Introduction

What you know can make a big difference. That's why at MJHS we believe in giving you the tools you need to make informed decisions and live your healthiest life.

In the pages that follow, you will find an important resource for living with Chronic Obstructive Pulmonary Disease (COPD). Of course no booklet can replace the sound advice of a physician. Rather, this booklet is designed to help you better understand and manage your condition, as well as explain the treatment your care team has recommended for you. By educating yourself on COPD, you'll be able to play an active role in your treatment, ask better questions and make smart choices. Above all, you'll be able to slow damage to your lungs.

Keep this patient teaching aid handy for reference and always remember that we are here for you. In choosing MJHS, you have selected a partner that cares every minute, every day to keep you safe and comfortable in your own home.



Contents

WHAT IS CHRONIC OBSTRUCTIVE PULMONARY DISEASE (COPD)?	3
WHO GETS COPD?	3
HOW DO YOU KNOW YOU HAVE COPD?	4
WHAT ARE THE SYMPTOMS OF COPD?	4
WHAT IS THE TREATMENT FOR COPD?	5
MEDICATION OVERVIEW	6
TIPS FOR TAKING INHALED MEDICATION	7
BREATHING EXCERCISES	9
Pursed lips breathing	9
Diaphragmatic breathing	9
Strengthening exercises	10
SAVING YOUR ENERGY	10
Relaxing	10
Making life as easy as possible	11
OXYGEN THERAPY	12
Safety tips	13
HEALTHY DIET	13
PREVENTING COMPLICATIONS	13
COPING WITH COPD	14
RESOURCES	14
SYMPTOM LOG	15

Important Telephone Numbers

MJHS	1-855-385-8930
MJHS HOME CARE	1-855-370-8317
MY MJHS RN	
HEALTH PLAN	
PHYSICIAN	
EMERGENCY CONTACT	
PHARMACY	
IN CASE OF EMERGENCY CONTACT 911	

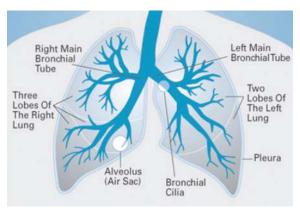
COPD

WHAT IS CHRONIC OBSTRUCTIVE PULMONARY DISEASE (COPD)?

COPD is a lung disease.

Airways or bronchial tubes carry air to the lungs. The airways get smaller and smaller (bronchioles) the further inside the lungs they go. At the end of the airway there are

many small air sacs, like tiny balloons. These are called alveoli.



In healthy people, each airway is clear and open. When you breathe in, each air sac fills up with air. Then when you breathe out, the air quickly leaves the sac.

When you have COPD, you have problems with your lungs. The lungs become damaged.

The openings of the airways are smaller than normal. Less air gets in because:

- The walls of the airways get thick and swollen.
- The airways are squeezed by small muscles around them.
- The airways make mucus that you cough up.

The tiny air sacs cannot empty and your lungs feel very full.



WHO GETS COPD?

You cannot get COPD from someone else. Most people with COPD have irritated their lungs over many years.

- Most people with COPD smoke or smoked in the past.
- Some people with COPD lived in the same home with a smoker.
- Some people with COPD are exposed to fumes from cooking stoves or heaters, fireplace smoke or dust.

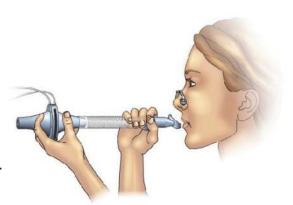
HOW DO YOU KNOW YOU HAVE COPD?

The doctor or nurse will examine you. You may have to do a simple breathing test called spirometry to be certain. The test is easy and painless. You will be asked to breathe hard into a tube connected to a machine.

If your COPD is not too bad, it is called mild COPD.

If your COPD is getting bad, it is called moderate COPD.

If it is very bad, it is called severe COPD.



WHAT ARE THE SYMPTOMS OF COPD?

Mild COPD	You may cough a lot. Sometimes you cough up mucus.You feel a little out of breath if you work hard or walk fast.
Moderate COPD	 You may cough more and you cough up mucus. You often feel out of breath if you work hard or walk fast. You may have trouble doing hard work or chores. You may take several weeks to recover from a cold or chest infection.
Severe COPD	 You may cough even more and cough up a lot of mucus. You have trouble breathing both day and night. You may take several weeks to recover from a cold or chest infection. You can no longer go to work or do chores around home. You cannot walk up stairs or across the room very well. You get tired easily.

WHAT IS THE TREATMENT FOR COPD?

Though COPD is not curable, there is a lot you can do to improve your symptoms and slow the damage to your lungs. When you learn how to manage your COPD you will be able to breathe more easily, cough less, get stronger, and be in a better mood.

Step One

- If you smoke, stopping is the most important thing you can do to help your lungs.
- Believe in yourself! You can do it. Think about quitting just 1 day at a time.
- Ask your doctor or nurse for help. Ask about pills, special patches or gum to help.
- Set up a date to quit. Tell family and friends that you are going to quit. They may be able to help. Ask people to smoke away from you or outside.
- Keep busy. Try holding a pen instead of a cigarette. Chew gum or snack on fruits or vegetables. Drink water.
- If you start to smoke again, DO NOT GIVE UP. Just forgive yourself and try again.

Step Two

- Take each and every dose of medication exactly the way your doctor told you to.
 Go to the doctor regularly and keep every appointment. If you start to feel worse, go to the doctor right away. Be sure to get a flu shot every year and ask your doctor if a pneumonia vaccine is right for you.
- Medications can help relieve the symptoms of COPD and help you live a normal life.

Step Three

- Keep the air clean at home. Stay away from things like smoke that make it hard to breathe.
- If you must have your home painted or sprayed for insects, stay somewhere else.

Step Four

- Keep your body strong. Walk, exercise regularly and eat healthy foods.
- Get the most out of each breath. Make your life as easy as possible at home.

MEDICATION OVERVIEW

Bronchodilators open up the airways.

	BETA 2 AGONISTS								
	Brand Name	Generic							
Long-acting	SEREVENT MDI	SALMETEROL							
	SEREVENT DISKU								
	FORADIL AEROLIZER	FORMOTEROL							
Short-acting	VENTOLIN MDI	ALBUTEROL							
	PROVENTIL MDI								
Combinations	ADVAIR DISKUS	SALMETEROL & FLUTICASONE							
	COMBIVENT MDI	ALBUTEROL & IPRATROPIUM							
	ANTICHOLINERGICS								
	Brand Name	Generic							
Cingle egent	ATROVENT MDI	IPRATROPIUM							
Single agent	SPIRIVA	TIOTROPIUM							
Combination	COMBIVENT	ALBUTEROL & IPRATROPIUM							
	METHYLXANTHINES								
	Brand Name	Generic							
	THEO-DUR	THEOPHYLLINE							

Corticosteroids decrease inflammation.

	Brand Name	Generic		
	FLOVENT	FLUTICASONE		
Inhaled	AZMACORT	TRIAMCINOLONE		
	AEROBID	FLUNISOLIDE		
Combinations	PULMICORT TURBOHALER	BUDESONIDE		
	VANCERIL	BECLOMETHASONE		

Mucolytics/Expectorants thin the mucus so it can be coughed up.

	Brand Name	Generic
Mucolytic	MUCOMYST	N-ACETYL-CYSTEINE
Expectorant	(MANY COMPOUNDS)	GUAIFENESIN

TIPS FOR TAKING INHALED MEDICATIONS

Metered Dose Inhaler (MDI)

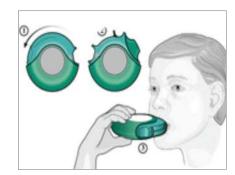




- Sit up straight.
- Put the medication canister in the inhaler and remove the inhaler mouthpiece cover.
- Shake the inhaler well.
- Hold it with the canister upright 1 to 2 inches from your open mouth.
- Place your thumb under the mouthpiece and one or two fingers on top of the canister.
- Take a deep breath and breathe out slowly.
- Tilt your head back a little bit.
- Prepare to inhale slowly and deeply through your mouth.
- As soon as you start breathing in, press down on the canister to release the medication.
- You can also place your lips firmly around the mouthpiece to inhale (unless the medication is a steroid, which calls for the open-mouth technique).
- Continue breathing in as the medication is released.
- Breathe in slowly and deeply for 3 to 5 seconds.
- Hold your breath for 8 to 10 seconds then breathe out with pursed lips.
- Repeat again as directed.
- Allow 1 minute between puffs.
- Replace the cap on the mouthpiece when you are finished.
 If your medication is a corticosteroid, then rinse your mouth with water afterward.
- Remove the medication canister and clean the inhaler in warm water.

Dry Powder Inhaler (DPI)





- Assemble and load the device.
- Breathe out slowly as far as you can.
- Close your lips around the mouthpiece.
- Breathe in as fast and as deeply as you can.
- Repeat these steps until you have taken the dose ordered.
- Close your medication container.

Nebulizer

- Place liquid medication contents into the nebulizer cup.
- Connect the mouthpiece, or mask, to the T-shaped elbow.
- Attach the unit to the cup tightly.
- Connect the nebulizer tubing to the port on the machine.
- Turn the machine on and check the nebulizer for any vapor.
- Hold it in an upright position to prevent spillage.
- Sit in a comfortable, upright position.
- Place the mouthpiece between your teeth and close your lips around it.
- When using a mask, be sure it fits well so the vapor doesn't get into your eyes.
- Gently breathe in and breathe out slowly through your mouth.
- Take three to five seconds for each breath.
- Hold your breath for up to 10 seconds before breathing out. This allows the medication time to settle in the airway.
- Check to see that no more liquid medication is left.
- Continue until the cup is empty.



BREATHING EXERCISES

Pursed Lips Breathing

Breathing exercises can help you when you are having trouble getting enough air. Purse your lips by pretending that you are going to kiss someone: in other words, pucker up.

- Start by taking a normal breath, counting the seconds it takes you as you breathe in through your nose.
- Breathe out, through pursed lips, for twice the number of seconds as you breathed in.
- Try to make a slight whistling noise as you breathe out. For example, if you breathe in for three seconds, breathe out for six seconds.
- Don't force the air out. Just breathe out in a relaxed way, through your lips.

Diaphragmatic Breathing

- Lie down with your knees bent. You can also do the exercise while sitting or standing up with your head and back supported.
- Place your hand on your abdomen, just above your waist.
- Try to relax before getting started.
- Inhale deeply through your nose while gently pushing out your abdomen. You should be able to feel the hand on your abdomen moving outward. With your abdomen extended outward, your diaphragm can now drop down making more room for air in your lungs.
- Exhale slowly using pursed lips while gently pushing inward and upward with your hand to help empty your lungs completely.
- Repeat. Practice the technique in a sitting and standing position until you are comfortable doing it anywhere.

Tips

- Try replacing your hand with a small book for visual reinforcement during the breathing exercises.
- Remember to inhale and exhale slowly.
- Remember to let your diaphragm do the work. Keep your neck, shoulders and rib muscles still.

Strengthening Exercises

You should walk and exercise regularly. When you strengthen the muscles in your arms, legs and body you can get around better. When you start, take it slowly. When you feel short of breath, you should stop and rest. Use the pursed lip breathing technique. Find exercises that you like to do. Ask someone in your family or a friend to join you.

SAVING YOUR ENERGY

Relaxing

Because tense muscles use oxygen faster than relaxed muscles, it is important to try and stay relaxed.

- Rotate your shoulders in a circle a few times, or shrug them up and down.
- Practice relaxing your shoulders and arms throughout the day.
- Try to be aware of times when you are tense so that you can relax before you become short of breath.
- Sit in a chair with your feet spread about shoulder width apart.
- Lean forward and place your elbows on your knees.

If you are experiencing an especially bad bout of breathlessness, sit down in a chair next to a small table. You may want to keep a few pillows by the table for times when you do become short of breath.

- Place a few pillows on the table.
- Fold your arms, place them on the pillows and relax onto the pillows.
- Concentrate on relaxing your shoulders and arms.
- Stay in this position until you feel your breathing slow down.

Try various visualization techniques to relax:

- Find a comfortable position and take a few controlled breaths.
- Begin to imagine a setting that relaxes and calms you. The setting can be anywhere or anything from watching the waves at the beach to relaxing in your bed at home.
- Stay focused on the setting, breathe and relax your body.
- Feel the tension leave your body.

There are many books and tapes about visualization for sale. You may want to check your local library for one that will work for you.

Make Life as Easy as Possible

Some ideas:

- Ask friends and family for help and ideas.
- Do things slowly and sitting down if at all possible.
- Put things in easy reach and in one place.
- Wear loose fitting clothes which are easy to put on.
- Find simple ways to cook, clean, or do other chores. Use a cart on wheels to move things around.
- Plan ahead so you do not have to rush.
- Go out during the part of the day when you feel your best, usually right after you take your medications.
- Rest frequently, especially after you eat.



OXYGEN THERAPY







Oxygen concentrator

When your breathing becomes very difficult, the doctor might decide to put you on oxygen.

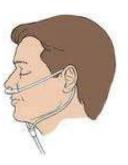
You will need to use oxygen when the oxygen in your blood gets very low. It will help you:

- Provide your blood with more oxygen
- Make physical activities easier
- Improve your sleep
- Improve your mental function
- Live longer
- Decrease shortness of breath and tiredness

Oxygen usually comes in a metal container like a cylinder. Oxygen flows through a tube and is delivered to your lungs in one of the following ways:

Nasal cannula: is

 a small tube that
 divides into two
 smaller parts and you
 put it in your nostrils
 to get the oxygen.



 Face mask: you place over your nose and mouth



Oxygen therapy is often very safe, but the oxygen can cause a fire. It is very important to use your oxygen safely. Follow the instructions you receive from your oxygen vendor, nurse and this booklet. It is very important to use the oxygen as directed by your doctor. **Never change the amount of oxygen you are receiving.**

Safety Tips

- Do not smoke if you are on oxygen.
- Do not let others smoke around you.
- Post a "No smoking" sign on your door, to remind everyone entering your home that you are on oxygen.
- Do not use open flames like candles or matches if your oxygen is on.
- Make sure you have a smoke alarm. Test the alarm very often to make sure it is working.
- Have a fire escape plan. Practice the plan often.
- Have a phone always close to you. You will need to use it to call 911 if there is an emergency.
- Have a fire extinguisher in your home.
- Have the backup tank stored lying down and not in an upright position unless it is in a special holder. Store in a cool, well-ventilated, easy to reach area.
- Notify police, fire department and electric company if you are using oxygen.

HEALTHY DIET

It is important to eat healthy foods and to get to a healthy weight. Eat lots of fruits and vegetables. Eat protein-rich foods like meat, fish, eggs, milk and soy.

When you eat:

- If you are short of breath, slow down.
- Talk less when you eat.
- If you feel full easily, eat smaller meals more often.
- If you are heavy, lose weight. It is harder to breathe and to get around if you are heavy.
- If you are too thin, take extra foods or drinks to help you gain weight and stay healthy.

PREVENTING COMPLICATIONS

Get ongoing medical care. Visit your doctor regularly. Take all of your medicines as your doctor prescribes. It is very important to get a flu shot every year. Ask your doctor when you should get your flu shot and pneumonia vaccine.



COPING WITH COPD

Your diagnosis of COPD and your symptoms may cause you and your loved ones to feel sad or anxious. This is normal. Over time, as you begin to take charge of your health and make positive changes, you should start to notice these feelings lifting.

If you continue to feel sad, anxious or unable to sleep or enjoy any part of your life, you should speak with your doctor. You may benefit from counseling.

Some tips that may help you:

- Talking to family, friends or clergy
- Getting up and getting dressed daily
- Having your hair done
- Engaging in hobbies
- Following your treatment plan and exercising within your limits
- Finding a support group

Your illness affects not only you but the entire family.

RESOURCES

National Heart, Lung, and Blood Institute (NHLBI) www.goldcopd.com

Quit Smoking

www.smokefree.gov

REFERENCES

National Heart, Lung, and Blood Institute (NHLBI). National Institutes of Health. (Updated 2011). *Global strategy for the diagnosis, management, and prevention of chronic obstructive pulmonary disease.* Retrieved July 2, 2012 from http://www.goldcopd.com.

MJHS, COPD Standard of Care.

Tear along this line.

SCALE:	0	1	2	3	4	5	6	7	8	9	10	
	VERY MILD			MILD		MODER	ATE		VERY SEVERE		VERY, VERY SEVERE	

	MON.	TUES.	WED.	THU.	FRI.	SAT.	SUN.	
	DATE:							
SCALE	0-10	0-10	0-10	0-10	0-10	0-10	0-10	
COUGH								
PHLEGM (MUCUS)								
CHEST TIGHTNESS								
BREATHLESSNESS								
MY ACTIVITIES ARE LIMITED								
ENERGY								
SLEEPLESSNESS								
FEELING SAD								
CIRCLE ONE								
I TOOK ALL OF MY	YES							
MEDICATION DOSES	NO							

Comments:			

SCALE:	0	1	2	3	4	5	6	7	8	9	10
	VERY MIL	D		MILD		MODER	ATE		VERY SEVERE		VERY, VERY SEVERE

	MON.	TUES.	WED.	THU.	FRI.	SAT.	SUN.
	DATE:	DATE:	DATE:	DATE:	DATE:	DATE:	DATE:
SCALE	0-10	0-10	0-10	0-10	0-10	0-10	0-10
COUGH							
PHLEGM (MUCUS)							
CHEST TIGHTNESS							
BREATHLESSNESS							
MY ACTIVITIES ARE LIMITED							
ENERGY							
SLEEPLESSNESS							
FEELING SAD							
		CIRC	LE ONE				
I TOOK ALL OF MY	YES	YES	YES	YES	YES	YES	YES
MEDICATION DOSES	NO	NO	NO	NO	NO	NO	NO

Comments.		

Tear along this line.

SCALE:	0	1	2	3	4	5	6	7	8	9	10
	VERY MILD			MILD		MODER/	ATE		VERY SEVERE		VERY, VERY SEVERE

	MON.	TUES.	WED.	THU.	FRI.	SAT.	SUN.
	DATE:	DATE:	DATE:	DATE:	DATE:	DATE:	DATE:
	0.40	0.10	0.40	2.12	2.10	2.12	2.42
SCALE	0-10	0-10	0-10	0-10	0-10	0-10	0-10
COUGH							
PHLEGM (MUCUS)							
CHEST TIGHTNESS							
BREATHLESSNESS							
MY ACTIVITIES ARE LIMITED							
ENERGY							
SLEEPLESSNESS							
FEELING SAD							
		CIRC	LE ONE				
I TOOK ALL OF MY	YES	YES	YES	YES	YES	YES	YES
MEDICATION DOSES	NO	NO	NO	NO	NO	NO	NO

Comments:			

SCALE:	0	1	2	3	4	5	6	7	8	9	10	
	VERY MILD			MILD		MODER	ATE		VERY SEVERE		VERY, VERY SEVERE	

	MON.	TUES.	WED.	THU.	FRI.	SAT.	SUN.
	DATE:						
SCALE	0-10	0-10	0-10	0-10	0-10	0-10	0-10
COUGH							
PHLEGM (MUCUS)							
CHEST TIGHTNESS							
BREATHLESSNESS							
MY ACTIVITIES ARE LIMITED							
ENERGY							
SLEEPLESSNESS							
FEELING SAD							
		CIRC	LE ONE				
I TOOK ALL OF MY MEDICATION DOSES	YES NO						

Comments:		