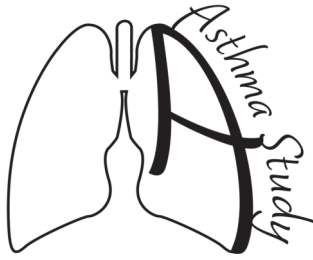


**Barbara P. Yawn MD MSc**  
**Principal Investigator**

Susan Bertram RN MSN  
Asthma Tools Study Coordinator



*Phone: xxx-xxx-xxxx*  
*NEW Fax: xxx-xxx-xxxx*

## Frequently Asked Questions

### ASTHMA TOOLS STUDY \_ A CASE REVIEW

**Mary Ann is a 15 year old high school freshman. She comes in today because she turned her ankle a week ago and it is still sore. Marching band begins on Monday and she wants to make sure it is OK to march on the ankle. Your evaluation confirms a mild ankle sprain without signs that suggest fracture or a severe sprain. You give her exercises and reassurance, but your reception has done her job noting that Mary Anne has asthma.**

**Mary Ann was diagnosed with asthma 6 months ago as mild persistent and she was prescribed low dose inhaled corticosteroids. During the summer she reports she did well and had no problems in her job as a life guard at the local pool.**

**Today her Asthma APGAR is high at 3 scoring 1 for each category of symptoms - day and night and some activity changes. You also notice she did not check anything about how often she uses the ICS. On direct questioning you ask, "Mary Ann, have you had some trouble using your Flovent (that is the orange inhaler)?" She says that friends told her steroids make you fat and she is not going to take it---she doesn't want to get fat---her BMI is 26.**

**After negotiation she agrees to try it for 4 weeks, calling you in 2 weeks to report her asthma symptoms and her weight. You agree that if she starts to gain weight from the ICS you will work with her to find alternatives. Knowing that many young girls decide to begin smoking to maintain their weight, you also do your brief talk about the dangers of smoking and asthma which is slightly stronger than how you talk about smoking in general.**

**Use the Asthma APGAR, get comfortable with all the opportunities it can provide. Make it work for you.**