

This is a list of options available to you that may help you better manage your COPD.

	Self Care	Self Management Plan. Request a self management plan from your GP Pharmacies. You will be able to get help at your local pharmacy NHS Direct. Tel: 0845 4647 Open 24 hours for advice
	Further Support	The Lung Club. Tel: 020 8989 5546 E: thelungclub@talktalk.net Expert Patient Programme. Tel: 020 8491 1570 British Lung Foundation. Tel: 08458 50 50 20
	Community Help teams	Long term conditions team. Tel: 0208 491 1570 Community Pulmonary Rehabilitation services. Tel: 020 8491 1570
	GP	Your GP Surgery. Tel: 0845 4080 172 GP Out of Hours Services. Tel: 0845 0750497
	NHS Walk-in Centre	Loxford Polyclinic. 417 Ilford Lane, Ilford, Essex IG1 2SN. Tel: 020 8822 3800 Open 8am-8pm 7 days
	A+E	Whipps Cross University Hospital. Whipps Cross Road Leytonstone London E11 1NR. Tel: 020 8539 5522 King George Hospital. Barley Lane Goodmayes IG3 8YB. Tel: 0845 130 4204 Queen's Hospital. Rom Valley Way Romford Essex RM7 0AG. Tel: 0845 130 4204
	999	If you feel your symptoms are so severe that you can't attend A+E, then call 999

Keeping your COPD under control.

We want to make sure you live well with your COPD and your condition is as well managed as possible. There are key things you can do to prevent COPD flare ups/exacerbations, which can be disruptive to you or to your families' lives. This will also ensure NHS resources are best used. For example, correct use of your inhalers, taking part in pulmonary rehabilitation classes or stopping smoking and using your rescue pack may prevent costly emergency hospital admissions.

Some examples of preventative costs	Some examples of emergency costs
 Cost of an inhaler to the NHS: £3-£38	 GP Emergency call out / home visit: £120
 Cost of a rescue pack to the NHS: £6	 Consultation with a specialist in hospital: £158
 Avg. cost per pulmonary rehab session: £60	 A+E attendance: £97
 Avg. cost of a GP consultation: £36	 Emergency hospital admission costs up to: £2,749
 Annual review with your nurse: £15	 Calling 999 costs up to: £279

What are your next steps?

- Check all the six key areas on your checklist. If you have any red or amber make contact with your GP or Practice Nurse and if you have any doubts about anything then get in touch with your local surgery.
- You can bring a friend or family member with you.
- If required, ask about social or emotional help that is available to you or people around you.


COPD Care Checklist:
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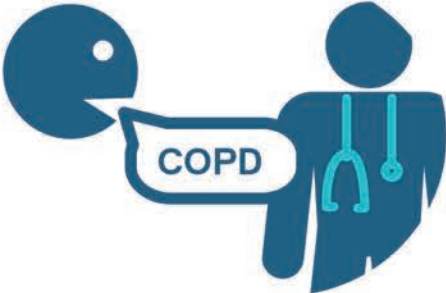
This is your personalised COPD checklist. It is part of a **scheme** being run by the NHS to help you to **better understand** your COPD and to know what support there is available in order to **better manage** your condition.

How to use your Checklist


This checklist helps make you better aware of **your condition** and highlights what areas might need attention. It uses a simple traffic light system to show how you are doing in your **six key COPD areas**. A red indicator is not an emergency, but **if you have a red or amber traffic light you should contact your GP or Practice Nurse**. Green lights indicate you are up to date in that area of care.



If you have any **red or amber**, you will need to take the actions described. Green indicates you're up to date in that area of care.



Discussing your care with your GP or Practice Nurse is very important. You should use this checklist to help raise any queries you may have about your condition.



You can contact your GP or one of the other services listed.

Innovation Unit Health Centre

Your local surgery can:

- Answer your questions about COPD care.
- Help you monitor your COPD and make sure you get the right medication and support when you need it.
- Put you in touch with other support services.
- Make living with COPD better for you and those who support you.



1. Annual COPD review

You have not had a review in the past twelve months, you should contact your local Surgery.

You should see your doctor or nurse at **least once a year** for a COPD review. During your review, you should be asked how well your medicines are helping with your symptoms and whether you have had any side effects.

This chart shows the date you should book your next annual review for.

Last Review (Over a year ago)



Contact your practice immediately for your next annual review.

1. Annual COPD review

Your Notes



2. Spirometry test

You have not had this test and should contact your surgery at the first opportunity.

Your **diagnosis of COPD should be confirmed by a post-bronchodilator spirometry**, also known as a 'blow-test'. This test checks how well your lungs work by measuring the amount of air you can blow out. This helps to decide upon the treatment your doctor should offer.

What is a spirometry test?

It is when you take an inhaler to open up your airways, before taking a deep breath and blowing as hard as you can into a sensor.



1. Take an inhaler



2. Blow into sensor



3. Measures lung capacity

2. Spirometry test



3. Stopping smoking

Your records show you are currently a smoker and are trying to quit.

Giving up smoking and sticking to it is **extremely important** if you have COPD. Your doctor should encourage and help you to do this.

If you are a smoker and you tried stopping but couldn't, your surgery should be the first point of contact for deciding which method of quitting would most help you. They can direct you to the appropriate service.

Talk to your surgery to find out what help you can receive

Phone your Local NHS REDquit on: 0208 926 5275

Ask your chemist about a nicotine alternative

NHS Smoking helpline 0800 022 4332

3. Stopping smoking



4. Inhaler technique

You do not require an inhaler at present.

The medicines you use depend on how severe your COPD is, how it is affecting your everyday life, and what side effects you may experience. You should only be given an inhaler once you've been shown how to use it and you are **confident that you can use it properly**. Your technique should be checked annually. If you need a refresher, please contact your surgery.

There are different types of inhalers. Please make sure your doctor/nurse has shown you the right way of using it.

You may consider:



Should you breathe out before use?



How hard should you be breathing in?



How long should you hold your breath?

4. Inhaler technique



5. Pulmonary rehabilitation

You have been referred to a course in your local area.

Certain patients could benefit from a pulmonary rehabilitation course. It is a programme of care designed for your individual needs. During the **twice weekly session, for 6-8 weeks**, you work with a healthcare professional in your local area to help you to make the most of your physical abilities and to become as independent as possible.

What is a pulmonary rehabilitation programme?

It helps to support you to live better with COPD. It includes breathing techniques, exercise, useful information, and advice on your diet.

Ask your GP if you are suitable for a pulmonary rehabilitation programme

If you are suitable your GP will refer you

5. Pulmonary rehabilitation



6. Support with self-management

You have not been given a self-management plan. Talk to your surgery about getting a plan and rescue pack.

Sometimes your symptoms may become particularly severe. These are called "exacerbations or flare-ups". You should **be given advice about how to spot these** early and prevent them from getting worse. You may be given a **rescue pack** to keep at home to help prevent exacerbations.

What's a rescue pack?

It contains antibiotics and steroid tablets so that you can start these as soon as possible when your COPD starts getting worse.



Bad breathing



Rescue pack



Talk with your GP

6. Self-management

