** Selection of Best would remove the Height in inches field from the calculation of Estimated peak flow.
 - **Predicted:** Selection of Predicted would allow an entry of height in inches to calculate the estimated peak flow.

Notes:

- If a height is entered, in Vitals/Growth, the height will populate the Triggers/Data window. In addition, the Estimated peak flow will calculate.
- If Predicted is selected for Peak flow type, you would enter the patient's height and click the **Calculate** button.
- Predicted will only calculate for patient's 43 inches or higher.

2. Click into the **Estimated peak flow** field and enter the information. If Predicted was selected, the Estimated peak flow will be entered once the Calculate button is clicked.
3. Click into the **Patient goal** field and enter goals specific to the patient. The goals may be typed into the text field or entered using the Phrase Construction button.
4. Choose one or more checkboxes listed in the **Triggers** section. Additional triggers may be entered by selecting the **Other** checkbox and entering the triggers in the text field.
5. Click the **Next** button or the **Control/Severity** tab. The Asthma Control/Severity window is displayed.

Control/Severity

1. Select the radio button to indicate if the patient is or is not currently taking long-term controller medications.

Selection	Component <i>Click to view full-size image</i>																																								
is currently taking long-term controller medications	<div style="border: 1px solid #ccc; padding: 5px;"> <p>Patient <input checked="" type="radio"/> is currently taking long-term controller medications <input type="radio"/> is NOT</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="background-color: #f2f2f2;">Components of Control</th> <th style="background-color: #f2f2f2;">Well Controlled</th> <th style="background-color: #f2f2f2;">Not Well Controlled</th> <th style="background-color: #f2f2f2;">Very Poorly Controlled</th> </tr> </thead> <tbody> <tr> <td>Symptoms</td> <td><input type="checkbox"/> <=2 days/week</td> <td><input type="checkbox"/> >2 days/week</td> <td><input type="checkbox"/> Throughout the day</td> </tr> <tr> <td>Nighttime awakenings</td> <td><input type="checkbox"/> <=2/month</td> <td><input type="checkbox"/> 3-3x/week</td> <td><input type="checkbox"/> >=4x/week</td> </tr> <tr> <td>SABA symptom control (not prevention of EBB)</td> <td><input type="checkbox"/> <=2 days/week</td> <td><input type="checkbox"/> >2 days/week</td> <td><input type="checkbox"/> Several times per day</td> </tr> <tr> <td>Interference with normal activity</td> <td><input type="checkbox"/> None</td> <td><input type="checkbox"/> Some limitation</td> <td><input type="checkbox"/> Extremely limited</td> </tr> <tr> <td>Lung function</td> <td><input type="checkbox"/> Not performed or <80% predicted best</td> <td><input type="checkbox"/> 60-80% predicted best</td> <td><input type="checkbox"/> <60% predicted best</td> </tr> <tr> <td>Validated questionnaires</td> <td><input type="checkbox"/> Not completed or AHAQ=0 or ACT<=17 or ACT<=20</td> <td><input type="checkbox"/> AHAQ=1 or 2 or ACT=18 or ACT=19</td> <td><input type="checkbox"/> AHAQ=3-4 or ACT=18</td> </tr> <tr> <td>Risk Exacerbations requiring oral systemic corticosteroids Treatment-related adverse effects</td> <td><input type="checkbox"/> 0-1/year <input type="checkbox"/> Consider severity and interval since last exacerbation, may fluctuate over time.</td> <td><input type="checkbox"/> >2/year</td> <td><input type="checkbox"/> >2/year <input type="checkbox"/> Medication side effects can vary in intensity. This does not correlate to specific control levels but should be considered in overall risk assessment.</td> </tr> <tr> <td>Overall Classification</td> <td><input type="checkbox"/> Well Controlled</td> <td><input type="checkbox"/> Not Well Controlled</td> <td><input type="checkbox"/> Very Poorly Controlled</td> </tr> </tbody> </table> </div>	Components of Control	Well Controlled	Not Well Controlled	Very Poorly Controlled	Symptoms	<input type="checkbox"/> <=2 days/week	<input type="checkbox"/> >2 days/week	<input type="checkbox"/> Throughout the day	Nighttime awakenings	<input type="checkbox"/> <=2/month	<input type="checkbox"/> 3-3x/week	<input type="checkbox"/> >=4x/week	SABA symptom control (not prevention of EBB)	<input type="checkbox"/> <=2 days/week	<input type="checkbox"/> >2 days/week	<input type="checkbox"/> Several times per day	Interference with normal activity	<input type="checkbox"/> None	<input type="checkbox"/> Some limitation	<input type="checkbox"/> Extremely limited	Lung function	<input type="checkbox"/> Not performed or <80% predicted best	<input type="checkbox"/> 60-80% predicted best	<input type="checkbox"/> <60% predicted best	Validated questionnaires	<input type="checkbox"/> Not completed or AHAQ=0 or ACT<=17 or ACT<=20	<input type="checkbox"/> AHAQ=1 or 2 or ACT=18 or ACT=19	<input type="checkbox"/> AHAQ=3-4 or ACT=18	Risk Exacerbations requiring oral systemic corticosteroids Treatment-related adverse effects	<input type="checkbox"/> 0-1/year <input type="checkbox"/> Consider severity and interval since last exacerbation, may fluctuate over time.	<input type="checkbox"/> >2/year	<input type="checkbox"/> >2/year <input type="checkbox"/> Medication side effects can vary in intensity. This does not correlate to specific control levels but should be considered in overall risk assessment.	Overall Classification	<input type="checkbox"/> Well Controlled	<input type="checkbox"/> Not Well Controlled	<input type="checkbox"/> Very Poorly Controlled				
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2. Complete the selections on the Components window. From the selections in the Components window, the Overall Classification will be selected.
3. Click the **Next** button or the **Step Therapy** tab. The Step Therapy window is displayed.

Step Therapy

1. Review the **Medical Decision-Making** field, and click the drop-down to change, if necessary.

Persistent Asthma: Daily Medication					
Consult with asthma specialist if Step 4 or higher is required.					
Consider consultation at Step 3.					
Choose the step whose medications most closely match those the patient is currently taking:					
Step 1	Step 2	Step 3	Step 4	Step 5	Step 6*
Preferred: PRN SABA	Preferred: Daily low-dose ICS and PRN SABA ^a or PRN concomitant ICS and SABA ^a Alternative: Daily LTRA ^a and PRN SABA or Cromolyn ^b , or Nedocromil ^b , or Zileuton ^c , or Theophylline ^d , and PRN SABA	Preferred: Daily and PRN combination low-dose ICS-formoterol Alternative: Daily medium-dose ICS and PRN SABA or Daily low-dose ICS-LABA, or daily low-dose ICS + LAMA ^e , or daily low-dose ICS + LTRA ^a , and PRN SABA or Daily low-dose ICS + Theophylline ^d or Zileuton ^c , and PRN SABA	Preferred: Daily and PRN combination medium-dose ICS-formoterol ^f Alternative: Daily medium-dose ICS-LABA or daily medium-dose ICS + LAMA, and PRN SABA ^a or Daily medium-dose ICS + LTRA ^a , or daily medium-dose ICS + Theophylline ^d , or daily medium-dose ICS + Zileuton ^c , and PRN SABA	Preferred: Daily medium-high dose ICS-LABA + LAMA and PRN SABA ^a Alternative: Daily medium-high dose ICS-LABA or daily high-dose ICS + LTRA ^a , and PRN SABA	Preferred: Daily high-dose ICS-LABA + oral systemic corticosteroids + PRN SABA
<input type="radio"/> Intermittent		<input type="radio"/> Mild persistent		<input type="radio"/> Moderate persistent	
<input type="radio"/> Moderate persistent		<input type="radio"/> Severe persistent		<input type="radio"/> Severe persistent	
<small> *Updated based on the 2020 guidelines. ^aCiclesonide, Nedocromil, LTRAs including Zileuton and montelukast, and Theophylline were not considered for this update and/or have limited availability for use in the United States, and/or have an increased risk of adverse consequences and need for monitoring that make their use less desirable. The FDA issued a Boxed Warning for montelukast in March 2020. ^bIn the AHRQ systematic review that informed this report did not include studies that examined the use of biologics (e.g., anti-IgE, anti-IL5, anti-IL5/6, anti-IL13). Thus, this report does not contain specific recommendations for the use of biologics in asthma in Steps 5 and 6. ^cData on the use of LAMA therapy in individuals with severe persistent asthma (Step 6) were not included in the AHRQ systematic review and thus no recommendation is made. </small>					
Recommendation: The patient is not currently taking any long-term controller medications. Based on the answers in the severity survey, consider starting therapy at:		Step 1	Medical Decision-Making: Start on Step 1		

Note: The Medical Decision-Making field is populated from the answers selected in the Control/Severity window when the radio button is selected "is not currently taking long-term controller medications". When the "is currently taking long-term controller medications" radio button is selected, Medical Decision Making must be selected.

2. Click the **Next** button or the Action Plan tab. The Action Plan window displays.

Action Plan

1. Enter medications for each of the following sections, if applicable.

- **Controller Meds** (Green)
- **Quick Relief Meds** (Yellow)
- **Rescue Meds** (Red)

Existing	Triggers/Data	Control/Severity	Step Therapy	Action Plan	Save/Print
Green Zone					
Daily Medications					
Medicine		Dosing			
<input type="text"/>	Add Rx	<input type="text"/>			
<input type="text"/>	Add Rx	<input type="text"/>			
<input type="text"/>	Add Rx	<input type="text"/>			
<input type="text"/>	Add Rx	<input type="text"/>			
<input type="text"/>	Add Rx	<input type="text"/>			
Before Exercise	<input type="text"/>	Add Rx	<input type="radio"/> 2 or	<input type="radio"/> 4 puffs	5 minutes before exercis
Yellow Zone					
Add quick-relief medicine and keep taking Green Zone medicine					
<input type="text"/>	Add Rx	<input type="text"/>	Number of puffs OR <input type="checkbox"/> Nebulizer, once		
Can repeat every <input type="text"/> minutes up to a maximum of <input type="text"/> doses					
If symptoms (and peak flow, if used) return to Green Zone after 1 hour of above treatment:					
Continue monitoring to be sure you stay in the green zone					
If symptoms (and peak flow, if used) do not return to Green Zone after 1 hour of above treatment:					
<input type="checkbox"/>	Take quick-relief medicine	<input type="text"/>	Add Rx	<input type="text"/>	Number of puffs OR
<input type="checkbox"/>	Take oral steroid	<input type="text"/>	Add Rx		
<input type="checkbox"/>	Call the doctor within	<input type="text"/>	hours after taking oral steroid		
Red Zone					
<input type="checkbox"/>	Take quick-relief medicine	<input type="text"/>	Add Rx	<input type="text"/>	Number of puffs OR
<input type="checkbox"/>	Take oral steroid	<input type="text"/>	Add Rx		

2. To select a medication, click the drop-down menu and select from the list Medications listed as chronic medications will be available to select from the drop-down menu.
3. *(Optional)* If no medications are listed, to add, click the **Add Rx** button. Complete the Prescription window and save the information.
4. Repeat for each medication zone window, Green, Yellow and Red.



Note: If adding a medication using the Add Rx button, this will not create a medication entry in the patient chart.

5. Click the **Next** button or the **Save/Print** tab. The Save/Print window is displayed.

Save/Print

1. Select the radio button to indicate whether the patient may or may not self-administer medications.
2. Click the drop-down and select a provider in the Signature Name field.
3. Click the **Save Plan** button.

4. Once the plan is saved the **Print** button will display.
5. Select an asthma report from the Available Asthma Action Plan Report list.
6. *(Optional)* Complete the below steps to send the Asthma Action Plan to the Patient Portal. An Asthma Action Plan can only be sent to the portal by practice staff who have an associated user account on the IntelliChart Practice Portal.
 - a. Click the **Share to portal** checkbox.
 - b. Click the drop-down and select from the calendar or enter an expiration date in the **Portal Exp Date** field.



Note: The Portal Exp Date field will populate with the Default Document Expiration Date set in the Portal tab of System Preferences.

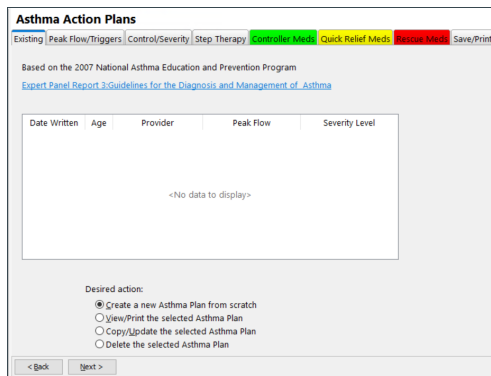
7. Click the **Print** button.

Version 20.18

Path: Clinical, Practice Management or Billing tab > Patient Chart > Asthma Plans

Create a New Asthma Plan

1. Navigate to Asthma Action Plan using the above path.
2. Select the **Create a new Asthma Plan from scratch** radio button and click the **Next** button or the **Peak Flow/Triggers** tab.



3. The Peak Flow/Triggers window displays.

Peak Flow/Triggers

1. Select a radio button, Best or Predicted, for **Peak flow type**.

- **Best:** Selection of Best would remove the Height in inches field from calculation of Estimated peak flow.
- **Predicted:** Selection of Predicted would allow an entry of height in inches to calculate the estimated peak flow.

Notes:

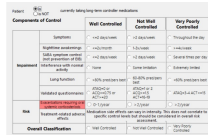
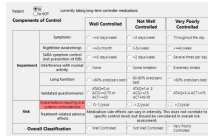


- If a height is entered, in Vitals/Growth, the height will populate the Peak Flow/Triggers window. In addition, the Estimated peak flow will calculate.
- If Predicted is selected for Peak flow type, you would enter the patient's height and click the **Calculate** button.
- Predicted will only calculate for patient's 43 inches or higher.

2. Click into the **Estimated peak flow** field and enter the information. If Predicted was selected, the Estimated peak flow will be entered once the Calculate button is clicked.
3. Click into the **Patient goal** field and enter goals specific to the patient. The goals may be typed into the text field or entered using the Phrase Construction button.
4. Choose one or more checkboxes listed in the **Triggers** section. Additional triggers may be entered by selecting the **Other** checkbox and entering the triggers in the text field.
5. Click the **Next** button or the **Control/Severity** tab. The Asthma Control/Severity window is displayed.

Control/Severity

1. Select the radio button to indicate if the patient is or is not currently taking long term controller medications.

Selection	Component <i>Click to view full-size image</i>
is currently taking long-term controller medications	
is NOT currently taking long-term controller medications	

2. Complete the selections on the Components window. From the selections in the Components window, the Overall Classification will be selected.
3. Click the **Next** button or **Step Therapy** tab. The Step Therapy window is displayed.

Step Therapy

1. Review the **Medical Decision-Making** field, and click the drop-down to change, if necessary.

Persistent Asthma: Daily Medication					
Consult with asthma specialist if step 3 care or higher is required.					
Consider consultation at step 2.					
Choose the step whose medications most closely match those the patient is currently taking:					
Step 1	Step 2	Step 3	Step 4	Step 5	Step 6
Preferred: Low-dose ICS	Preferred: Low-dose ICS	Preferred: Low-dose ICS + LABA OR	Preferred: Medium-dose ICS + LABA	Preferred: High-dose ICS + LABA AND Consider Omalizumab for patients who have allergies	Preferred: High-dose ICS + LABA + oral corticosteroid AND Consider Omalizumab for patients who have allergies
Alternative: Cromolyn, LTRA, Nedocromil, or Theophylline	Alternative: Low-dose ICS + either LTRA, or Theophylline	Alternative: Medium-dose ICS	Alternative: Medium-dose ICS + either LTRA, Theophylline, or Zileuton		
<input type="radio"/> Intermittent	<input type="radio"/> Mild persistent	<input type="radio"/> Moderate persistent	<input type="radio"/> Moderate persistent	<input type="radio"/> Severe persistent	<input type="radio"/> Severe persistent
Recommendation: The patient is not currently taking any long-term controller medications. Based on the answers in the severity survey, consider starting therapy at:			Step 2	Medical Decision-Making: Start on Step 2	



Note: The Medical Decision-Making field is populated from the answers selected in the Control/Severity window when the radio button is selected "is not currently taking long-term controller medications". When the "is currently taking long-term controller medications" radio button is selected, Medical Decision Making must be selected.

2. Click the **Next** button or **Controller Meds** tab. The Controller Meds window displays.

Meds Tabs

1. Enter medications for each of the following medication tabs, if applicable.
 - **Controller Meds** (Green)
 - **Quick Relief Meds** (Yellow)
 - **Rescue Meds** (Red)
2. To select a medication, click the drop-down menu and select from the list Medications listed as chronic medications will be available to select from the drop-down menu.
3. (Optional) If no medications are listed, to add, click the **Add Rx** button. Complete the Prescription window and save the information.
4. Repeat for each medication zone window, Green, Yellow and Red.



Note: If adding a medication using the Add Rx button, this will not create a medication entry in the patient chart.

5. Click the **Next** button or the **Save/Print** tab. The Save/Print window is displayed.

Save/Print

1. Select the radio button to indicate whether the patient may or may not self-administer medications.
2. Click the drop-down and select a provider in the Signature Name field.
3. Click the **Save Plan** button.

Patient may self-administer medications
 may NOT

Signature Name:

**Edits are not permitted after the asthma plan is saved.
Before saving, you can go back to check your work.**

Available Asthma Action Plan Reports

Generic Asthma Action Plan
AsthmaTreatmentPlan
MA Asthma Action Plan

Share to portal Portal Exp Date:

4. Once the plan is saved the **Print** button will display.
5. Select a asthma report from the Available Asthma Action Plan Report list.
6. *(Optional)* Complete the below steps to send the Asthma Action Plan to the Patient Portal. An Asthma Action Plan can only be sent to the portal by practice staff who have an associated user account on the IntelliChart Practice Portal.
 - a. Click the **Share to portal** checkbox.
 - b. Click the drop-down and select from the calendar or enter an expiration date in the **Portal Exp Date** field.



Note: The Portal Exp Date field will populate with the Default Document Expiration Date set in the Portal tab of System Preferences.

7. Click the **Print** button.