



**Children's Hospital Association of Texas**  
***Safety and Quality Collaborative***  
**Asthma Management Pathway (ED and IP)**

**β Agonist Doses**

**Recommendations:** In children and adolescents with acute asthma exacerbation, no significant difference exists for important clinical responses such as time to recovery of asthma symptoms, repeat visits, or hospital admissions when medications are delivered via HFA with Valved Holding Chamber (VHC) or nebulizer. HFA with Valved Holding Chamber (VHC) is preferred.

Continuous Albuterol is as effective as intermittent but should be reserved for children requiring administration more than every 1 hour and for children with life threatening asthma.

**Albuterol nebulization solution** (2.5mg/3ml, 5mg/ml)

**Intermittent** 0.15 mg/kg (MIN 2.5mg, MAX 10 mg)

5mg every 20minutes for up to 3 doses then every 1-4 hours as needed

**Continuous** 0.5 mg/kg/hour

15-20 mg/hr continuous

**Albuterol HFA inhaler** (90mcg/actuation)

**Mild**

- 6 puffs every 20minutes for up to 3 doses then every 1-4 hours as needed

**Moderate-Severe**

- 8 puffs every 20minutes for up to 3 doses then every 1-4 hours as needed

**Levalbuterol nebulization solution** (0.31mg/3ml, 0.63mg/3ml, 1.25mg/3ml)

0.075mg/kg (MIN 1.25mg, MAX 5mg)

**Levalbuterol HFA inhaler** (45mcg/actuation)

**Mild**

- 6 puffs every 20minutes for up to 3 doses then every 1-4 hours as needed

**Moderate-Severe**

- 8 puffs every 20minutes for up to 3 doses then every 1-4 hours as needed



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