

COPD Acute Management Bundle

Patient presents to ED/ AMU following G.P. / Self Referral

Patient assessed by ED/AMU Clinician and appropriate investigations ordered
 CXR ECG ABGs Blood Tests
 (FBC, U+E, LFTS, CRP (if available))

Action	Time completed or reason for Variation	Signed
Administration of humidified O2 (FiO2 2L via nasal cannula or 28% via mask) Maintain Sao2 of >88% < 92%	On presentation	
Check arterial blood gas and repeat if FiO2 increase is required or hypercapnia. If in respiratory failure with pH < 7.35 consider initiation of non- invasive ventilation/ transfer to appropriate unit.	Within 30 minutes of presentation	
Administer nebulised Beta 2 agonists and/or anticholinergics	Within 30 minutes of presentation	
Review laboratory results	Within 2 hours of presentation	
Review Chest x-ray	Within 2 hours of presentation	
Administer antibiotics po amoxicillin or clarithromycin or doxycycline If new infiltrate treat as pneumonia (<i>see pneumonia bundle</i>)	Within 4 hours of presentation	
Oral prednisone 40 mg (30 mg if 60kg or less)	Within 4 hours of presentation	
Consider COPD Outreach (complete inclusion/exclusion criteria)	Within 4 hours of presentation	
Refer to respiratory team/Nurse	Within 24 hours of admission	
Ted stockings or LMWH for prophylaxis (if admitted)	Within 8 hours of admission	

COPD Outreach Supported Early Discharge

Certain patients will continue to be assessed for suitability for early discharge within **72** hours of presenting to the ED/AMAU by the COPD outreach team. Patients who fulfil the criteria, have a diagnosis of COPD and give their **CONSENT** will be recruited for early supported discharge.

Please refer if patient fits inclusion criteria.