This protocol is for trained CIP Paramedics only. If during assessment, procedure, or treatment the patient is found to have a medical emergency in need of hospital treatment, the CIP visit will be suspended, and local MCA protocols utilized.

Purpose: To provide additional guidelines beyond the CIP General Assessment and Care for evaluating, caring for and educating patients with Asthma.

1. Follow CIP Patient General Assessment and Care protocol
2. Obtain additional vital signs, history, and diagnostics pertinent to condition and/or as ordered by physician which may include:
   1. Vitals: SpO2, work of breathing
   2. History:
      1. Frequency, duration, and triggers of DIB
      2. Previous and recent episodes requiring treatment
      3. Use of medications (short acting and long acting corticosteroids, etc.)
      4. Spirometry, peak flow, capnography
3. On-scene medication administration may include:
   1. Use of approved MCA protocols and medications up to the extent of standard paramedic treatment according to protocol.
   2. Assist with patient’s prescribed home medications that are not included in standard EMS treatment protocols
4. On-scene education and suggested support sources may include
   1. Review patient’s current history including frequency of symptoms with rest, with activity and with sleep
   2. Review exacerbating factors including viral exposure, allergen exposure, exercise, cold air, tobacco smoke, chemical irritants, etc.
   3. Observe the home to identify exacerbating factors
   4. Review devices used by the patient including short/long acting medications and MDI/continuous nebulizer devices
   5. Review when to call health provider
   6. National Certified Asthma Educator referral