

# Self-Management Plan for COPD

This is **your** personal management plan. Bring it with you every time you see a Healthcare Professional about your COPD (Nurse, Physiotherapist, Pharmacist or Doctor).

The aim of this plan is to help you have better control of your Chronic Obstructive Pulmonary Disease (COPD). It will enable you to monitor your symptoms and to know what to do if you have an exacerbation. An exacerbation is a rapid and sustained worsening of your symptoms that may warrant a change to your regular treatment.

This plan includes sections for recording medication, monitoring symptoms and treating exacerbations.

Name: \_\_\_\_\_

Date of birth: \_\_\_\_\_ CHI: \_\_\_\_\_

Diagnosis/diagnoses: \_\_\_\_\_

GP practice contact number (Mon to Fri, 8am to 6pm)

\_\_\_\_\_

Outside these hours, phone NHS 24 on **111**

Community/nurse  
respiratory service \_\_\_\_\_

Date for review

\_\_\_\_/\_\_\_\_/\_\_\_\_



## Usual COPD symptoms when WELL

### Breathlessness score

Please record the mMRC breathlessness score\* (see below) that describes your symptoms when you are well.

Date: \_\_\_\_\_ Score: \_\_\_\_\_

| Grade | Degree of breathlessness related to activities  |
|-------|---|
| 0     | I only get breathless with strenuous exercise   |
| 1     | I get short of breath when hurrying on level ground or walking up a slight hill   |
| 2     | On level ground, I walk slower than people of my age because of breathlessness, or I have to stop for breath when walking at my own pace on the level |
| 3     | I stop for breath after walking about 100 yards or after a few minutes on level ground  |
| 4     | I am too breathless to leave the house or I am breathless when dressing/undressing  |

### Sputum production

The normal colour of your sputum is: \_\_\_\_\_

How much sputum do you produce each day? \_\_\_\_\_

### Cough

Do you normally have a cough? \_\_\_\_\_

### Swollen ankles

Do you normally have ankle swelling? \_\_\_\_\_

### Usual respiratory medications

| Inhaler / tablet name | Preparation | Dose / frequency |
|-----------------------|-------------|------------------|
| 1                     |             |                  |
| 2                     |             |                  |
| 3                     |             |                  |
| 4                     |             |                  |

### Oxygen saturation level

Normal oxygen saturation is 92% or above on room air (note in some COPD patients your baseline oxygen saturation could be 88-92% Please check with your Healthcare Professional).

Your usual level is \_\_\_\_\_%

### How do I keep well...

- Take daily exercise as you can manage. You can discuss pulmonary rehabilitation classes with your Healthcare Professional
- Eat a good balanced diet and drink plenty of liquids
- Do not smoke, and avoid smoky environments
- Plan ahead and have things to look forward to
- Always have enough medications - never run out
- Take all medication regularly as prescribed whether you think they help at the time or not
- Recommended annual winter vaccines
- Check with your Healthcare Professional if you are eligible for a pneumococcal vaccination (helps prevent you from getting future pneumonias).



## Your COPD may be **GETTING WORSE** if you have any of the following symptoms...

- More breathless than usual
- An increase in the amount or change in colour of your sputum
- A new or increased cough
- New or increased ankle swelling
- More frequent use of reliever medication
- Less able to do your normal activities or they are taking longer because of shortness of breath.

### What action to take if your COPD symptoms are getting worse:

- Increase reliever medication (blue/blue trimmed inhaler)
- Balance activity with plenty of rest
- Eat little and often and drink plenty of fluids
- Use your breathing and chest clearance techniques.

### Continue to monitor your symptoms closely:

If your symptoms improve within two days, continue your usual medication.

If your symptoms stay the same or are getting worse after two days:

- Continue with the increased dose of reliever medication (blue/blue trimmed inhaler) or nebuliser, if you have one at home
- Stop smoking (if you smoke currently)
- Follow the instructions on page 4, as you may be having a flare up of your COPD, which is called an exacerbation
- An exacerbation might be triggered by an infection, a change in the weather, stress or there may be no apparent cause. If you get a cold, it is important to look out for changes to your chest symptoms.



## What to do if you have an **EXACERBATION?**

You are having an exacerbation if you have **two** of the following signs:

- 1) Are much more breathless than usual
- 2) Have an increase in the amount of sputum
- 3) Have a change in colour of sputum

**Standby exacerbation medication** (see also page 5)

### **Steroids (prednisolone)**

If you have two or more signs then start taking **prednisolone**.  
**Dose of prednisolone - 30mg once a day for 5 days (unless advised otherwise by your Healthcare Professional).**

### **Antibiotics**

If one of these signs is a change in the colour of your sputum also start an antibiotic.

### What to do if you have an exacerbation of your COPD:

- Contact your Healthcare Professional
- Contact the community/nurse respiratory service
- Start taking your standby supply of steroids and/or antibiotics
- Other \_\_\_\_\_

**Preparation:** \_\_\_\_\_

**Dose:** \_\_\_\_\_

**If you experience an exacerbation of COPD, and start prednisolone and/or antibiotics, ALWAYS advise your Healthcare Professional as soon as possible.**



## EMERGENCY symptoms of COPD

- Extremely short of breath with no relief from inhalers
- Chest pain
- High fever
- Feeling of agitation, drowsiness, panic or confusion.

**Contact your GP surgery or the community respiratory team (if you are known to them) immediately or, outwith surgery hours, phone NHS 24 on 111.**

**In case of extreme emergency, dial 999 for an ambulance.**

### Have you used your standby exacerbation medication?

#### Remember:

- Contact your Nurse / Physiotherapist / Pharmacist / Doctor (delete as appropriate) if you do not start to feel better after three days of treatment
- Contact your Nurse / Physiotherapist / Pharmacist / Doctor (delete as appropriate) if you take more than one course of “standby” steroids and antibiotics in one month.

### My hospital consultant is:

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## An exacerbation diary

It is **important** to keep track of any exacerbations, as this will help your Healthcare Professional (Nurse, Physiotherapist, Pharmacist or Doctor) to manage your COPD.

#### Remember:

- Tell your Healthcare Professional if you use your rescue medication, so they can keep track of your flare ups and you can get your medications replaced
- Check from time to time that your rescue medication isn't out of date
- If you cough up blood at any time - during a flare up or when you feel unwell - you need to contact your GP/Community Respiratory team (if you are known to them), as soon as you can. If out of hours, contact NHS 24 on **111**
- If you have more than two flare ups a year that require your rescue medication, you need to arrange a routine review appointment with your Healthcare Professional.

| Date  | Treatment used | Hospital admission |
|-------|----------------|--------------------|
| _____ | _____          | _____              |
| _____ | _____          | _____              |
| _____ | _____          | _____              |
| _____ | _____          | _____              |

#### Any other relevant information or advice

## For further information contact:

NHS Lothian Respiratory MCN:

<https://services.nhslothian.scot/respiratory/>

NHS Inform: [www.nhsinform.co.uk](http://www.nhsinform.co.uk)

Asthma & Lung UK: <https://www.asthmaandlung.org.uk>

Chest, Heart & Stroke Scotland: [www.chss.org.uk](http://www.chss.org.uk)

Quit Your Way Smoking Cessation: [tinyurl.com/qywlothian](http://tinyurl.com/qywlothian)

Dolby Vivisol (home oxygen supplies): **0800 833 531**

## Carer organisations:

Edinburgh: [www.edinburghcarers.co.uk](http://www.edinburghcarers.co.uk)

East Lothian: [www.coel.org.uk](http://www.coel.org.uk)

West Lothian: [www.carers-westlothian.com](http://www.carers-westlothian.com)

Midlothian: [www.midlothiancarers.co.uk](http://www.midlothiancarers.co.uk)

## Patient Websites:

Actify: <https://www.actify.org.uk/home>

My Lungs, My Life: [www.mylungsmylife.org](http://www.mylungsmylife.org)

**To re-order copies of this plan please contact the NHS  
Lothian Resource Centre on [loth.resourcecentre@nhs.scot](mailto:loth.resourcecentre@nhs.scot)**

\*The mMRC breathlessness scale ranges from grade 0 to 4. It is very similar to the original version and is now widely used in studies. It should be noted that the MRC clearly states on its website that it is unable to give permissions for use of any modified version of the scale (including, therefore, the mMRC scale). Use of the MRC questionnaire is free but should be acknowledged.

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