Stepwise Approach: 5-11 years

2020 EPR 3 Updates/GINA Hybrid



At every visit, check inhaler technique, medication adherence, and assess for environmental triggers.

Step 6 Step 5 Preferred: Daily high-dose Step 4 Preferred: ICS + LABA + **LAMA** Daily high-dose Step 3 ICS + LABA Preferred: Daily medium-Alternative: Step 2 Preferred: dose ICS + Alternative: Daily high-dose **LABA** ICS + LABA + Daily low-dose Daily medium-Step 1 **Daily OCS** Preferred: ICS + LABA dose ICS + LABA + LAMA **Daily low-dose** Reliever: **High-dose ICS ICS** Reliever: **Albuterol PRN** Alternative: x7 days at first Reliever: **Albuterol PRN** OR Daily mediumsian of URI Alternative for dose ICS **Albuterol PRN** OR **Consider SMART** only viral wheeze: (see page 2) OR **Consider SMART** Reliever: **High-dose ICS** Reliever: (see page 2) **Consider SMART Albuterol PRN** x7 days at first **Albuterol PRN** (see page 2) sian of URI Consider: OR Alternative: Consider: **Asthma Biologic Consider SMART** Reliever: Low-dose ICS (see page 2) **Asthma Biologic** + SABA PRN **Albuterol PRN** Mild Moderate Intermittent **Persistent** Consult asthma specialist -Consider consult -

(pulmonary or allergy)

Stepwise Approach: 5-11 yearsAdditional Notes





Alternative Reliever Therapy at Steps 3-6

Consider **SMART** (**S**ingle **M**aintenance **a**nd **R**eliever **T**herapy) in consultation with a specialist

ICS + Formoterol PRN

• 1-2 puffs at a time, max 8 puffs per day for maintenance + reliever



At every visit:

- · check inhaler technique
- check medication adherence
- assess for environmental triggers



Consider consult with asthma specialist at Steps 1-3

Recommend consult with asthma specialist at Steps 4-6



Montelukast has an **FDA Boxed Warning** due to risk of serious adverse neuropsychiatric side effects and is no longer recommended as an asthma controller medication.

Abbreviations

EPR 3

Expert Panel Report 3

GINA

Global Initiative for Asthma

PRN

As Needed

ICS

Inhaled Corticosteroids

URI

Upper Respiratory Infection

LABA

Long-Acting Beta-Agonist

LAMA

Long-Acting Muscarinic Antagonist

OCS

Oral Corticosteroid

SABA

Short-Acting Beta-Agonist