

UTMB RESPIRATORY CARE SERVICES PROCEDURE - Peak Flow Monitoring	Policy 7.3.14 Page 1 of 3
Peak Flow Monitoring Formulated: 05/93	Effective: 10/19/94 Revised: 04/04/18 Reviewed: 08/15/23

Peak Flow Monitoring

Purpose	To quantify the efficacy of bronchodilator therapy in patients with limited or restricted expiratory flow rates.
Scope	Accountability/Special Training - May be administered by a Licensed Respiratory Care Practitioner. - Training must be equivalent to the minimal Therapist entry level in Respiratory Care Services with age specific recognition of requirements of population treated.
Physician's Order	- A physician's order is required for peak flow meter measurements - Peak flow monitoring is an integral part of bronchodilator therapy when ordered by a physician
Indications	- Patients with limited or severely restricted expiratory flow. - Patients on Bronchodilator Therapy. - Patient is able to understand and physically able to attempt the test.
Goals	- To monitor progression of the patients condition. - Monitor drug efficacy. - Improve dosing accuracy of MDI/Bronchodilator therapy.
Contra-indications	- Patient does not have a level of comprehension that enables them to do the test. - Patient will not cooperate. - Patient has a facial condition or neurological condition that alters their ability to do the test. - Patient distress level is such that attempting would only deteriorate their condition.
Equipment	Peak flow meter
Procedure	

Step	Action
1	Check physician's orders.
2	Obtains peak flow device.
3	Wash hands thoroughly.
4	Verifies patient by two identifiers
5	Explain Peak Flow monitoring to patient.

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Procedure Continued

6	Make sure the indicator is at the bottom of the scale.
7	Instruct the patient to hold the peak flow meter vertically being careful not to block the opening.
8	Instruct patient to inhale as deeply as possible and then place mouth firmly around the mouthpiece making a tight seal.
9	Instruct patient to blow out as hard and fast as they can through the mouthpiece.
10	To repeat the test, move the indicator back to the bottom of the scale.
11	Instruct the patient to repeat this maneuver three times (if able to do so) prior to and 15-20 post bronchodilator therapy
12	Documentation of the best measurement of the three attempts pre and post with treatments should be recorded in EPIC. Document per RCS policy # 7.1.1.

Infection Control

Follow procedures as outlined Healthcare Epidemiology Policies and Procedures: #2.24 Respiratory Care Services.
<http://www.utmb.edu/policy/hcepidem/search/02-24.pdf>

Correspond- ing Policies

RCS Policy and Procedure Manual, Small Volume Aerosol Treatment (Hand-Held); 7.3.15.

RCS Policy and Procedure Manual, Metered Dose Inhaler Treatment; 7.3.16.

RCS Policy and Procedure, Guidelines For Medical Record Documentation; 7.1.1.

RCS Policy and Procedure, Therapist Treatment Cards; 7.1.2.

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References

- AARC Clinical Practice Guidelines, Assessing Response to Bronchodilator Therapy at Point of Care, Respiratory Care, 1995; 40(12): 1300-1307
- Casale R, Pasqualetti P. Cosinor analysis of circadian peak expiratory flow variability in normal subjects, passive smokers, heavy smokers, patients with chronic obstructive pulmonary disease and patients with interstitial lung disease. Respiration. 1997; 64:251-256.
- Tzelepis GE, Zakynthinos S, Vassilakopoulos T, et al. Inspiratory maneuver effects on peak expiratory flow. Role of lung elastic recoil and expiratory pressure. American Journal Respiratory Critical Care Medicine. 1997; 156:1399-1404.
- Uwyyed K, Springer C, Avital A, et al. Home recording of PEF in young asthmatics: does it contribute to management? European Respiratory Journal. 1996; 9:872-879.
- Jain P, Kavuru MS. A practical guide for peak expiratory flow monitoring in asthma patients. Cleveland Clinic Journal of Medicine. 1997; 64:195-202.
- Chan-Yeung M, Chang JH, Manfreda J, et al. Changes in peak flow, symptom score, and the use of medications during acute exacerbations of asthma. American Journal Respiratory Critical Care Medicine. 1996; 154:889-893.
- Persaud DI, Barnett SE, Weller SC, et al. An asthma self-management program for children, including instruction in peak flow monitoring by school nurses. Journal of Asthma. 1996; 33:37-43.
- Klein RB, Fritz GK, Yeung A, et al. Spirometric patterns in childhood asthma: peak flow compared with other indices. Pediatric Pulmonology. 1995; 20:372-379.