

## **Chronic Obstructive Pulmonary Disease (COPD) Education Plan**

### **Getting ready to learn about COPD**

Learning something new can be hard. It is even harder if you are not feeling well. The purpose of this education plan is for you and the staff to review this information together. Here are some good things to tell the staff.

- Who you want to learn with you. We would like to have someone who will be helping you at home learn with you.
- The best way for you to learn. Do you learn best by reading a book or pamphlet, or by doing things yourself?
- If you are not feeling well, if you are in pain or you cannot focus right now.

This information is important to your health. We may explain something more than once. We will be giving you information in small bits over several days. If there is something you don't understand it's OK to ask us to explain.

### **What I need to learn about COPD**

By the time I leave the hospital I will be able to show or tell staff:

1. What COPD is.
2. How I will use medicine as instructed.
3. How I will monitor my condition.
4. When I will call my doctor.
5. What I will avoid that can make my breathing worse.
6. What I will do to keep my breathing strong.
7. How I keep up my energy and do my daily activities.
8. How I can eat to help to keep my lungs and body healthy.

### **The staff will use three questions to teach me about COPD:**

1. What is my main problem?
2. What do I need to do?
3. Why is this important to me?

The staff will ask me to repeat back important points in my own words, or ask me to show what I have learned. They want to make sure that I know about my breathing and my illness.

### **What is my main problem?**

I have chronic obstructive pulmonary disease or COPD. I have trouble getting air into and out of my lungs. This causes me to be short of breath, cough and wheeze.

### **What do I need to do?**

I will be able to tell the staff how I will use my medicine.

- I know how to use my breathing medicine.
- I will take my medicine the way my doctor has told me to.
- I will take my medicine at the same time every day.
- I will not run out of medicine.

I will be able to tell the staff how I will monitor my condition.

- Green Zone – I am doing well today.
  - I can do my usual activities and exercise.
  - I am not coughing more than usual.
  - I sleep well at night.
  - My eating and appetite feel normal
  - My mucous is normal.
- Yellow zone – I am having a bad day or a COPD flare up.
  - I have a low-grade fever.
  - I am using my rescue inhaler with little relief.
  - My cough is more frequent.
  - My mucus is increasing in amount or thickness.
  - I am more tired and have trouble sleeping.
  - I have new or more ankle swelling.
  - I am more breathless than normal.
  - I don't feel like eating.
- Red zone – I need to see a doctor.
  - I feel disoriented, confused or my speech is slurred.
  - I have severe shortness of breath or chest pain.

- I have a blue color around my fingers or lips.
- I am coughing up blood.
- My medicine is not helping.
- I will use the COPD daily evaluation and action plan to track and monitor how I am feeling.
- I will take them to my doctor's visit.

I will be able to tell the staff when I will call my doctor.

I will call my doctor during office hours if:

- I am in the yellow zone and I am having trouble breathing that does not get better with medicine.
- I am having more secretions.
- My secretions change in color to red, green or dark yellow.
- I have an oral temperature over 102 degrees.
- I am running out of medicine.

I will get medical help right away if I:

- Am in the red zone.
- Have chest pain.
- Am having trouble breathing and my medicine does not help.
- Have a fast heartbeat.
- Am confused or upset (my family may notice this).
- Have an oral temperature above 102 degrees.

I will be able to tell the staff what I will avoid that can make my breathing worse.

- I will stop smoking.
- I will stay away from other people smoking.
- I will stay away from any smoke.
- I won't take medicine that contains antihistamines. Antihistamines are medicines that dry up secretions. They are in cold medicines.

I will be able to tell the staff what I will do to keep my breathing strong. I will:

- Not smoke.
- Ask others not to smoke around me.
- Avoid air pollution and stay inside on ozone action days.
- Drink enough water to keep my urine clear or pale yellow. This helps keep my secretions loose.
- Use a humidifier or vaporizer to keep the air around me moist.
- Get vaccines to prevent illnesses like flu and pneumonia.
- Use my oxygen if my doctor prescribes it.
- Take my medicine the way my doctor tells me to.
- Talk to my doctor about a pulmonary rehab program.

I will be able to tell the staff how I keep up my energy and do my daily activities.

- Balance activity and rest periods
- Exercise
- Use the main principles of energy saving and work.
  - Plan ahead. Find the best time of day for activity. Keep everything I need for a task together.
  - Set priorities. Decide which tasks are most important. Do not rush.
  - Pace myself. Stop and rest before I get tired. I can take many short rest breaks instead of one long rest break
  - Body mechanics. Sit when I can. Try not to twist my body. Carry things close to my body and lift using my legs
  - Simplify. Limit my stair climbing. Use items that are light in weight. Break up jobs into steps that can be done over a space of time.
  - Equipment. Look for items to make things easier for me.
- Use a bathing bench for my bathtub or shower.
- Use a walker with a seat for resting.
- Use breathing techniques when feeling short of breath

I will be able to tell the staff how I can eat to help to keep my lungs and body healthy.

- Eat small meals, and eat often. Eat three meals and two to three snacks each day. Eat and drink foods that are high in protein. Foods rich in protein include meats, chicken, turkey, fish, eggs, beans, peas, and peanut butter.
- Eat and drink foods that are high in calories. Milkshakes, cheese, and yogurt are rich in both protein and calories. Fats such as salad dressings, butter or margarine, and dips add calories to food.
- Choose fruits and vegetables in a variety of colors because they provide different vitamins and minerals your body needs.
- Choose foods with fiber. Fresh fruits and vegetables with skins or seeds and foods made from whole grains are good sources of fiber.
- Take a food supplement if my doctor prescribes one.
- Use supplemental oxygen around mealtimes if my doctor prescribes this.

### **Why is this important to me?**

My COPD will not be cured. But, I can take care of myself and prevent breathing problems. It is important for me to prevent illnesses like flu and pneumonia.

### **COPD Daily Evaluation and Action Plan**

Use the following COPD daily evaluation and action plan to track and monitor how you are feeling. Take them to your doctor's visit and talk about them.

# COPD

## Daily Evaluation

Name _____	Date _____
Doctors Name _____	Phone _____
Emergency Contact _____	Phone _____

<b>Green Zone Days</b>	These are my normal days	Actions to take
	<input type="checkbox"/> I can do my usual activities and exercise. <input type="checkbox"/> I am not coughing more than usual. <input type="checkbox"/> I sleep well at night. <input type="checkbox"/> My eating and appetite feel normal <input type="checkbox"/> My mucous is normal.	<input type="checkbox"/> I will take all my medicines as prescribed. <input type="checkbox"/> I will keep my doctor appointments. <input type="checkbox"/> I will use my oxygen if prescribed. <input type="checkbox"/> I will eat and exercise regularly. <input type="checkbox"/> I will avoid inhaled irritants and bad air days. <input type="checkbox"/> I will update my COPD action plan every 6 months
<b>Yellow Zone Days</b>	These are my bad days	Actions to take
	<input type="checkbox"/> I have a low-grade fever. <input type="checkbox"/> I am using my rescue inhaler with little relief. <input type="checkbox"/> My cough is more frequent. <input type="checkbox"/> My mucus is increasing in amount or thickness. <input type="checkbox"/> I am more tired and have trouble sleeping. <input type="checkbox"/> I have new or more ankle swelling. <input type="checkbox"/> I am more breathless than normal. <input type="checkbox"/> I don't feel like eating.	<input type="checkbox"/> I will limit my activity and use breathing techniques. <input type="checkbox"/> I will use my oxygen as prescribed. <input type="checkbox"/> I will take my regular medicines as prescribed. <input type="checkbox"/> I will get plenty of rest. <input type="checkbox"/> I will report these changes to my doctor <input type="checkbox"/> I will start special medicines* as arranged by my doctor: _____
<b>Red Zone Days</b>	Days when I need help right away	Actions to take
	<input type="checkbox"/> I feel disoriented, confused or my speech is slurred. <input type="checkbox"/> I have severe shortness of breath or chest pain. <input type="checkbox"/> I have a blue color around my fingers or lips. <input type="checkbox"/> I am coughing up blood. <input type="checkbox"/> My medicine is not helping.	<input type="checkbox"/> I will call 911 for help right away. <input type="checkbox"/> I will start these special medicines: _____ _____

\*If symptoms do not improve in one day after taking special medicine, call your doctor.

# COPD Action Plan

Complete the following table every 6 months and bring it with you to your next doctor’s visit. Put in X in the box below how you respond when doing each of the activities.

Activity	Responses			
	I can do this without any problems	I can do this with minor problems	I have a hard time doing this	I cannot do this
Clean house				
Make my bed				
Brush my teeth				
Comb my hair				
Bathing or Showering				
Walking				
Climbing stairs				
Working				
Sleeping				
Exercising				
Cooking				
Washing dishes				

# Chronic Obstructive Pulmonary Disease (COPD) Education Plan

## Resources for staff:

- [Bronson Procedure Manual Online Library \(NXT\)](#)

Search for:

1. Nursing J-03 OXYGEN ADMINISTRATION SAFETY GUIDELINE
2. Nursing J-04 OXYGEN ADMINISTRATION VIA NASAL CANNULA PROCEDURE
3. Nursing J-24 RESPIRATORY CARE OF THE ADULT MEDICAL PATIENT GUIDELINE
4. Respiratory Care/36.90 MDI/DPI

## Teaching Tools:

- COPD Education Plan
  1. COPD Action Plan
  2. COPD Daily Evaluation
- Metered Dose Inhaler (MDI) Education Plan
- COPD Booklet
- Smoking Cessation Booklet
- American Dietetic Association patient education material for COPD:  
<http://nutritioncaremanual.org/vault/editor/Docs/COPDNutritionTherapy1.pdf>

## References:

- [GOLD - the Global initiative for chronic Obstructive Lung Disease](#)
- ADA Nutrition Care Manual

## Approved by:

- Patient Education Council

## Authored by:

- Kristi Holmes, BAS, RRT Respiratory Staff Development Instructor

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\*This page is intended for staff use only. Do not give to the patient. This document is not part of the permanent medical record.

**Are there any contraindications to this teaching?**

Some patients may be resistant to education about their illness. If the patient is in an exacerbated state, it is not the time to learn.

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