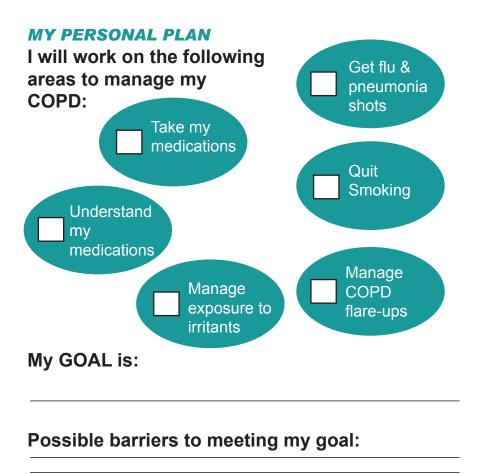


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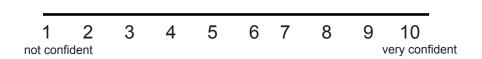






# Things that would help me meet my goal:

My confidence in meeting my goal:





Living with chronic obstructive pulmonary disease or COPD isn't easy and at times can be very frustrating. It can limit what you're able to do both personally and professionally and can affect everyday activities like shopping, cleaning, walking or climbing a short flight of stairs. It can impact your sleep and hamper activities with family and friends.

COPD includes two types of lung diseases, chronic bronchitis and emphysema. *It does not include asthma.* 

**Chronic bronchitis** happens when there is inflammation and eventual scarring of the lining of the bronchial tubes (tubes that connect your windpipe to your lungs). Long-term, this affects the flow of oxygen from your lungs and produces excessive respiratory secretions an eventually scarring.

**Emphysema** destroys the air sacs in the lungs where oxygen is exchanged. This damage can't be reversed.

Both conditions cause shortness of breath and difficulty breathing and most people have a combination of both.

Chronic bronchitis and emphysema increase the risk for developing pneumonia, they can cause frequent hospitalizations, depression and result in limited enjoyment from life.

COPD can take many years to develop and often shows up later in life. Smoking is the leading cause of COPD, and now secondhand smoke has been associated with it, which could affect future generations and add to the rising cost of health care.

# Making a commitment to improve your quality of life STARTS TODAY.

# Medications & Oxygen Therapy:

Knowing which medications you're on, their side effects and what they do are all vital to effectively managing your disease. Discuss your medications with your health care provider and set up a plan that works for you. Make sure your health care provider knows **ALL** medications you're taking including herbs, vitamins and over-the-counter medications. If you are being discharged from the hospital, you will receive instructions on any new medication(s) that have been started while hospitalized, including oxygen therapy.

Oxygen is considered a medication and is ordered by your health care provider. If you're on oxygen therapy your durable medical equipment provider will discuss oxygen safety, risks and complications of oxygen therapy. **Don't increase your oxygen without FIRST discussing** *it with your health care provider (high levels of oxygen are very dangerous to individuals with COPD).* 

## **Medication Tips**

- Always carry a current list of medications with you.
- Take your medications daily, do not miss a dose. If you do, DO NOT take extra without your health care provider's permission.
- It's best to get your medication from one pharmacy and talk to the pharmacist about your medications if you need to.
- Know the side effects of you medications. Watch for them and report them to your health care provider.
- If you can't afford your medication tell your health care provider or pharmacist.
- Don't overuse your inhalers or nebulizers.
- Don't stop taking your medications without talking to your health care provider.
- Don't start any new medications without consulting with your health care provider.
- If you're on steroids (prednisone) weigh yourself daily and monitor your ankles, feet and face for swelling as steroids can cause fluid build-up.

# *I'm taking control of my life by . . .*

Quitting smoking

- Getting immunizations I need like a yearly flu shot and a pneumonia shot if I haven't had one yet
- Staying away from pollutants/irritants, which could make my disease worse (i.e., secondhand smoke, severe air pollen, etc.)



□ Eating a sensible diet — 5-6 small meals a day instead of 3 large meals is preferable



Taking my medication as directed and reporting any side effects or problems to my health care provider



□ Talking to my health care provider before increasing/decreasing my flow of oxygen



- Not smoking or allowing others to smoke around me when my oxygen is on therapy
- Determining, with my health care provider, who to call if I notice changes in my condition
- □ Waking up every day with a positive attitude and enjoying life the best I can

# Self Management Plan for Chronic Obstruction Pulmonary Disease

## Green Zone means "All Clear"



Your Normal Weight \_\_\_\_\_

- No cough, wheezing, chest tightness, or shortness of breath during the day or night over your usual symptoms
- No decrease in your ability to maintain normal or usual activity level

## Yellow Zone means "Caution"

#### Call your doctor if you have any of these symptoms:



- Sputum (phlegm) that increases in amount of color or becomes thicker than usual
- Increased cough or increased wheezing even after you take your medicine and it has time to work
- · Decrease in appetite and fatigues easily
- · Increased shortness of breath with activity
- · Swelling in ankles or feet more than usual
- Fever of 100.5 F oral or 99.5 F under your arm
- Increased number of pillows needed to sleep or need to sleep in a chair
- Anything else unusual that bothers you

## **Red Zone means "Medical Alert"**

#### Call your doctor NOW if you have any of these symptoms:



- Unrelieved shortness of breath
- Unrelieved chest pain
- · Wheezing or chest tightness at rest
- · Increased and/or irregular heart beat
- Change in the color of your skin, nail beds or lips to gray
  or blue
- Mental changes/increased confusion
- Chest pain or pain that worsens when you breathe or cough
- · Difficulty waking up
- · Sleeping more than usual

#### Green Zone means your symptoms are under control

- Continue taking your medications
- Use Oxygen as prescribed
- · Keep physician appointments
- · Avoid cigarette smoke and other irritants

# Yellow Zone means you may need your medications adjusted

- Use"Quick Relief Medicine" as prescribed (inhalers/nebulizers)
- Your symptoms may indicate that you need an adjustment in your medications
- Call your health care provider or health care team (i.e., home health)
- Use oxygen/medication as prescribed
- · Avoid cigarette smoke and other irritants
- · Get plenty of rest

<b>Red Zone means</b>	you need to be evaluated	by a physician right
away or call 911		

Primary MD:				
Phone Number:				
OTHER CONTACTS:				
DME Provider Number:				
Home Health Agency Number:				
Caregiver Number:				



**COPD** (chronic obstructive pulmonary disease) makes breathing difficult and is one of the most common diseases of the lung.

**COPD** is the fifth most common reason for Americans over 65 being hospitalized.

**COPD** is the third leading cause of death in the United States.

**COPD** causes more deaths in women than in men.

**COPD's** symptoms develop slowly making it hard for people to even know they're sick.

**COPD's** primary cause is tobacco smoke. The more you smoke the greater the chance of developing COPD; although not all smokers get COPD.

**COPD** is a long-term (chronic) illness. The disease will get worse more quickly if you do not stop smoking.

**COPD** is not curable, but with treatment you can breathe better and feel better.

## **Immunizations Save Lives**

Adults need immunizations to prevent serious diseases. Some of those diseases include influenza (flu) and pneumonia. Pneumonia and influenza are leading causes of death in the nation for older adults and can cause significant illness, particularly among individuals aged 65 years and older and those with chronic medical conditions.



# Who Should Get Immunized?

- Everyone needs a flu shot each year during the fall.
- Everyone needs a pneumonia shot after they are 65.

If you have lung, heart or kidney disease, diabetes, HIV or cancer, you need a flu shot each year and a pneumonia shot before the age of 65.

Discuss your immunization status and the possibility of receiving the immunizations you need with your doctor.

My last flu shot was: \_\_\_\_\_

My pneumonia shot was: \_\_\_\_\_





- · Live alone or with limited community support
- Unable to contact your usual caregiver or support person (have a back-up plan)
- Require assistance with managing your medications
- Take more than 7 medications a day
- Require assistance with managing oxygen/nebulizers or inhalers
- · Require assistance with activities of daily living
- Have a diagnosis of COPD with other contributing medical conditions
- Have a history of decreased adherence to a medical treatment plan
- Have had repeated visits to the emergency room or hospitalizations in the last year

# NOTE: Select a person you can rely on to call if you experience an increase in symptoms or need help.

Reminders									
Phone numbe	er:								
My follow-up appointment is:ata.m. / p.									
Your health care provider is to complete the following									
Vital signs on	discharge:								
Blood Pressure	e/	_	Pulse						
Respirations Temperature									
Oxygen satura	ation on room	air	_%						
Oxygen saturation on oxygen at L/min									
Was FEV1 don	e at the hospit	tal?		Y	Ν				
If so, what was	s the result? $\_$								
Were new me	dications discu	ussed pi	rior to o	discha	rge? Y	Ν			
Advanced care	e plan in place	?		Y	Ν				
POLST	Living Will	Oth	ier						
		Life Ale	ert7	Y	Ν				

This information is brought to you by Mountain-Pacific Quality Health, the Medicare quality improvement organization (QIO) for Montana, Wyoming, Hawaii and Alaska.

Mountain-Pacific is part of a nationwide network of QIOs and works locally, within the states and territories we serve, to achieve wide-scale improvements in patient care.

As a result of our quality improvement work with local health care providers, we strive to contribute to safer, more effective care for you.



This material was developed by Mountain-Pacific Quality Health, the Medicare quality improvement organization for Montana, Wyoming, Hawaii and Alaska, under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services. Contents presented do not necessarily reflect CMS policy. 10SOW-MPQHF-MT-IPC-12-30