SAFETYNET LEARNING TOOLS

Topic: Respiratory Illness

Use the materials in this document to help others learn more about respiratory illness.

LEARNING TOOLS:
1. Understanding Respiratory Illness–PowerPoint
2. Recognizing, Treating, and Preventing Respiratory Illness–SafetyNet Article
3. Recognizing, Treating, and Preventing Pneumonia–PowerPoint
4. Signs and Symptoms of Respiratory Illness–Fact Sheet
5. Preventing Aspiration and Pneumonia–SafetyNet Article

GENERAL INFORMATION
SafetyNet Learning Tools are designed to assist in providing information on a specific topic and to be used in a variety of learning environments. These Learning Tools can be used during one on one conversations with an individual or with small and larger groups.

Before beginning a learning session, the presenter should review all SafetyNet Learning Tools on the topic. The trainer can find additional material within the links provided on SafetyNet Article and Newsletter.

BEFORE THE TRAINING

The presenter should

- Arrange of adequate time and comfortable space for the training and discussion.
- Arrange for any equipment needed, such as a laptop and projector.
- Set up necessary equipment.
- Print or photocopy enough materials for each individual to have their own copy.

TRAINING

The presenter

- Shows slide show
- Leads discussion of content and encourages open communication.
- Reviews and discusses information on each of the handouts.
- Asks questions to check for understanding.
- Follows up with additional review and discussion as needed.
- It is recommended that training be provided in multiple sessions to assure adequate coverage and understanding of the topic.
Understanding Respiratory Illnesses
Respiratory illnesses and the people you support

- Is a major cause of unplanned hospitalizations.
- Usually occur in fall and winter.
- It is important for you to
  - Help people stay healthy
  - Get treatment when they show signs or symptoms of illness.
- It is important for you to stay healthy as well.
Respiratory illnesses are very common

Some of the most common respiratory illnesses are

- Cold
- Flu
- Bronchitis
- Pneumonia
- Aspiration Pneumonia
People with developmental disabilities are at a greater risk

- When they are around people who are sick
- When they live in a home with other people who have a respiratory illness
- When they have a health condition like asthma, diabetes, and lung disease
- When they smoke
- If they are older adults
Colds

- Many people get a cold every year and some people get several colds each year.
- People who have colds
  - Feel tired
  - Sneeze a lot
  - Have a runny nose
  - Have a sore throat
  - Have watery eyes
The Flu

- People with the flu
  - Have a fever
  - Have body aches
  - Have a headache
  - Have a cough
  - Have a sore throat
  - Are tired
Supporting someone to feel better

- With a cold or the flu, it is important to encourage
  - Extra rest and sleep
  - Lots of liquids like water, juice, tea, or soup

If the individual does not get better after a few days, call the doctor for advice.

Get a flu shot every year!
Bronchitis

- Bronchitis affects the bronchial tubes.
- Bronchial tubes carry air to the lungs.
- Bronchitis causes the bronchial tubes to become inflamed.
Symptoms of Bronchitis

- A dry cough.
- A mild fever.
- Feeling short of breath.
- A general feeling of tiredness.
- A pain in the chest when breathing deeply.
- Individuals with bronchitis may feel sick for two or three weeks.
Feeling better with bronchitis

Encourage the individual to

- Drink plenty of water and juice
- Get extra sleep and rest
- Use a humidifier, shower, or sink filled with hot water to help breathing
- Use cough drops or sore throat lozenges if they are approved by the doctor
- If the individual smokes, encourage them to STOP.
Pneumonia

- Is a lung infection.
- Most people who get pneumonia get better within a few weeks.
- Older adults and people with chronic illnesses can become very sick.
Symptoms of pneumonia

- A cough that brings up mucus and/or blood
- Shaking or chills
- A fever
- Fast breathing or feeling short of breath
- Chest pain that feels worse when coughing or breathing
- Feeling very tired and weak

*If you see symptoms of pneumonia, call the doctor right away!*
Feeling better with pneumonia

With pneumonia, it is important to encourage the individual to

- Get extra rest and sleep
- Drink lots of liquids like water, juice, tea, or soup
- Finish the doctor’s prescribed medication
How to lower the chances of developing a respiratory illness

- Get a flu shot each year
- Wash hands frequently with soap and warm water
- Stop smoking
- Get plenty of sleep
- Stay healthy
  - Eat a healthy diet
  - Exercise regularly
When you are sick, there are ways to prevent others from getting sick

- Wash your hands frequently
- When sneezing or coughing
  - turn away from others
  - Cover your mouth with a tissue or turn into your elbow
- Try not to spend time around people likely to get sick, like small children and older adults
- Ask your doctor about getting a pneumonia vaccination
If you have questions about respiratory illnesses, talk to the doctor!

You can help the people you support stay safe and healthy by

- Learning the signs and symptoms of respiratory illnesses
- Learning how to take care of someone who is sick
- Learning ways to prevent getting sick
Aspiration and Aspiration Pneumonia

- Aspiration pneumonia is not caused by germs.
- Aspiration is the breathing in of food, fluid, saliva, medication, or other foreign material into the trachea and lungs.
- Frequent aspiration can lead to aspiration pneumonia or other lung injuries.
Symptoms of aspiration pneumonia

- Frequent coughing and may expel foul-smelling mucus or phlegm from the lungs.
- Chronic drooling, wheezing, or running nose.
- Fatigue.
- Shortness of breath. Breathing is usually noisy.
- Fever or chills accompanied with sweat.
- Swallowing trouble, may feel as if something is stuck in their throat.

*If you see symptoms of aspiration pneumonia, call the doctor right away!*
Who is at risk for aspiration pneumonia

- People who have trouble swallowing or coughing
- People who have health problems that affect the muscles or nerves
- People who have had problems with their esophagus or “Food Pipe”
- People who are less alert due to use of medication or use of alcohol

For more information

ddssafety.net – search for “aspiration” or Medline Plus – search for Aspiration Pneumonia.
Recognizing Respiratory Illness

Respiratory illness is a major cause of unplanned hospitalizations for individuals with developmental disabilities. While people can get a respiratory illness any time, they are more likely to get one in the fall or winter months. As a supporter, it is important for you to

- Help the people you support stay healthy and avoid respiratory illness
- Get treatment if they show signs or symptoms of illness

It is important for you to stay healthy as well.

Signs and Symptoms of Respiratory Illness

Most respiratory illnesses come and go within a few days. However, some can cause more serious health problems. The following are the most common respiratory illnesses.

Colds: Colds come on gradually and usually last no longer than a week or two. Symptoms may include a stuffy or runny nose, sneezing and coughing, a scratchy throat, and watery eyes.

Flu (Influenza): Flu symptoms come on suddenly. The flu is more serious and lasts longer than a cold. Flu symptoms may include a fever, a headache, chills, a dry...
cough, body aches, and fatigue. The flu, like a cold, can also cause a stuffy or runny nose, sneezing, and watery eyes. A yearly flu shot (vaccination) helps prevent many complications from the flu and colds that could be worse for people with asthma, diabetes, and heart disease, and for anyone 50 and older.

**Pneumonia:** Pneumonia is an inflammation of the lungs usually caused by an infection. The most common symptoms of pneumonia are a cough (often with mucus), a fever, chills, and shortness of breath. Other symptoms may include confusion, excessive sweating, clammy skin, a headache, loss of appetite, and fatigue. A more serious symptom is a sharp or stabbing chest pain that gets worse when you breathe deeply or cough. Individuals should get medical attention if they have any of these symptoms.

**Aspiration Pneumonia:** Aspiration Pneumonia is a form of pneumonia that is caused when food or liquids are breathed into the lungs, and can involve choking. Individuals who have problems with swallowing are at the greatest risk for aspiration pneumonia. Frequent aspiration is dangerous and may lead to aspiration pneumonia or other lung injuries if it is not treated. For more information on aspiration and aspiration pneumonia, go to the ddssafety.net and search for aspiration or go to Medline Plus on your browser and search for aspiration pneumonia.

**Bronchitis:** Bronchitis is an inflammation in the lining of your bronchial tubes. These tubes carry air to and from your lungs. The major symptom for bronchitis is a dry hacking cough. Other symptoms may include a tightness, burning, or dull pain in the chest, a sore throat, a stuffy nose, and body aches. Bronchitis usually improves within a few days, although the individual may continue to cough for weeks.

**Treating Respiratory Illness**

If the individual shows signs or symptoms of respiratory illness

- Call their doctor. Describe their symptoms. Follow the doctor’s orders.
- Encourage the individual to stay home and rest.
- Encourage the individual to drink plenty of liquids.
- Encourage the individual to cough or sneeze into a tissue or their elbow.
- Encourage frequent hand washing especially after coughing or sneezing.
- Call the doctor again if the individual is not feeling better or if you notice
  - Any worsening of symptoms.
  - A buildup of mucus.
  - A fever that does not go down.
  - Increased shortness of breath.
  - A cough that causes sleep problems or continues for more than a few days.

As a supporter, you need to follow these same treatment guidelines in order to protect yourself and those who are in your care.
Recognizing, Treating, and Preventing Respiratory Illness

Preventing Respiratory Illness

Additional Important Prevention Tips:

Wash Hands Often
In addition to a flu shot, a good way to prevent getting a respiratory illness is **frequent hand washing using soap and water**. Hands should be wet with water and plain soap and rubbed together for at least 20 seconds. Then hands should be rinsed and dried with a clean towel. Use a hand sanitizer if soap and water are not available.

Cover a Cough or a Sneeze

People's coughs or sneezes should be covered with a tissue or, if a tissue is not available, into their sleeve or elbow but not into their hands. They should remember to throw away the tissue and wash their hands after coughing or sneezing.

Get a Flu Shot!

The Center for Disease Control (CDC) recommends for the 2012-2013 flu season everyone who is at least 6 months of age get a flu shot. This is true both for supporters and the individuals they support.

It’s especially important for people who are at high risk to get a flu shot, including:

- Individuals who are at high risk of getting pneumonia:
  - People who have medical conditions like asthma, diabetes, and lung disease.
  - Pregnant women.
  - People 50 years and older.
- People who live with or care for others who are at high risk.


For more information on “Prevention Tips” go to [ddssafety.net](http://ddssafety.net) and search for Prevention of Colds and Flu.
Recognizing, Treating, and Preventing Pneumonia
Pneumonia can be serious

- Most healthy people who get pneumonia feel better within a few weeks.
- For people with health problems and for older people, pneumonia can be serious.
Pneumonia is a lung infection

The lungs are a very important part of the body.

- The lungs help people breathe.
- A person needs to breathe enough air to keep their body working right.
- When someone has pneumonia, it is hard for them to breathe.
Pneumonia is a common illness anyone can develop

Individuals are at a greater risk if

- They are an older adult
- They have another respiratory illness (like the flu or bronchitis)
- They smoke cigarettes, cigars, or pipes
- They live in an area with polluted or smoky air
Pneumonia is a common illness anyone can develop

- When a person is healthy, pneumonia can clear up in two to three weeks
- For older adults and people with other health concerns, it may take longer.
- It may take six to eight weeks, or longer.
- If pneumonia is not treated, it can cause death.
Pneumonia can spread from person to person

People can catch pneumonia from another person

- Who is sneezing or coughing without covering their nose or mouth
- By touching something that someone has sneezed on and then touching their mouth
- By sharing food or drinks
People with developmental disabilities

Are more likely to get pneumonia if they

- Live where there is contact with others who are sick with a cold or flu
- Visit the hospital or a doctor’s office more often
- Are older adults
- Have other medical conditions like asthma, diabetes and lung disease
Learning the symptoms of pneumonia

• By learning about the symptoms of pneumonia, you may be able to spot the illness early.

• If you think someone you support has pneumonia, you should call the doctor right away!
Common symptoms of pneumonia

- A cough that produces green or bloody mucus
- A fever
- Feeling short of breath
- Chest pain
- A fast heartbeat
- Shaking or getting chills
- Feeling very tired and weak
- Decreased eating and drinking
Symptoms can be harder to see if the person is over 65 years old

Older adults who get pneumonia often have fewer or milder symptoms, such as

- A normal temperature
- A dry cough with no mucus

They may have different symptoms, such as

- Confusion or change in mental status
- Rapid heart rate or rapid respiratory rate
If you think someone has pneumonia, call the doctor!

Call 9-1-1 if the individual has serious symptoms, such as

- Feeling tightness in the chest
- Difficulty breathing
- Coughing up blood
- Feeling faint when sitting or standing up
The doctor can tell if someone has pneumonia

- The doctor will ask questions about how the person is feeling.
  - Take the *Signs and Symptoms* tool with you to help answer the questions.

- The doctor may listen to the person’s breathing, or

- Take an x-ray of the chest to see if the person has pneumonia.
A stay in the hospital

- If pneumonia is serious, the individual may have to stay in the hospital.
- At the hospital, the individual can be closely watched by the doctor.
- The doctor may prescribe medicines that are given through a needle in the arm.
Ways to feel better

- Have the individual drink plenty of fluids, like water and juice.
- Make sure the individual gets extra rest and sleep.
- Offer a heating pad or warm compress when the chest hurts.
- When the doctor gives the individual medicine, follow the directions on the container and assist the individual until it is gone.
Ways to prevent pneumonia

- Make sure you and the individual wash your hands often with soap and warm water.

- It is important to wash your hands after spending time with people who are feeling sick and throw away used tissues.

- Encourage the individual to have a healthy diet with plenty of fruits and vegetables.

- Encourage the individual to get plenty of rest.

- Encourage the individual to exercise regularly.
More ways to prevent pneumonia

- Encourage the person to stay away from people who have a cold or flu.
- If the person smokes, encourage them to STOP.
- Ask the doctor if the person you support should get a pneumonia vaccine.
- Supporters should get a pneumonia vaccine, too.
Signs and Symptoms of Respiratory Illness

<table>
<thead>
<tr>
<th>Respiratory Illness</th>
<th>Signs and Symptoms</th>
</tr>
</thead>
<tbody>
<tr>
<td>Colds:</td>
<td>Symptoms may include a stuffy or runny nose, sneezing and coughing, a scratchy throat, and watery eyes.</td>
</tr>
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<td>Flu (Influenza):</td>
<td>Flu symptoms may include a fever, a headache, chills, a dry cough, body aches, and fatigue. The flu, like a cold, can also cause a stuffy or runny nose, sneezing, and watery eyes.</td>
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<td>Pneumonia:</td>
<td>The most common symptoms of pneumonia are a cough (often with mucus), a fever, chills, and shortness of breath. Other symptoms may include confusion, excessive sweating, clammy skin, a headache, loss of appetite, and fatigue.</td>
</tr>
<tr>
<td>Aspiration &amp; Aspiration Pneumonia:</td>
<td>Symptoms include frequent coughing and may expel foul-smelling mucus or phlegm from the lungs, chronic drooling, wheezing, or running nose, fatigue shortness of breath, noisy, gurgly breathing, fever or chills, accompanied with sweat, swallowing trouble, may feel as if something is stuck in their throat.</td>
</tr>
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<td>Bronchitis:</td>
<td>The major symptom for bronchitis is a dry hacking cough. Other symptoms may include a tightness, burning, or dull pain in the chest, a sore throat, a stuffy nose, and body aches.</td>
</tr>
</tbody>
</table>

If an individual you support shows signs or symptoms of any of the respiratory illnesses above

- Call their doctor. Describe their symptoms. Follow the doctor’s orders.
- Encourage the individual to stay home and rest.
- Encourage the individual to drink plenty of liquids.
- Encourage the individual to cough or sneeze into a tissue or their elbow.
- Encourage frequent hand washing especially after coughing or sneezing.
- Call the doctor again if the individual is not feeling better or if you notice
  - Any worsening of the symptoms
  - A buildup of mucus
  - A fever that does not go down
  - Increased shortness of breath
  - A cough that causes sleep problems or continues for more than a few days
What is Aspiration and Aspiration Pneumonia?

Aspiration occurs when food or fluids that should go into the stomach goes into the lungs instead. Any material can be aspirated on the way to the stomach. Material can also be aspirated as stomach contents are refluxed back into the throat. When foreign material goes into the lungs it can cause aspiration pneumonia. This form of pneumonia starts due to the irritation from aspirated food or fluid, but can progress to an infection if the aspirated material gets stuck in the bronchial tubes or the air sacs of the lungs. This occurs more frequently in individuals who have trouble controlling their swallowing. Usually the person will cough in order to clear the food or fluid out of the lungs. However, sometimes the person does not cough. This is known as a “silent aspiration.” Frequent aspiration is dangerous and leads to aspiration pneumonia if it is not treated or corrected.

There are several ways to tell if someone has aspiration problems. The individual's doctor can order tests. Common signs of aspiration include:

- Coughing before or after swallowing.
- Excessive drooling, especially during meals.
- Leakage of food or saliva from mouth or tracheostomy.
- Pocketing food inside the cheek.
- Choking on certain foods, for example, white bread.
- Nose running or sneezing during dining.
- Trouble chewing.
- Trouble swallowing certain types of fluids and foods.
- Taking a very long time to finish a meal.
- Refusing to eat certain foods or finish a meal.
- A complaint of feeling like something is caught in the throat.
- A wet gurgly voice during or after eating or drinking.
- Frequent throat clearing after a meal.
- Repeated episodes of choking, frequent colds, pneumonia, chest congestion or “allergies.”
- Unexplained weight loss.
- Unexplained fevers and/or sweats.
- Chills.
Coughing when lying flat or sitting up quickly from a reclined position.

The following information will help identify risk factors and interventions for aspiration for the individuals you support.

Risk Factors for Aspiration

Who is at risk for aspiration?

Individuals who:

- Have trouble swallowing or coughing.
- Have health problems that affect the muscles or nerves, such as:
  - Cerebral Palsy.
  - Stroke.
  - Head Injury.
  - Seizures.
  - Muscular Dystrophy.
  - Multiple Sclerosis.
  - Parkinson Disease.
- Have had problems with their esophagus, or “Food Pipe.”
- Are less alert due to use of medication or use of alcohol.

What other factors place individuals at risk for aspiration?

- Being fed by others.
- Inexperienced caregivers assisting with eating food or drinking fluids.
- Weak or absent coughing or gagging reflexes, commonly seen in persons who have cerebral palsy or muscular dystrophy.
- Poor chewing or swallowing skills.
- Gastroesophageal reflux disease (GERD, GER), which can cause aspiration of stomach contents.
- Food stuffing. This includes eating or drinking rapidly and holding food in the mouth.
- Taking medication with side effects that cause drowsiness.
- Taking medication that cause:
  - the muscles to relax.
  - delayed swallowing.
  - the suppression of gag and cough reflexes.
- Impaired mobility that may prevent an individual from sitting upright while eating.
- Epileptic seizures that may occur while eating.
- Failure to position a person on their side during and after a seizure. This can allow oral secretions to enter the airway.
What health risks should you look for in the individuals you support?

- A diagnosis of risk for aspiration or past episodes of aspiration.
- A diagnosis such as cerebral palsy, muscular dystrophy, epilepsy, GERD, dysphagia or hiatal hernia.
- A history of aspiration pneumonia.
- Needing to be fed by others.
- A history of choking, coughing, or gagging when eating.
- Needing modified food texture and fluid consistency.
- Previous evaluations of eating and swallowing skills.
- Laboratory tests (barium swallow, pH study, etc.) that indicate dysphagia.
- A history of unexplained weight loss or chronic dehydration.
- Taking medications that may decrease voluntary muscle coordination or cause drowsiness.
- A history of unsafe eating and drinking practices, such as eating or drinking rapidly and food stuffing.
- A history of chronic chest congestion, frequent pneumonia, moist respirations, chronic runny nose, or persistent cough.
- Chronic use of cough/asthma medications.

Are there any mealtime behaviors that may indicate risk for aspiration?

- Eating slowly.
- Fear or reluctance to eat.
- Refusing to eat except with a “favorite support person.”
- Frequent coughing or choking while eating.
- Refusing certain foods and/or fluids.
- Food and fluid falling out of the mouth.
- Swallowing large amounts of food rapidly.
- Eating in odd or unusual positions, such as:
  - Throwing head back when swallowing.

Reducing Risk for Aspiration

Following some basic guidelines can reduce an individual’s risk for aspiration. Below are some strategies, but remember that in these cases there should be a formal plan for feeding that is followed consistently by staff who understand the plan and how to implement it.

- Check with the individual’s doctor first for any advice or restrictions.
All mealtime plans should always be discussed by the individual and their interdisciplinary team.

If you know that the individual is at risk for aspiration:

- Assist the individual to consult with his or her physician.
- Advocate for an evaluation with a swallowing specialist if symptoms occur.
- Discuss possible changes in the individual’s diet. This includes changes in consistency, texture, or temperature of food and drinks.
- Suggest a consultation with a dietician or nutritionist.
- Ask the individual’s physician about medications that:
  - promote stomach emptying.
  - reduce reflux and acidity.

How can you safely assist someone at mealtime to prevent aspiration?

Preparing for the meal:

- Provide a 30 minute rest period prior to feeding time.
- Involve the individual in planning the meal – make mealtime a pleasant, social time.
- Follow the prescribed diet consistency. Include the individual in choosing foods that he or she prefers.
- Eliminate distractions.
- Allow enough time for meals.
- Make sure the individual’s dentures or partials are firmly in place.
- Provide small meals every few hours instead of three larger meals each day.
- Avoid food or fluids for 2-3 hours before bedtime.

During the meal:

- Sit at eye level with the individual. Do not stand above the individual, this causes the individual to tilt their head backward.
- Position the individual as upright in the chair as possible. If the individual is in bed, elevate bed rest to a 90 degree angle.
- Ask the individual to slightly flex or tilt their head to achieve a “chin down” position. The chin should tilt slightly forward at about 45 degrees.
- Slow down the pace of eating. Decrease the size of each bite.
- If you are feeding an individual do so slowly. Sit within the individual’s range of view.
- Alternate between solid foods and liquids, moist sauces, or gravies.
- Let the individual catch a breath and rest between bites and sips. The rest should be at least 10 seconds.
- Let the individual remain upright for at least 45 minutes following the meal.
• Provide the individual with assistance to rinse and clean their mouth after the meal.

When assisting someone using a feeding tube:

• Administer tube feedings in an upright sitting position.
• If the individual must be fed in bed, keep the head of the bed at a 45 degree angle while feeding.
• Don’t overfill the stomach.
• Provide formula at room temperature.
• Feed slowly.
• If ordered by physician, provide individual with small portions of food to be taken orally.
• Have individual remain upright for at least 45 minutes after feeding.

If the individual you support aspirates:

• Stop the feeding and/or eating immediately.
• Keep the individual in an upright position and encourage coughing.
• You may restart the meal if the individual is breathing normally or their health care professional gives permission.
• If the situation becomes a choking emergency, perform the abdominal thrust (Heimlich) maneuver.
• Call 911 if the person stops breathing. Start CPR.

Resources

• Aspiration among People with Developmental Disabilities
• Aspiration among Consumers with Developmental Disabilities
• Aspiration Checklist