

FLAIR

Fostair vs Symbicort: CLinical effectiveness of anti-inflammatory reliever therapies (AIR): a non-inferiority study

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AUTHORS	Freya Tyrer, Rachel Malone, Arthur Jackson, Neva Eleangovan, John Townend, Cono Ariti, Victoria Carter, David Price
PROJECT TEAM	Chiesi Ltd Rachel Malone (Head of Medical), Arthur Jackson (Medical Affairs Lead) OPRI David Price (Principal Investigator), Freya Tyrer (Senior Epidemiologist), Neva Eleangovan (Database & Data Quality Manager), John Townend (Medical Statistician), Cono Artiri (Medical Statistician), Victoria Carter (Research & Operations Director)
STEERING COMMITTEE	Prof. Ian Pavord (University of Oxford), Prof. Peter Wark (Director of Cystic Fibrosis and RES2/Monash University, Melbourne), Prof. Richard Beasley (Medical Institute of New Zealand), Prof. Michael Crooks (Hull University Teaching Hospitals, UK) Prof. Brian Lipworth (University of Dundee, UK)
CLIENT CONTACT	Rachel Malone Arthur Jackson
STUDY SPONSOR	Observational & Pragmatic Research Institute (OPRI)

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LIST OF ABBREVIATIONS

Abbreviation or special term	Explanation
A&E	Accident and Emergency
AIR	Anti-inflammatory reliever
ATS	American Thoracic Society
CKD	Chronic kidney disease
COPD	Chronic Obstructive Pulmonary Disease
CVD	Cardiovascular disease
DPI	Dry powder inhaler
ERS	European Respiratory Society
FEV ₁	Forced expiratory volume in 1 second
FVC	Forced vital capacity
GERD	Gastrointestinal oesophageal reflux disease
GINA	Global Initiative for Asthma (guidelines)
ICS	Inhaled corticosteroids
IMD	Index of multiple deprivation
LABA	Long-acting β_2 agonist
LAMA	Long-acting muscarinic agonist
LRTI	Lower respiratory tract infection
MART	Maintenance And Reliever Therapy
OPCRD	Optimum Patient Care Research Database
OPRI	Observational and Pragmatic Research Institute
pMDI	Pressurised metered-dose inhaler
RCP	Royal College of Physicians
SABA	Short-acting β_2 agonist
SYGMA-2	Symbicort Given as Needed in Mild Asthma (SYGMA) trial of as-needed ICS-formoterol compared with as-needed budesonide maintenance treatment

1. BACKGROUND & RATIONALE

Asthma accounts for a substantial burden of disease, healthcare costs and loss-of-work productivity [1,2] and, when uncontrolled, can lead to respiratory failure and arrest [3]. However, it does not need to be life-limiting if managed and treated effectively. Finding the right treatment is particularly important for people who have recently been diagnosed with asthma to prevent lung disease progression. Even people with infrequent symptoms are at risk of severe exacerbations [4], so it is important that their asthma is adequately managed.

Prior to 2019, people with newly diagnosed asthma were typically treated with as-needed short-acting β_2 -agonist (SABA) “reliever” inhalers. However, the over-use and over-reliance on SABA for rapid symptom relief has been highlighted as a concern globally [5–8] because these inhalers increase the risk of asthma exacerbations and mortality [8–10]. Anti-inflammatory reliever (AIR) inhalers are alternatives to as-needed SABA and have been recommended since the publication of the 2019 Global Initiative for Asthma (GINA) guidelines [11] and subsequent reports [12]. Inhalers used in an AIR approach contain a combination of inhaled corticosteroids (ICS) and a long-acting β_2 -agonist (LABA), formoterol fumarate, to relax the muscles in the airways and give rapid (and long-acting) relief of asthma symptoms.

In the UK, the only licensed ICS-formoterol inhalers for use in an AIR regimen are budesonide-formoterol inhalers, which are indicated for people aged 12 years and above. Studies demonstrate that budesonide/formoterol (Symbicort Turbohaler 200/6) AIR is superior to as-needed SABA in relation to both asthma control and exacerbation prevention [13,14]. Clinical trial evidence also suggests that it is superior to low-dose maintenance budesonide and as needed SABA at reducing severe exacerbations per patient per year [15].

Despite only budesonide-formoterol inhalers being licensed in an AIR regimen, international, national and local guidelines recommend the use of ICS-formoterol in an AIR regimen more generically, providing level A evidence for its use and referring specifically to the use of beclometasone-formoterol including the provision of dosing recommendations [12,16]. The report suggests that beclometasone-formoterol (i.e. Fostair) could be used as AIR only based on its proven efficacy as MART and the efficacy of intermittent beclometasone use [17–20]. Recommendations for AIR and MART are only made for ICS-formoterol inhalers, as the fast-

acting reliever activity of formoterol is critical for treatment of asthma symptoms [17]. Other ICS-LABA combinations, such as ICS-salmeterol are available; however, their onset of action is significantly slower making them unsuitable for use as a reliever where rapid treatment is required for breakthrough symptoms [21].

Fostair's non-inferiority to Symbicort has been demonstrated for both fixed dose maintenance therapy [22–24] and MART [25], but it is not indicated for use as an anti-inflammatory reliever (AIR) therapy on its own. However, in the real-world setting, as-needed Fostair AIR is used off-licence as an alternative to Symbicort AIR. This is particularly important given that budesonide-formoterol licensed options are only available as a dry powder inhaler (DPI) which is not suitable for all patients and does not align with preferences for pressurised metered dose inhaler (pMDI) prescribing in the UK [6]. It is, therefore, crucial that the safety and efficacy of beclometasone-formoterol as AIR therapy is investigated in clinical practice.

2. STUDY AIMS

2.1. Primary aims

The primary aim of this study is to:

- (1) Determine whether Fostair (pressurised metered dose inhaler [pMDI] or dry powder inhaler [DPI]) is comparable (non-inferior) to Symbicort (pMDI or DPI) as AIR in patients with asthma, based on the rate of asthma exacerbations over the 3-year follow-up period.

To address the primary aim, two cohort definitions will be applied using the free text prescribing and dosage instructions recorded in electronic medical records for each inhaler:

- (i) possible intent to use as AIR (i.e. a broader definition for inhalers with “as-needed” therapy instructions without “maintenance” instructions and prescriptions with “SMART/MART” without “maintenance” instructions; **Cohort 1**); and
- (ii) definite intent to use as AIR (i.e. a narrower definition for inhalers with “as-needed” therapy instructions without “maintenance” instructions; **Cohort 2**).

The definitions and dosage instructions for both cohorts are described in detail in **Section 12 (Appendices)** (see **Appendix 1** and **2**). For the main analysis and given its high specificity, Cohort 2 (i.e. the narrower definition) will be prioritised over Cohort 1.

2.2. Secondary aims

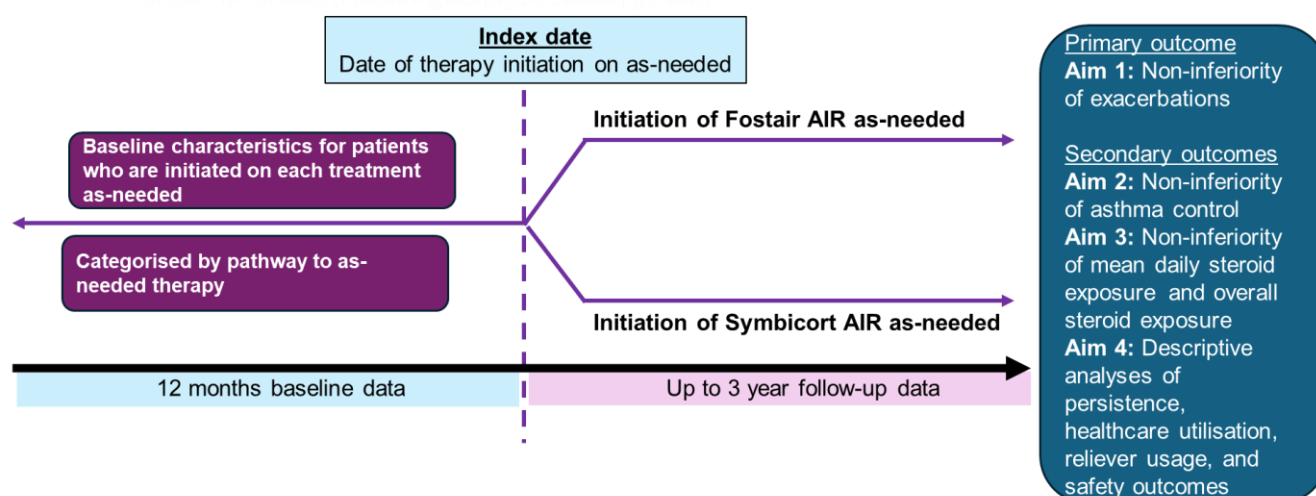
Secondary aims are to:

- (2) Determine whether Fostair (pMDI or DPI) as AIR is non-inferior to Symbicort (pMDI or DPI) as AIR in achieving asthma control over the 3-year follow-up period.
- (3) Determine whether Fostair (pMDI or DPI) as AIR is non-inferior to Symbicort (pMDI or DPI) as AIR in relation to: (i) mean ICS exposure; (ii) mean daily OCS exposure; and (iii) overall steroid exposure.
- (4) Describe persistence, healthcare utilisation, reliever usage and safety in patients receiving Fostair (pMDI or DPI) as AIR compared to those receiving Symbicort (pMDI or DPI) as AIR.

3. STUDY DESIGN

This is a collaborative study between Chiesi (UK) and OPRI. We will use a historical cohort design to compare people prescribed Fostair as AIR and Symbicort as AIR (see **Figure 1**). Individuals will be weighted using propensity score methods to balance characteristics in the study (Fostair; pMDI, DPI) and comparison (Symbicort; pMDI, DPI) populations.

Figure 1: Study Design



- The **index date** will be the date of therapy initiation on Fostair as AIR and Symbicort as AIR
- The **baseline period** will encompass the entire period available for each patient prior to the index date and will be at least 12 months
- The **follow-up period** will start on the index date for up to 3 years, allowing people to exit before this (i.e. censoring) if they die/transfer out of the GP practice. Rates will be described using person-time as the denominator.

4. STUDY POPULATION

4.1. Data sources

This is a historical cohort study using the Optimum Patient Care Research Database (OPCRD). The OPCRd has been described in detail previously [26] but, briefly, is an electronic primary care record database covering more than 1,000 GP surgeries across England, Scotland, Wales and Northern Ireland. All adults (≥ 18 years) with a diagnosis of asthma and no other additional chronic respiratory condition who initiated Fostair or Symbicort as AIR for the first time from July 2012 (following the approval of Fostair in the UK see **Figure 1**) will be selected. Index date will be the date of initiating Fostair or Symbicort as AIR. Individuals will be propensity score weighted [27] such that the chosen characteristics of the individuals are the same in each of the treatment groups (see covariates – **Section 5.4**).

4.1.2. Eligibility criteria

Inclusion criteria

- Adults (≥ 18 years) at index date
- 12 months registration at the participating GP surgery prior to index date
- An asthma diagnosis during the observation window
- Initiating Fostair as AIR or Symbicort as AIR for the first time from July 2012 (non-generic)

Exclusion criteria

- Diagnosis of another chronic respiratory condition (e.g. COPD) other than asthma
- Symbicort use prior to July 2012 (i.e. before Fostair could have been prescribed)
- >1 SABA prescribed in the year following initiation of Fostair as AIR or Symbicort as AIR
- Biologic usage for asthma prior to or at index date

5. STUDY VARIABLES AND STUDY OUTCOME DEFINITIONS

5.1. Primary Outcome: Severe Exacerbations (Aim 1)

The primary outcome for this study is non-inferiority of severe exacerbation rates, as defined by inferiority of no more than 20% worse (relative difference – to correspond with the SYGMA-2 trial [28]) at the 2.5% (one-sided) level of probability. Severe exacerbation rates will be measured by number of severe exacerbations and exposure time (up to 3 years) following treatment initiation in the Fostair AIR and Symbicort AIR group. Severe exacerbations will be defined using definitions from the European Respiratory Society (ERS) / American Thoracic Society (ATS) [29] as:

- An asthma-related hospital attendance/admission and/or
- Asthma-related accident and emergency (A&E) attendance and/or
- Primary care consultation with an acute oral corticosteroid course of ≥ 3 days

5.2. Secondary Outcomes

5.2.1. Asthma control (Aim 2)

The secondary outcome is non-inferiority of overall asthma control, as defined by inferiority of no more than 20% worse (relative difference) at the 2.5% (one-sided) level of probability. The definition of asthma control is given using the Royal College of Physicians (RCP) 3 questions (RCP3Qs) [30] for those patients who attended an asthma clinic.

5.2.2. Mean daily (and overall) steroid exposure (Aim 3)

We will calculate (i) mean ICS exposure ($\mu\text{g/day}$) - as dosage divided by number of days follow-up; (ii) OCS exposure - as dosage divided by number of days follow-up; and (iii) overall steroid exposure.

5.2.3. Additional outcomes (Aim 4)

Persistence

The percentage remaining on Fostair AIR and Symbicort AIR (also allowing switching to the generic treatments as treatment persistence) at the end of the study will be compared between groups.

Healthcare utilisation

Healthcare utilisation, as measured using number of:

- (i) asthma-related primary care consultations;
- (ii) asthma-related accident and emergency (A&E) attendance; and
- (iii) asthma-related hospital admissions will be compared between Fostair AIR and Symbicort AIR groups.

Reliever usage

Reliever usage will be compared during the 3-year follow-up period as an absolute number of ICS/Formoterol inhalers prescribed. Reliever (SABA) usage prior to initiation onto AIR therapy will also be described.

Safety

Safety as measured by the number of

- (i) acute cardiovascular events (ACE).

5.3. Exposure

The study exposure is combined inhaler use with either Fostair or Symbicort as AIR. Definitions of AIR will be based on a broader definition (i.e. may have been intended for use as AIR as no maintenance is described – **Cohort 1**) and a narrower definition (i.e. definite intention for use as AIR – **Cohort 2**). See **Appendix 12.1** for more details of the free text dosage information used to define these cohorts. We will also describe each group according to the type of device (i.e. pMDI or DPI).

5.4. Covariates

Propensity scores will be generated based on characteristics judged clinically to be associated with both the exposure (i.e. Fostair AIR use and Symbicort AIR use) and the primary outcome (exacerbations). These covariates will also be used for the secondary analyses. Prior to analysis of the primary outcome, defined characteristics of the Symbicort AIR group will be weighted where an imbalance is observed between the Fostair and Symbicort AIR groups (see **Section 6** for more details). A description of the covariates is shown in **Table 1**.

Table 1: Description of covariates to be used in the study

Covariate	Description of covariate
Demographic covariates	
Year of index date	Year of index date (i.e. initiation of Fostair or Symbicort AIR)
Age	Age in years on index date, expressed as mean \pm standard deviation
Gender	Female or male – people with any other gender were excluded to maintain confidentiality (numbers were small)
Ethnicity*	Ethnic group, categorised into: <ul style="list-style-type: none"> ▪ White ▪ South Asian ▪ Other ▪ Unavailable <p>* This variable was not listed as a covariate in the original protocol but has been described for completeness</p>
Body Mass Index (BMI)	Defined as the ratio of weight (kg) to height squared (m ²) closest to the index date.
Smoking status	Smoking status prior to and closest to the index date was categorised into:

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	<ul style="list-style-type: none"> ▪ Ex-smoker ▪ Current smoker ▪ Non-smoker
Index of multiple deprivation (IMD)	GP practice-level quintile of multiple deprivation was used, where 1 is the most deprived quintile and 5 is the least deprived.
Comorbidities	
Anxiety/depression	A diagnosis at 12 months on or before index date: yes/no
Allergic rhinitis	A diagnosis at 12 months on or before index date <u>or</u> a diagnosis ever and medication for rhinitis at 12 months on or before index date: yes/no
Cardiovascular disease (CVD)	A diagnosis (stroke, myocardial infarction or ischaemic heart disease) on or before index date ever: yes/no
Chronic kidney disease (CKD)	A diagnosis on or before index date ever: yes/no
Diabetes	A diagnosis on or before index date ever: yes/no
Eczema	A diagnosis at 12 months on or before index date: yes/no
Gastro-oesophageal reflux disease (GERD)	A diagnosis at 12 months on or before index date: yes/no
Glaucoma	A diagnosis on or before index date ever: yes/no
Hypertension	A diagnosis at 12 months on or before index date: yes/no
Nasal polyps	A diagnosis on or before index date ever: yes/no
Osteoporosis	A diagnosis on or before index date ever: yes/no
Peptic ulcer	A diagnosis at 12 months on or before index date: yes/no
Pneumonia	A diagnosis on or before index date ever: yes/no
Pulmonary embolism	A diagnosis on or before index date ever: yes/no
Sleep apnoea	A diagnosis on or before index date ever: yes/no
Clinical covariates	
Percentage predicted FEV ₁	Percentage predicted FEV ₁ , expressed as mean ± standard deviation, within 12 months prior to the index date.
Percentage peak flow rate	Percentage peak flow rate, expressed as mean ± standard deviation, within 12 months prior to the index date.
Ratio of FEV ₁ to FVC	The value within 12 months prior to and closest to index date was used. Patients were categorised by: <ul style="list-style-type: none"> ▪ Normal: ≥0.7 ▪ Mildly abnormal: 0.6 to <0.7 ▪ Moderate/severe abnormal: ≤0.6
QRISK3	Calculated or predicted [31] algorithm for cardiovascular disease risk within the next 10 years for people aged 25 to 84 years. This was categorised into: <ul style="list-style-type: none"> ▪ Low risk: <10% ▪ Medium risk: 10–20% ▪ High risk: >20%
Highest blood eosinophil count, cells/μL	The highest blood eosinophils in the 5 years prior to index date, categorised into: <ul style="list-style-type: none"> ▪ < 150 cells/μL ▪ 150 – <300 cells/μL ▪ ≥300 cells/μL
Number of asthma exacerbations	Asthma exacerbations (see Section 5.1) in the 12 months prior to the index date, categorised by: <ul style="list-style-type: none"> ▪ None ▪ 1 exacerbation ▪ 2 exacerbations ▪ 3 exacerbations ▪ ≥4 exacerbations

Non-emergency asthma general practice consultations	General practice consultations related to asthma expressed as a mean \pm standard deviation
Asthma therapies	
SABA only	Prescription(s) for SABA only within the 12-month period prior to index date
ICS \pm SABA	Prescription(s) for ICS \pm SABA within the 12-month period prior to index date
ICS/LABA \pm SABA	Prescription(s) for ICS/LABA \pm SABA within the 12-month period prior to index date
ICS/LABA/LAMA \pm SABA	Prescription(s) for ICS/LABA/LAMA \pm SABA within the 12-month period prior to index date
Other therapies	Additional therapies prescribed either in combination with one of the above
Other active therapies	
Rhinitis medication	Prescriptions for rhinitis medication in 12 months prior to index date (i.e. not necessarily with a diagnosis for rhinitis)
Diabetes medication	Prescriptions for diabetes medication in 12 months prior to index date
Antibiotic therapies	
Number of respiratory-related antibiotic courses	Course of antibiotic prescriptions linked with (lower) respiratory consultations in the 12-month-period prior to the index date: yes/no
Total number of antibiotic courses	Course of antibiotic prescriptions in the 12-month-period prior to the index date: yes/no
Vaccinations	
COVID-19 vaccination	A vaccination against COVID-19 within 12 months on or before index date: yes/no
Pneumococcal vaccination	A vaccination against Streptococcus pneumoniae within 12 months on or before index date: yes/no
Influenza vaccination	A vaccination against influenza within 12 months on or before index date: yes/no

COVID-19: coronavirus disease; FEV₁: forced expiratory flow in one second; FVC: forced vital capacity; ICS: inhaled corticosteroids; LABA: long-acting β 2-receptor agonist; LAMA: long-acting muscarinic antagonist; QRISK3: Cardiovascular risk score (3rd version); SABA: short-acting β 2-agonist

6. STATISTICAL ANALYSIS

6.1. Statistical Analysis Plan

The baseline characteristics of the study (Fostair) and control (Symbicort) populations will be described in accordance with the inclusion/exclusion criteria before and after propensity score balancing methods. Standardised mean differences (SMD) will be used to compare differences between characteristics of individuals in the study population and control population (any values of ≥ 0.1 will be used to denote imbalance between groups). Propensity scores for treatment with Fostair (pMDI or DPI) vs Symbicort (pMDI or DPI) will be calculated based on the covariates described in **Section 5.4**. Inverse probability of treatment weights (IPTW) using stabilised weights based on propensity scores or other propensity score methods

(depending on the balance of covariates) will be used in regression analyses to improve balance between the two groups. The final choice of weighting method will be whichever one gives the most balance between groups. Baseline patient characteristics which still show imbalance will be added to the regressions as covariates.

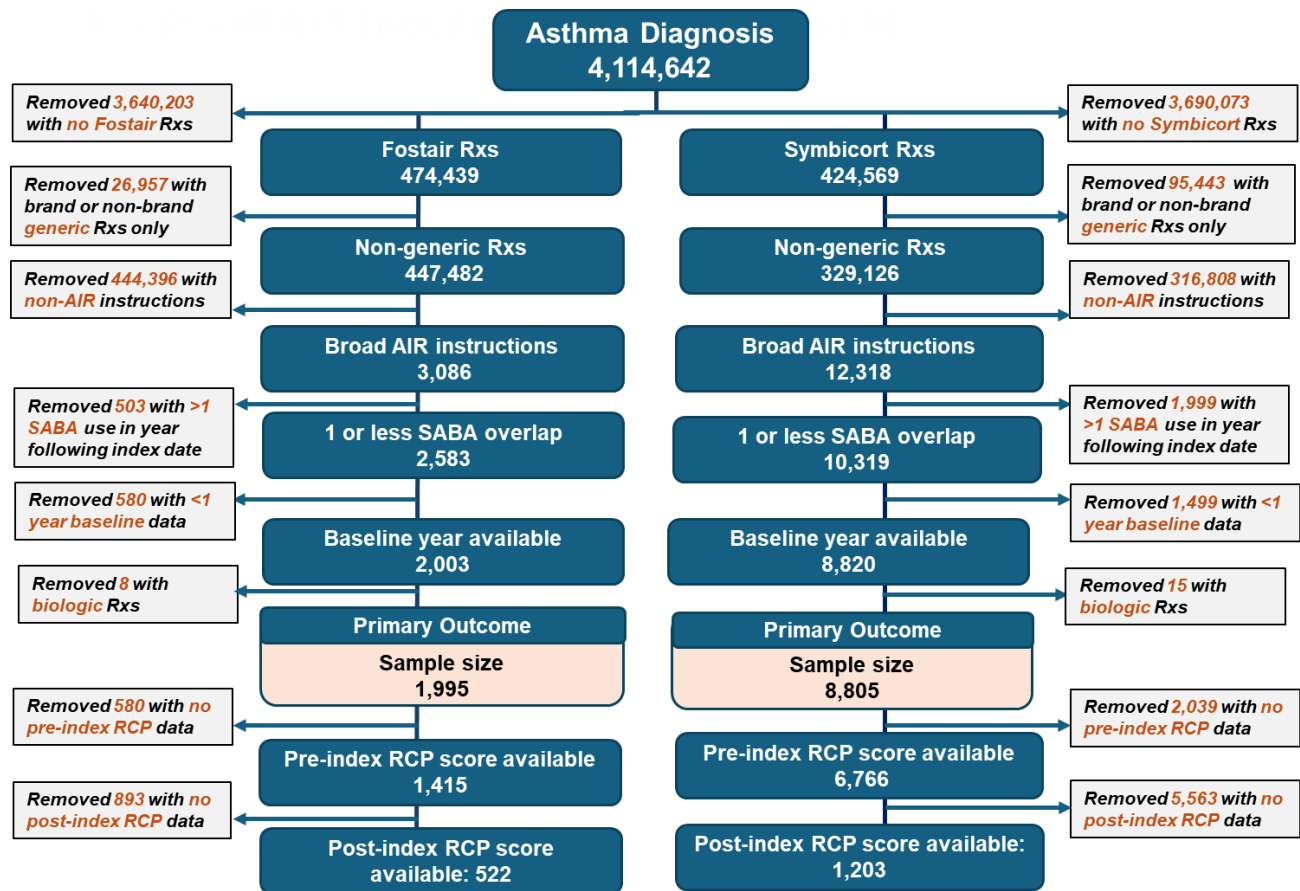
The primary analysis will use Poisson regression (if overdispersion is not present) or negative binomial regression (if overdispersion is present) to compare relative exacerbation rates. The secondary outcomes will use logistic regression (asthma control), the t-test/Mann-Whitney U-test (mean ICS daily dose, OCS exposure); Chi-squared test (difference between two independent proportions; persistence); and Poisson/negative binomial regression (healthcare utilisation).

To align with the SYGMA-2 trial [28], non-inferiority will be declared if Fostair AIR is no more than 20% (relative) worse than Symbicort AIR at the 2.5% (one-sided) level of probability, shown by the relevant 95% confidence limit. This will be judged from the upper 95% confidence limit for the incidence rate ratio for exacerbations (primary aim), and from the lower 95% confidence limit for the odds ratio for overall asthma control (secondary aim). Additional aims will use descriptive statistics and will not use a priori non-inferiority margins.

6.2. Feasibility counts

The feasibility counts from the OPCRd from July 2012 until April 2025 for the broader exposure definition (Cohort 1; possible intent to prescribe as AIR) are shown in **Figure 2**. The figure shows available data on 1,995 Fostair AIR patients and 8,805 Symbicort AIR patients for the primary outcome of exacerbations.

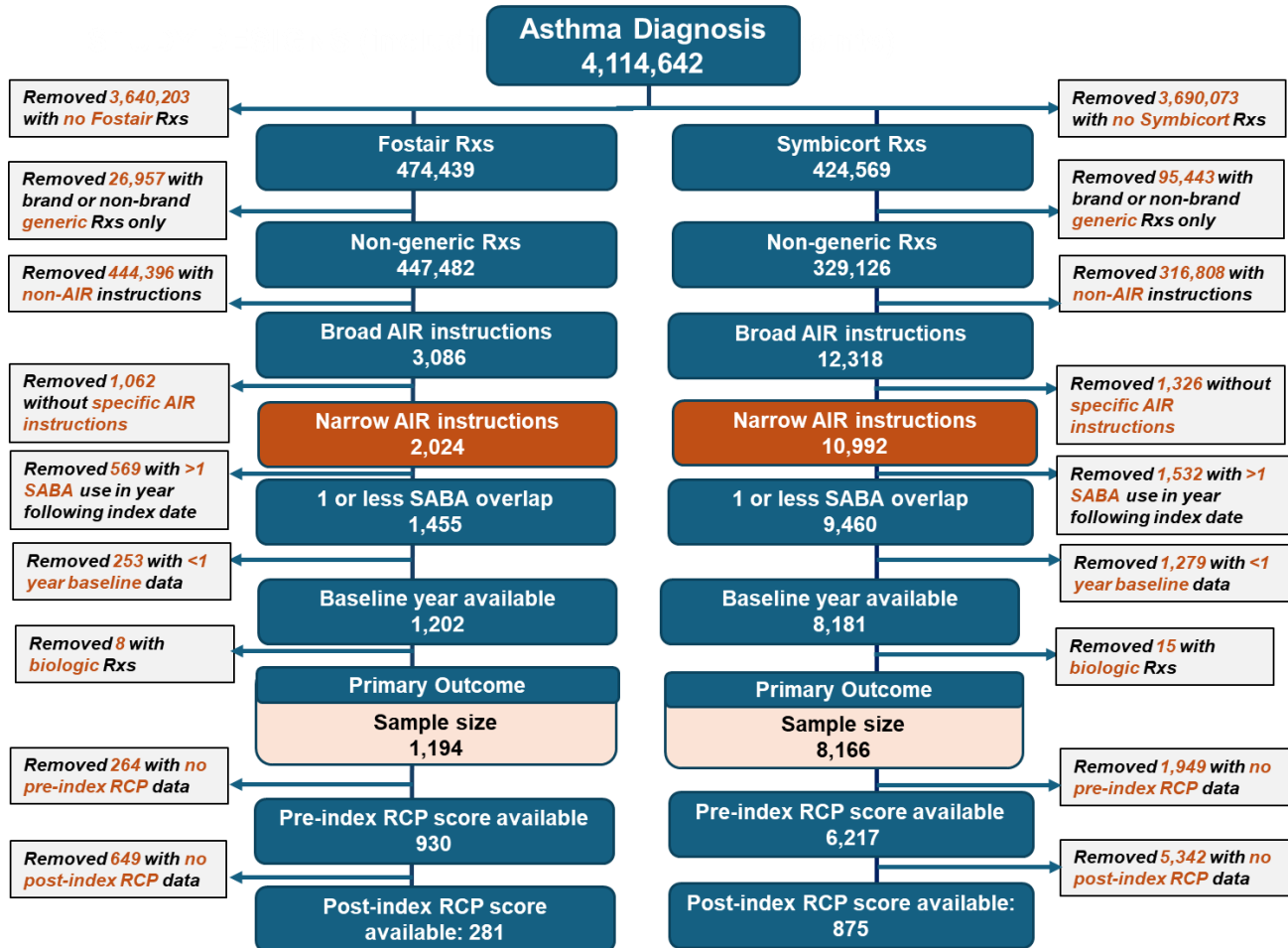
Figure 2: OPCRD Feasibility: Inclusion/Exclusion criteria and RCP3Q data availability using possible intent to prescribe Fostair and Symbicort AIR (Cohort 1)



RCP(3Q): Royal College of Physicians' (3 questions); Rx: prescription; SABA: short-acting β 2-agonist

The corresponding feasibility counts for the narrower exposure definition over the same time period (Cohort 2; definite intent to prescribe as AIR) are shown in **Figure 3**. The figure shows available data on 1,194 Fostair AIR patients and 8,166 Symbicort AIR patients for the primary outcome of exacerbations.

Figure 3: OPCRD Feasibility: Inclusion/Exclusion criteria. RCP Data Availability. Cohort 2: Specific AIR prescribing instructions



6.3. Sample size

For a previous study on Fostair vs Symbicort MART in OPCRd patients with moderate-to-severe asthma, we observed a mean of 0.4 exacerbations during the 12-month follow-up period [25]. In mild asthma, the literature suggests that there are between 0.2 to 2.9 exacerbations per year [32]. If we take the lower threshold of 0.2 exacerbations per year, the sample size of 1,995 Fostair patients and 8,805 Symbicort patients for Cohort 1 (see previous section; **Figure 1**) provides >98% power to demonstrate non-inferiority in follow-up exacerbation rates with a non-inferiority margin of 20%, a one-sided probability of 0.025 (i.e. 2.5% significance level) and a mean follow-up of 2.5 years, also allowing for mild overdispersion (up to 1.2). The sample size is sufficiently robust to allow a lower exacerbation rate of 0.1 per year, with >90% power.

For Cohort 2, a sample size of 1,194 Fostair patients and 8,166 Symbicort patients (see previous section; **Figure 2**) provides >90% power to demonstrate non-inferiority in follow-up exacerbation rates, using a mean exacerbation rate of 0.2 per year and the same parameters as for Cohort 1. On reducing the mean exacerbations to 0.1 per year, the power remains at >80%.

6.3. Software

A combination of SQL Management Studio and Stata v15.1 [33] will be used for this programme of work.

7. REGULATORY AND ETHICAL COMPLIANCE

This study requires ADEPT approval for use of OPCRd data and will be registered as a project on the European Network of Centres for Pharmacoepidemiology and Pharmacovigilance (ENCePP).

8. DATA DISSEMINATION

Findings from this study will be presented at the Primary Care Respiratory Society (PCRS) Conference in September 2025 and the British Thoracic Society (BTS) Conference in November 2025 (see Timelines).

9. TIMELINES

Action	Timeline
Protocol drafted	31 March 2025
Protocol sign-off by OPRI and sent to Chiesi	07 April 2025
Dataset Creation: Data sent from OPC UK to OPRI	30 April 2025
ADEPT and ENCePP approval	30 April 2025
Interim results (Baseline characteristics (demographics), including matched characteristics) slide deck	2 Jun 2025
Draft BTS abstract to Chiesi for review	15 Jun 2025
Draft PCRS abstract to Chiesi for review	15 Jun 2025
Full results slide deck	30 Jun 2025
Abstract submitted to PCRS	30 Jun 2025
Abstract submitted to BTS	30 Jun 2025
Study report sent to Chiesi	31 Jul 2025

10. VERSION HISTORY

Version	Date	Authors
1.0	31 Mar 2025	Freya Tyrer
1.1	02 Apr 2025	Shelly Pathak, David Price, Victoria Carter, John Townend, Rachel Malone, Arthur Jackson
2.0	16 Apr 2025	Freya Tyrer, Neva Eleangovan

2.1	17 Apr 2025	Rachel Malone, Arthur Jackson
3.0	28 Apr 2025	Rachel Malone, Richard Beasley, Brian Lipworth, Freya Tyrer, David Price, Victoria Carter, Neva Eleangovan

11. REFERENCES

1. GBD 2019 Diseases and Injuries Collaborators. Global burden of 369 diseases and injuries in 204 countries and territories, 1990-2019: a systematic analysis for the Global Burden of Disease Study 2019. *Lancet*. 2020;396:1204–22.
2. Global Asthma Network. The global asthma report. 2022.
3. Agnihotri NT, Saltoun C. Acute severe asthma (status asthmaticus). *Allergy Asthma Proc*. 2019;40:406–9.
4. Dusser D, Montani D, Chanez P, de Blic J, Delacourt C, Deschildre A, et al. Mild asthma: an expert review on epidemiology, clinical characteristics and treatment recommendations. *Allergy*. 2007;62:591–604.
5. Wang H-C, Djajalaksana S, Sharma L, Theerakittikul T, Lim HF, Yoo KH, et al. Evaluation of short-acting Beta-2-agonist prescriptions and associated clinical outcomes: Findings from the SABA use IN Asthma (SABINA) study in Asia. *World Allergy Organ J*. 2023;16:100823.
6. Janson C, Menzies-Gow A, Nan C, Nuevo J, Papi A, Quint JK, et al. SABINA: an overview of short-acting β 2-agonist use in asthma in European countries. *Adv Ther*. 2020;37:1124–35.
7. Montero-Arias F, Garcia JCH, Gallego MP, Antila MA, Schonfeldt P, Mattaruccio WJ, et al. Over-prescription of short-acting β 2-agonists is associated with poor asthma outcomes: results from the Latin American cohort of the SABINA III study. *J Asthma*. 2023;60:574–87.
8. Nwaru BI, Ekström M, Hasvold P, Wiklund F, Telg G, Janson C. Overuse of short-acting β 2-agonists in asthma is associated with increased risk of exacerbation and mortality: a nationwide cohort study of the global SABINA programme. *Eur Respir J*. 2020;55.
9. Sobieraj DM, Weeda ER, Nguyen E, Coleman CI, White CM, Lazarus SC, et al. Association of inhaled corticosteroids and long-acting β -agonists as controller and quick relief therapy with exacerbations and symptom control in persistent asthma: a systematic review and meta-analysis. *JAMA*. 2018;319:1485–96.
10. Stanford RH, Shah MB, D'Souza AO, Dhamane AD, Schatz M. Short-acting β -agonist use and its ability to predict future asthma-related outcomes. *Ann Allergy Asthma Immunol*. 2012;109:403–7.
11. Global Initiative for Asthma (GINA). Global strategy for asthma management and prevention. 2019.
12. Global Initiative for Asthma. Global Strategy for Asthma Management and Prevention. 2024.

13. Beasley R, Bruce P, Houghton C, Hatter L. The ICS/Formoterol Reliever Therapy Regimen in Asthma: A Review. *J Allergy Clin Immunol Pract*. 2023;11:762-772.e1.
14. Crossingham I, Turner S, Ramakrishnan S, Fries A, Gowell M, Yasmin F, et al. Combination fixed-dose beta agonist and steroid inhaler as required for adults or children with mild asthma. *Cochrane Database Syst Rev*. 2021;5:CD013518.
15. Hardy J, Baggott C, Fingleton J, Reddel HK, Hancox RJ, Harwood M, et al. Budesonide-formoterol reliever therapy versus maintenance budesonide plus terbutaline reliever therapy in adults with mild to moderate asthma (PRACTICAL): a 52-week, open-label, multicentre, superiority, randomised controlled trial. *Lancet*. 2019;394:919–28.
16. Papi A, Ferreira DS, Agache I, Baraldi E, Beasley R, Brusselle G, et al. European Respiratory Society short guidelines for the use of as-needed ICS/formoterol in mild asthma. *Eur Respir J*. 2023;62.
17. Global Initiative for Asthma (GINA). Global strategy for asthma management and prevention. Available from: www.ginasthma.org; 2024.
18. Papi A, Paggiaro P, Nicolini G, Vignola AM, Fabbri LM. Beclomethasone/formoterol vs fluticasone/salmeterol inhaled combination in moderate to severe asthma. *Allergy*. 2007;62:1182–8.
19. Camargos P, Affonso A, Calazans G, Ramalho L, Ribeiro ML, Jentzsch N, et al. On-demand intermittent beclomethasone is effective for mild asthma in Brazil. *Clin Transl Allergy*. 2018;8:7.
20. Martinez FD, Chinchilli VM, Morgan WJ, Boehmer SJ, Lemanske RF, Mauger DT, et al. Use of beclomethasone dipropionate as rescue treatment for children with mild persistent asthma (TREXA): a randomised, double-blind, placebo-controlled trial. *Lancet*. 2011;377:650–7.
21. van Noord JA, Smeets JJ, Maesen FP. A comparison of the onset of action of salbutamol and formoterol in reversing methacholine-induced bronchoconstriction. *Respir Med*. 1998;92:1346–51.
22. Kardos P. Budesonide/formoterol maintenance and reliever therapy versus free-combination therapy for asthma: a real-life study. *Pneumologie*. 2013;67:463–70.
23. Zhong N, Lin J, Mehta P, Ngamjanyaporn P, Wu T-C, Yunus F. Real-life effectiveness of budesonide/formoterol maintenance and reliever therapy in asthma patients across Asia: SMARTASIA study. *BMC Pulm Med*. 2013;13:22.
24. Tunceli O, Williams SA, Kern DM, Elhefni H, Pethick N, Wessman C, et al. Comparative Effectiveness of Budesonide-Formoterol Combination and Fluticasone-Salmeterol Combination for Asthma Management: A United States Retrospective Database Analysis. *J Allergy Clin Immunol Pract*. 2014;2:719-726.e6.
25. Jenkins C, Ramakrishnan S, Farah CS, Crooks M, Tyrer F, Pathak S, et al. Extrafine beclomethasone/formoterol is noninferior to budesonide/formoterol as maintenance and reliever therapy (MART) for adult asthma patients and reduces the total carbon footprint of all inhaler-related greenhouse gas (GHG) emissions [abstract submission: European Respiratory Society]. 2025.

26. Lynam A, Curtis C, Stanley B, Heatley H, Worthington C, Roberts E-J, et al. Data-Resource Profile: United Kingdom Optimum Patient Care Research Database. *Pragmat Obs Res*. 2023;Volume 14:39–49.
27. Austin PC, Stuart EA. Moving towards best practice when using inverse probability of treatment weighting (IPTW) using the propensity score to estimate causal treatment effects in observational studies. *Stat Med*. 2015;34:3661–79.
28. Bateman ED, Reddel HK, O'Byrne PM, Barnes PJ, Zhong N, Keen C, et al. As-Needed Budesonide-Formoterol versus Maintenance Budesonide in Mild Asthma. *N Engl J Med*. 2018;378:1877–87.
29. Reddel HK, Taylor DR, Bateman ED, Boulet L-P, Boushey HA, Busse WW, et al. An official American Thoracic Society/European Respiratory Society statement: asthma control and exacerbations: standardizing endpoints for clinical asthma trials and clinical practice. *Am J Respir Crit Care Med*. 2009;180:59–99.
30. Thomas M, Gruffydd-Jones K, Stonham C, Ward S, Macfarlane T V. Assessing asthma control in routine clinical practice: use of the Royal College of Physicians “3 questions”. *Prim Care Respir J*. 2009;18:83–8.
31. Hippisley-Cox J, Coupland C, Brindle P. Development and validation of QRISK3 risk prediction algorithms to estimate future risk of cardiovascular disease: prospective cohort study. *BMJ*. 2017;357:j2099.
32. FitzGerald JM, Barnes PJ, Chipps BE, Jenkins CR, O'Byrne PM, Pavord ID, et al. The burden of exacerbations in mild asthma: a systematic review. *ERJ Open Res*. 2020;6:00359–2019.
33. Stata Statistical Software: Release 15.1. StataCorp. College Station, TX; 2017.

12. Appendices

Appendix 1: Possible intent to use as AIR (Cohort 1 – Broad): Examples of prescribing instructions ≥ 10 Frequency

Text dosage instructions	Frequency
AS REQUIRED	3499
Inhale ONE dose when required in response to symptoms. Max 6 inhalations per occasion. Max 8-12 inhalations per day. (Please return your empty or unwanted inhalers to a pharmacy for disposal)	2136
SMART	1787
2 PUFFS AS DIRECTED	1605
Mart regime	1513
When Required	1463
2 puffs as required	996
Inhale ONE to TWO doses as directed using forceful inhalation	867
SMART REGIME	852
MART	676
PRN	650
MART REGIME - Up to 8 Max in a day.	637
Two Puffs To Be Inhaled as required up to 8 puffs a day	627
One Puff To Be Inhaled Each Day plus 1 puff as required (max 12 doses in 24 hours)	619
1 PUFF AS DIRECTED	611
as per MART regime	589
VIA SMART SYSTEM	579
USE AS NEEDED	554
2 PUFFS WHEN REQUIRED	548
AS PER SMART	540
AS PER SMART REGIME	523
2 puffs prn	477
use regularly as 'PREVENTER' + AS REQUIRED (MART regime)	468
to prevent breathlessness and wheeze (this inhaler contains beclometasone and formoterol)	436
TWO PUFFS AS REQUIRED	431
One Or Two puffs to be taken up to a maximum of 8 puffs a day	425
USE AS REQUIRED	404
as needed	400
One Puffs To Be Inhaled Each Day plus 1 puff as required (max 12 doses in 24 hours)	396
use as per smart regime	356
1 puff as required for asthma symptoms up to 8 per day	339
1 PUFF AS REQUIRED	337
1 -2 puffs as required	324

OPRI PROTOCOL

(AIR) Inhale ONE puff when needed, up to a maximum of 8 puffs per day	309
USE WHEN REQUIRED	297
1-2 PUFFS AS NEEDED	281
SMART system	277
following SMART plan	276
1 PUFF AS NEEDED	272
Use as per MART	261
2 PUFFS AS NEEDED	259
SMART PROTOCOL	247
use as directed for breakthrough use as per Dr Davies	246
one puff as needed	238
1-2 PUFFS AS REQUIRED	232
use SMART REGIME	217
(Extra puffs may be taken if needed up to 8 doses a day	217
ONE PUFF TO BE INHALED AS REQUIRED	215
use regularly as 'PREVENTER' + AS REQUIRED	212
TWO puffs when required	211
To be used as required MART - no more than 8 puffs in 24 hours	210
ONE TO TWO PUFFS AS NEEDED	210
1-2 doses As directed	207
symbicort smart to use 2 puffs When Required	205
for use as MART regime as per specialist nurse advice	192
One puff to be inhaled as necessary (no more than 8puffs total in 24hrs)	192
use as SMART	191
One Puff To Be Inhaled Each Day and when required	190
as per SMART guidelines, rinse mouth after use	186
one puff to be inhaled as necessary (total of 8 puffs in 24hrs)	186
1 PUFF WHEN REQUIRED	185
take 1 dose as required for asthma symptoms. Max 8/day	184
one puff as directed	183
SMART dosing	181
smart regimen	181
use as per MART regime	179
ONE PUFF UP TO EIGHT TIMES A DAY	177
UP TO EIGHT PUFFS A DAY	174
2 DOSES B.D. WHEN REQUIRED	171
use as per MART regime agreed with nurse	170
One puff as needed to be used as Symbicort reliever therapy to a maximum of 8 puffs in 24hrs	169
SMART plan	166
as required - AIR	164
1 -2 PUFFS AS DIRECTED	158

OPRI PROTOCOL

Use as per SMART protocol	156
AS PER SMART THERAPY	156
take 1 inhalation as needed in response to symptoms. If symptoms persist after a few minutes, an additional inhalation should be taken. Not more than 6 inhalations should be taken on any single occasion	153
MART therapy	152
and extra as needed	144
use Take one as needed	144
UP TO 4 PUFFS PER DAY	142
ONE PUFF TO BE INHALED AS NEEDED	142
1 PUFF PRN	138
one or two puffs as needed	138
inhale 2 doses as needed	138
1-2 puffs MART regime	137
1 -2 PUFF AS REQUIRED	137
1 puff when required for relief of symptoms up to a maximum of 8 a day	136
one puff as required to use as symbicort reliever therapy	134
1 P AS REQUIRED	133
One puff to be inhaled in response to symptoms, if symptoms persist take another dose. Not more than 6 in one occasion or more than 8 a day	129
Following SMART SYSTEM	126
2PUFFS AS NEEDED	126
1 or 2 puffs as required	123
2 PUFFS AS NEEDED FOR ASTHMA	122
TAKE ONE PUFF AS NEEDED	120
as per SMART INSTRUCTIONS REGIME.	118
USE AS PER SMART GUIDELINES, RINSE MOUTH AFTER USE	117
use as MART	116
AS NECESSARY-BUT NO MORE THAN 8 EXTRA INHALATIONS IN ONE DAY	112
up to a max of 8 times in 24 hours	111
SMART USE Notes for patient: patient prefers brand	110
One puff to be inhaled when needed. No more than 8 puffs in one day.	109
Inhale one puff for symptomatic relief as needed, max 12 puffs per day	109
Use as smart system--	108
AS PER SMART REGIMEN	108
AS P[ER SMART	107
ONE PUFF TO BE INHALED WHEN REQUIRED	107
use as needed as per MART regime	106
as SMART regime	105
One Puff To Be Inhaled as required, up to 8 puffs per day, max 12 in 24 hours, Symbicort Reliever therapy	105
1 puff PRN when short of breath instead of Ventolin (max 6 times a day)	105
1-2 sprays up to 8 puffs per day	104
AS SMART	102

OPRI PROTOCOL

AS DIRECTED WHEN REQUIRED	102
1-2 puffs to be inhaled as required as per GINA Guidelines	102
2 PUFFS AS REQUIRED (ASTHMA PREVENTER + RELIEVER)	101
2P UP TO MAXIMUM 12 PUFFS PER DAY.	100
1-2 puffs as required, max of 6-8 a day when symptoms worse or exercising	100
to help prevent breathlessness and wheeze (this inhaler contains budesonide and formoterol)	99
1 -2 P WHEN REQUIRED UP TO 8 PUFFS A DAY	99
1 -4 PUFFS PER DAY AS NEEDED	98
To be used as MART	97
2 PUFFS AS REQUIRED (PREVENTOR)	96
TAKE 2 PUFFS AS NEEDED	96
ONE PUFF AS REQUIRED	95
inhale when required	94
use prn	93
1 puff as required for relief of symptoms, increased if necessary up to 6 puffs as required, max. 8 puffs per day	92
1-2puffs as directed by specialist nurse	91
use as Smart approach not exceeding 8 inhalations a day.	90
symbicort smart regime	90
1 PUFF AS NEEDED OR SMART	90
TWO puffs as directed	90
1 PUFF AS NEEDED1	90
Take one puff when needed (no more than 12 puffs within 24 hours)	89
2 PUFFS AS NEEDED	89
see MART information leaflet	88
1 DOSE AS NEEDED	88
two puffs when required (FMART). Maximum 8 puffs in a day.	87
1 puff as needed for symptom relief (do not exceed 12 puffs in 24hrs)	87
one or two inhalations as directed	86
TAKE 2 PUFFS AS DIRECTED	85
1 -8 PUFFS A DAY AS REQUIRED	85
To be used as MART max 8pfs/day	84
use as directed when chest infection	84
UP TO 8 PUFFS A DAY	84
Two Puffs To Be Inhaled as required up to 10 puffs a day	84
One puff to be inhaled when needed. Up to 8 puffs in 24 Hours MAX. If needed more then 3x a week, seek medical help	84
Two puffs as per MART regime	83
follow SMART regime	83
use SMART instructions as supplied	82
2 puffs when required as per MART regime	82
smart regimen as advised respiratory consultant	82
to help prevent breathlessness and wheeze	82

OPRI PROTOCOL

up to, but not to exceed 8 puffs in 24 hours	82
>2 puffs as required	82
AS PER MART	80
SMART dosing maximum 12 doses in one day	80
One Or Two Puffs instead of ventolin when feeling wheezy	80
ONE OR TWO PUFFS TO BE INHALED WHEN REQUIRED	80
Take one dose as needed, maximum 6 doses in 24 hours	78
Use as smart dosing	77
One Puff To Be Inhaled Each Day max of 8 a day	76
2 PUFFS MAXIMUM 12* DAY	76
inhale one dose when required	76
2 PUFFS as per SMART principles	75
INHALE ONE PUFF WHEN REQUIRED	75
1 -2 PUFFS DAY-MAX 4 PUFFS A DAY	73
To be used as MART max 8 puffs/day	73
Inhale up to EIGHT puffs a day	73
One Puff To Be Inhaled Each Day - as per SMART	72
use up to 8 puffs in 24 hours	72
use when symptoms present	72
1 PUFF EVERY DAY TO PREVENT ASTHMA SYMPTOMS.	71
ONE OR TWO PUFFS AS DIRECTED	71
Two Puffs To Be Inhaled as required up to 8 puffs a day- use for 6 weeks	71
2 PUFFS WHEN NEEDED	71
up to 6 puffs per day	70
up to 8 puffs in 24 hours	69
1-2 PUFFS WHEN NEEDED (SMART REGIME)	68
1 OR 2 PUFFS AS DIRECTED	68
1-2 puffs when needed	68
one puff when required	68
one puff when needed as SMART if more than 7 sucks in a week use as maintenace	67
One Puff To Be Inhaled PRN as MART regimen	67
UP TO 6 PUFFS DAY	67
one puff as and when needed, no more than 8-12 inhalations in 24hours	67
one puff to be taken as required for mild asthma	67
FOLLOW THE SMART REGIME	66
2 puffs as needed + 1 puff for breathlessness Max 8 puffs per day	66
One puff when needed. No more than 8 puffs in one day.	66
Reliver therapy - one puff to be inhaled up to 6 puffs in response to your asthma symptoms	66
take As directed (max 12/day)	65
two puffs, as needed	65
To be used as MART therapy max 8 doses/day	64

OPRI PROTOCOL

TAKE TWO PUFFS WHEN SYMPTOMS- MAX 12 IN 24 HRS SMART	64
1-2 PUFFS WHEN REQUIRED	64
To use as MART regime as advised by asthma nurse	63
MAX 8 PUFFS PER DAY, TITRATE UP AND DOWN AS PER SYMPTOMS	63
One Puff To Be Inhaled as required for symptoms of breathlessness/wheeze, max total 8 puffs a day	62
1-2pufsprn	62
use as directed prn	61
ASD PRN	61
one puff when required up to 8 times a day	61
use on smart symptomatic	60
200 SMART	60
1 puff As required, maximum 6 at a time and maximum twelve dose in twenty four hours	60
ONE TO BE TAKEN WHEN NECESSARY	60
According to SMART regime - as per consultant	59
MART regimen	59
1-2 DOSES AS PER SMART BOOKLET	59
TWO PUFFS TO BE INHALED AS DIRECTED	59
1-2 PUFFS AS REQUIRED MAX OF 8 PUFFS A DAY	59
inhale 2 puffs as required for asthma	59
and upto 8 puffs per day as required	59
AND TO USE AS MART IF SYMPTOMATIC	58
1 dose as directed	58
One Puff To Be Inhaled as required for symptoms of breathlessness/wheeze, max total 8 puffs a day.	58
SMART as per per hospital instructions	57
use 1 puff as needed with asthma symptoms up to max 8 puffs per day	57
1 - 2 actuations as required during day (max 5) SMART dosing	55
Please use SMART treatment	55
To be taken as advised by the hospital - MART regime	55
2 puffs as required as part of mart regime, up to 8x/ per day	55
TWO PUFFS AS NEEDED	55
ONE-TWO puffs every 4-6 hours when required	55
TAKE 1-2 PUFFS AS NEEDED	55
use up to 6 clicks a day MART	54
as per SMART regime	54
INHALE AS DIRECTED ONE DOSE WHEN NEEDED - THIS INHALER REPLACES SYMBICORT	54
USE AS DIRECTED WHEN REQUIRED	54
use as directed and depending on symptoms	54
use on smart system	53
1 PUFF + MART	53
2 puffs Take as required	53
TAKE 1 -2 INHALATIONS AS NECESSARY	53

OPRI PROTOCOL

ONE OR TWO PUFFS TO BE INHALED AS REQUIRED	53
symbicort as smart	52
use 2 puffs as directed	52
1 puff as required for asthma symptoms (MAX TOTAL of 8 puffs in 24 hours)	52
One Puff To Be Inhaled As Required (Max 12 Puffs Per Day)	52
USE AS PER SMART GUIDELINES	51
One Puff To Be Inhaled Each Day(SMART)	51
Inhale TWO doses as directed using forceful inhalation	51
use one puff as required	51
2 PUFFS AS REQUIRED MAX 12 PUFFS PER DAY	51
2 PUFF AS REQUIRED	51
One puff to be inhaled when required up to a maximum of 8 puffs a day	51
use regularly as 'PREVENTER' + AS REQUIRED as reliever	50
MART maintenance and reliever	50
USE AS NEEDED WITH ASTHMA PLAN	50
one puff to be taken as required - AIR use can take upto 12 puffs in 24 hrs	50
One Puff To Be Inhaled As Required For Asthma Symptoms As Per Plan(Reliever)	50
use as SMART regime, up to 12 puffs Maximum.	49
Use as part of SMART regime advised by resp nurse	49
2 puffs as per MART regime	49
up to 10 puffs a day as needed, as per specialist advice	49
ONE PUFF WHEN NEEDED	49
up to 8 per day - SMART protocol	48
using SMART PLAN	48
action plan given for MART	48
One Puff To Be Inhaled Each Day. Using up to 4 extra puffs per day - prescribed SMART regime	48
plus when needed	48
To be used as MART max 8 pfs/day	48
One Puff To Be Inhaled as required for symptoms of breathlessness/wheeze, max total 12 puffs a day.	48
Use as SMART system	47
1 Every Day and smart	47
MART regime (max 8 puff per day)	47
One Puff To Be Inhaled Each Day And PRN If Needed Up To 12 Puffs Per Day	47
AS DIRECTED TO PREVENT BREATHING PROBLEMS	47
TWO PUFFS TO BE INHALED AS REQUIRED	47
1 PUFF(S) WHEN REQUIRED MAX 10 A DAY	47
1 PUFF as needed ,use up to 6 times a day	47
inhale 1 dose as needed, maximum 4 doses in 24 hours	47
FMART regime - maximum of 8 puffs per day	46
two doses when required for asthma	46
1 PRN	46

ONE PUFF WHEN NECESSARY	46
USE AS PER SMART GUIDELINES	45
use as MART regime	45
MART regime - upto max 8 puffs per day	45
USE ONE PUFF AS DIRECTED	45
2 DOSES AS NEEDED	45
one puff when required (AIR)	45
Inhaler One puff as needed due to cough, wheeze, chest tightness or breathlessness - maximum total of 12 puffs a day	45
to be used when required as per Smart Regime	44
TO be used as per MART regime	44
as MART regime	44
AS MART	44
UP TO 4 PUFFS A DAY	44
1 dose to be taken as indicated to relieve asthma symptoms (AIR) Max 12 doses in 24 hours	44
1puff prn	44
TAKE 1 PUFF WHEN REQUIRED UP TO 8 TIMES A DAY	44
3 Puff(s) As DIRECTED BY UHL	43
Up to 2 puffs 4 x per day	43
AS A PREVENTER AND RELIEVER	43
MART system can be used up to 8 puffs a day.	43
as required 1-2 puffs. No more than 8 puffs a day	43
TAKE 2 PUFFS WHEN NEEDED- FOR ASTHMA	43
To be used as AIR regime, 1 inhalation when needed to alleviate asthma symptoms up to a maximum of 6 at one time and maximum of 12 inhalations per day	43
1 dose to be taken as indicated to relieve asthma symptoms (AIR) Max 8 doses in 24 hours	43
to use as discussed as per MART regime.	42
2 pfs qid as required	42
AS PER SMART FOR ASTHMA	42
Two Puff To Be Inhaled As Directed By Chest Clinic	42
one dose as directed	42
TWO PUFFS EVERY 12 HOURS PRN	42
UP TO FOUR PUFFS A DAY	42
Two Puffs To Be Inhaled When Required	42
1-2 puffs as required. Do not take more than 10 puffs in one day	42
One Or Two Puffs To Be Inhaled PRN	42
One Puff To Be Inhaled Each Day to prevent asthma taking extra puffs as required to relieve wheezy symptoms	42
1 puff prn mdu	42
one puff to be inhaled via spacer when needed as reliever and preventer	42
1-4 puffs ASD by asthma nurse	41
for use as per SMART regime	41
smart system use when needed	41
2 PUFFS WHEN REQUIRED. Rinse mouth with water and spit out after use.	41

OPRI PROTOCOL

TAKE 2 PUFFS AS REQUIRED	41
Up to four puffs as directed	40
USE AS SMART VIA SPACER	40
1 PUFF MANE AND PRN	40
MART REGIME - No more than 8 puffs in 24 hours.	40
SMART MANAGEMENT	40
TAKE ONE AS DIRECTED	40
Inhale TWO metered doses AS DIRECTED	40
2 Puff(s) To be taken as directed	40
up to 8 puffs a day as reliever	40
use As often As needed (instead of blue)	40
2 prn	40
Inhale 1 puff as needed. Up to 6 puffs in response of symptoms on any single occasion. Max 8 puffs a day. - seek advice if needing 8 puffs.	40
one puff when needed for wheeze	40
ONE TO TWO AS NEEDED	40
1 PUFF(S) AS NEEDED TO RELIEVE WHEEZE OR COUGH (MAX 10 TIMES A DAY)	40
use with SMART system for 2w	39
smart regime up to 8 puffs in 24h	39
TAKE ONE OR TWO DOSES TO PREVENT ASTHMA (USE IN A MART SYSTEM, CAN GO UP TO 8 PUFFS A DAY IF NEEDED Notes for dispenser: instead of symbicort	39
ONE TO TWO PUFFS AS DIRECTED	39
WHEN NEEDED	39
1 puff as required for asthma symptoms can have up to 8 throughout day	39
1-2 puffs PRN	39
ONE AS NEEDED	39
1 puff as required (Max 4 per day)	39
AS SMART INSTRUCTIONS	38
MART regime as discussed	38
1 inhalation as required, for relief of symptoms; maximum 8 inhalations per day	38
1 puff with symptoms only. Maximum 12 puffs in 24 hours. In event of an asthma attack, take up to 6 puffs and call 999 if no improvement in symptoms	38
1 When Required	38
2 PUFFS AS REQUIRED MAX 8 IN 24 HRS	38
One Or Two Puffs To Be Inhaled when required as per respiratory consultant	38
1 puff as needed up to 8 puffs in 24 hours - use first then try ventolin	38
1-2 puffs as needed up to 8 in day	38
2 CLICKS QID WHEN REQUIRED	37
AS SMART THERAPY	37
MART - no more than 8 puffs in 24 hours	37
and in between as needed up to a max of 8 puffs per day	37
1 -2 puffs asd	37

OPRI PROTOCOL

TO TAKE MORE FREQUENTLY AS REQUIRED	37
USE AS AND WHEN REQUIRED	37
up to 8p in 24hrs	37
2 Puffs prn for asthma	37
ONE PUFF WHEN REQUIRED MAX 8 PUFFS PER DAY+	37
One Puff To Be Inhaled Each Day, Increase up to a maximum of 8 puffs a day if having asthma symptoms	37
.SMART DOSING	36
2 puffs When Required -use as MART inhaler as instrcted by nurse	36
AS DISCUSSED AND AS SMART	36
as per smart regime SMART	36
One puff and then up to 6 rescue puffs	36
INHALE 1 PUFF AS DIRECTED	36
2 PUFFS ASD	36
Use 1-4 Actuations As Needed To Control Symptoms	36
One puf as needed to relieve wheeze of asthma- maximum 6 a day.	36
1 DOSE 12 H OURLY OR UP TO 8 DOSES IN 24 HRS	35
2 puffs prn and at least 4 per day	35
SMART regime action plan given	35
To be used as needed to prevent asthma symptoms. maximum 8 puffs per day	35
uses 100/6 for reliever rather than 200.	35
USE AS NEEDED AS DISCUSSED WITH RESPIRATORY NURSE SPECILAIST DISCUSSED	35
1 -6 PUFFS UPTO 8 PUFFS A DAY AS REQUIRED	35
One Puff To Be Inhaled As Required. Maximum Of 12 Puffs In One Day.	35
One Puff To Be Inhaled Each Day As Needed	35
One puff to be inhalad as needed on AIR regime, up to 8 puffs per day.	35
One puff to be used when needed - can have addittional puff - 8 puffs in 24 hours	35
using on SMART system	34
UP TO 8 PUFFS PER DAY AS NEEDED	34
USE ONE OR TWO PUFFS AS REQUIRED	34
1 inhalation as required, for relief of symptoms; maximum 8 inhalations per day.	34
1 reliever dose as needed up to a max 8 in one day	34
one puff as necessary or reliver therapy	34
One Or Two Puffs To Be Inhaled as needed	34
TO BE INHALED ONE DOSE WHEN NEEDED FOR BREATHING	34
Use as SMART regime	33
using on smart system.	33
mart regime max 8 puffs day	33
'smart'	33
TAKE 1 DOSE AND 1 DOSE WHEN REQUIRED	33
Inhale ONE doses as directed using forceful inhalation	33
1 puff asd	33

OPRI PROTOCOL

1 PUFF(S) WHEN REQUIRED FOR WHEEZE MAX 10 PUFF(S) EVERY DAY	33
INHALE ONE DOSE AS REQUIRED	33
TAKE ONE PUFF AS REQUIRED	33
1 PUFF(S) WHEN REQUIRED FOR WHEEZE OR COUGH (MAX 10PER DAY)	33
One Puff To Be Inhaled with spacer as needed. Up to 8 puffs per day if required	33
Take 1 inhalation when required, upto 8 inhalations per day.	33
Use as per MART regime (may need to order more than 1 each month)	32
As part of SMART regimen: up to 8 times as required	32
SMART GUIDELINES	32
TAKE ONE OR TWO DOSES TO PREVENT ASTHMA (USE IN A MART SYSTEM , CAN GO UP TO 8 PUFFS A DAY IF NEEDED Notes for dispenser: instead of symbicort	32
and as needed	32
up to 4 doses a day	32
1 puff as required. Max 4 per day	32
2 When Required	32
Inhale one puff when required, up to a max of 12 doses per day. No more than 6 inhalations should be taken on any single occasion.	32
, single puff for relief. max 8 puffs in 24 hours	32
one puf prn for breathing difficulty max 6 times per day	32
1 PUFF AS SMART REGIEME	31
Inhale as per MART regime (Please return your empty or unwanted inhalers to a pharmacy for disposal)	31
For MART regime	31
1 -2 P AS DIRECTED	31
To use or two puffs as needed up to a total of 8 puffs in 24 hours	31
use as treatment when wheezey	31
2 PUFFS TO BE TAKEN WHEN REQUIREDWED	31
2 puffs via spacer to be used as a reliever (as advised by respiratory consultant)	31
ONE TO TWO PUFFS WHEN REQUIRED	31
1 -2 SUCKS BP AS REQUIRED	31
1-2 puffs to be inhaled as required	31
Take one puffs as needed	31
. using the smart system.	30
as pert MART regime - resp advice	30
AS PREVENTER AND RELIEVER.	30
FOR SMART REGIME	30
MART - use as both preventer and releiver	30
smart regime as per asthma nurse instructions and then review	30
1 PUFF WHEN REQUIRED AS SMART THERAPY	30
Mart system	30
One Puffs To Be Inhaled As Required. Maximum of 8 puffs A Day as per MART regime	30
1 -2 PUFFS AS NEEDED.	30
no more than 12 doses in 24 hours	30

OPRI PROTOCOL

One Or Two Puffs To Be Inhaled as required - intermittent asthma as per asthma plan	30
One Puff To Be Inhaled as needed upto 8 puffs in 24hours	30
One Puff To Be Inhaled As Required (Max 8 Puffs Per Day)	30
prn max 8 puffs per day	30
as required max 8 puffs/day	30
one puff as needed up to max of 8 in a day	30
take 1 inhalation as needed in response to symptoms. If symptoms persist after a few minutes, an additional inhalation should be taken. Not more than 6 inhalations should be taken on any single occasion.	30
up to 8 puffs To Be Inhaled daily as directed by consultant	29
uas as per SMART regime	29
Uses Smart Regime	29
SMART REGIME; MAX 12 puffs per day	29
for use as MART therapy as per nurse advice	29
SMART regime	29
up to 8 puffs in 24 hrs. Do not exceed the dose	29
use As a reliever and preventer whenever required, if an extra six puffs required contact practice nurse	29
2 PUFFS AS REQUIRED WHEN SHORT OF BREATH OR WHEEZY	29
can use an additional puff as a reliever if symptomatic no more than 8 puffs in 24 hours without seeking medical attention	29
one puff as needed, air regime (max. 8 puffs per 24 hrs)	29
One puff to be inhaled as required.To be also used as reliever therapy. No more than 8 puffs in one day.	29
take 1 -2 puffs as needed	29
Take One Puff as Required for Symptoms up to 8 Puffs/24hrs	29
1-4 PUFFS WHEN REQUIRED	29
TAKE 2 PUFFS WHEN NEEDED FOR ASTHMA	29
Use as per MART	28
1 TO 2 PUFFS MAX 4 INHALATIONS PER DAY	28
and extra if needed as a reliever	28
and up to 4 extra puffs prn for wheeze per 24hrs	28
AS REQUIRED UNDER 'SMART' GUIDELINES	28
Inhale ONE or TWO doses up to three tiems a day. Maximum 8 doses per day	28
SMART ,	28
inhale two dose as needed as per SMART dosing	28
up to 16 puffs per day as per respiratory specialist -see letter 30.6.22	28
1 puff as required maximum 6 puffs per day	28
1-2 INHALATION AS NEEDED. MAX 8 A DAY	28
one puff prn for cough up to 8 puffs in 24 hours	28
One Puff up to 8 times a day	28
Take one puff as needed for asthma maximum 8 puffs in 24 hours	28
1 PUFF AS REQUIRED UPTO SIX PUFFS A DAY	28
as required max 4puffs in 24hrs	28
One to two puffs as required for asthma symptoms. Please rinse mouth after use.	28
USE SMART	27

OPRI PROTOCOL

using SMART regime	27
Used as SMART regime - preventer and reliever	27
SMART WAY RINSE MOUTH AFTER EACH USE	27
2puffs as directed	27
up to 8 puffs in 24 hours Do not exceedd recommended dose	27
two puffs when needed	27
One inhalation when needed up to 6 a day .Rinse mouth following inhalation	27
One Puff To Be Inhaled as needed. Up to 6 puffs per day	27
One Puff To Be Inhaled Each Day when required for wheeze/tight chest /cough and can take up to 4 puffs a day if needed	27
Reliever therapy - One puff up to SIX times a day when required	27
1 puff as required (Maximum 4 puffs)	27
one puff as needed maximum of 12 puffs in 24 hours	27
Reliever dose 1 inhalation as required upto a maximum 6 doses per day. Rinse mouth or sip water after use	27
Use as detailed on MART plan	26
1-2 PUFFS AS NEEDED AS PER SMART REGIME	26
adn one inhalation as required as maintainance and reliever therapy	26
As per MART regimen up to 8puffs in 24 hours	26
2 puffs When Required upto 8 puffs a day MART regime	26
inhale as per SMART regimen, as instructed by your specialist	26
1- 2 PUFFS as directed	26
up to 8 puffs a day or 12 puffs if struggling	26
1 AS REQUIRED FOR BREATHLESSNESS	26
1-2 PUFFS AS REQUIRED.	26
One extra puff to be inhaled as needed if you have cough, breathlessness, wheeze, chest tightness (max total of 24 puffs a day)	26
one puff as needed up to 8 in 24 hours	26
one puff when needed up to 4 puffs a day	26
1 inhalation as required	26
One puff to be Inhaled as needed due to cough, wheeze, chest tightness or breathlessness, maximum total of 12 puffs a day	26
use as MART. No more than Eight puffs in twenty four hours	25
To use as MART as prescribed maximum 8 doses/day	25
use smartly	25
. + additional doses in between as needed .Not to exceedd 8 puffs in 24 hours	25
1 -2 PUFFS AS REQUIRED SMART	25
Can be used as MART max 8 pfs/day	25
MART regime as advised by respiratory nurse	25
MART PLAN MAX 8 PER DAY	25
1 puff PRN , max 8 puffs per 24 hours	25
2 puffs as required - maximum 12 puffs a day	25
AS NEEDED, STEP DOWN WHEN WELL	25
One inhalation as required for relief of symptoms via spacer; maximum 8 inhalations per day	25

OPRI PROTOCOL

One puff as required. Up to 8 puffs a day	25
one puff when required up to a maximum of 8 puffs a day	25
1 DOSE WHEN REQUIRED FOR ASTHMA SYMPTOMS	25
One Or Two Puffs to be used as required max 8 puffs in 24 hrs	25
Use 2 Puffs as and when needed as per MART regime.	24
use as instructed MART	24
Use as preventer and reliever therapy as per action plan	24
use in MART REGIME	24
two puffs Every Day as required	24
FOSTAIR MART CAN USE UP TO 8 PUFFS A DAY	24
INHALATION AS REQUIRED (SMART) AS PER DIRECTION OF RESPIRATORY PHYSICIAN	24
ONE PUFF AS NEEDED (MART)	24
One Puff To Be Inhaled Each Day plus 1 puff as required (up to 8 puffs in 24 hours)	24
One Puff To Be Inhaled Each Day then one puff prn up to 12 puffs per day	24
PRN AS PER SYMBICORT SMART ADVICE	24
SMART licence upto 12 inhalations in one day	24
2 puffs b.d. and extra as required	24
Mart Regime as discussed with PN; up to 8 puffs per day	24
use As often As needed	24
WHEN REQUIRED MAX X12/DAY	24
1 - 8 DOSES A DAY DEPENDING ON ASTHMA SYMPTOMS	24
1 OR 4 PUFFS AS REQUIRED DURING WINTER	24
2 PUFFS AS NECESSARY. NO MORE THAN 12 A DAY	24
One Puff To Be Inhaled As Needed For Cough Up To Maximum Eight In One Day	24
One puff when needed. No more than eight puffs in one day.	24
ONE PUFF WHEN REQUIRED, UP TO 12 A DAY	24
1 puff as needed with symptoms(max 8 puffs in one day)	24
One puff to be inhaled as needed on AIR regime, up to 8 puffs per day.	24
One Puff To Be Inhaled prn up to 8 puffs per day	24
ONE TO TWO PUFFS WHEN NECESSARY	24
use as per MART system	23
Use as per SMART booklet.	23
Using MART	23
MART PLAN	23
MART - max 8 puffs in 24 hours. Rinse mouth after use.	23
pluse one additional dose as required - Maximum dose 8 in 24 hours.	23
Use as AIR regime as directed	23
INHALE 2 PUFFS AS DIRECTED	23
2 puffs asdirected	23
1-2 use as directed	23
to take 1 puff as required up to 8 puffs in 24 hours	23

OPRI PROTOCOL

TWO PUFFS TO BE TAKEN WHEN REQUIRED	23
UP TO 8 PUFFS/DAY	23
UP TO 8 TIMES A DAY	23
1 PUFF AS REQUIRED FOR ASTHMA SYMPTOMS	23
Inhale one puff as required via spacer. Maximum 8 puffs in 24 hours	23
INHALE TWO PUFFS WHEN REQUIRED	23
max 8 puffs in total per day	23
One Puff To Be Inhaled As Needed Up To Maximum Eight In One Day	23
One Puff To Be Inhaled When Required, Max 8 puffs a day as per asthma plan	23
take when needed for breathlessness.	23
1-2 DOSES AS REQUIRED - MAX DOSE 8 PUFFS PER DAY	23
one puff to be inhaled as necessary-no more than 8 puffs in 24hrs	23
Up to EIGHT puffs a day as per MART regime	22
use SMARTly as required	22
2 puffs - Maximum of 8 puffs per day (MART Regime)	22
ASTHMA (steroid/laba) MART therapy	22
Following smbicort SMART system	22
Take two puffs as requires can also be used on MART	22
SMART DOSING AS DISCUSSED	22
Use prn as reliever up to 8 times max in a day	22
1 puff via spacer as required for asthma symptoms up to 8 puffs a day	22
one puff to be inhaled as needed - upto maximum of 8 puffs per day	22
One Puff To Be Inhaled As Required (12 puffs MAX)	22
One puff to be inhaled when required. Maximum of 8 puffs in one day.	22
One-Two Puff When Required - Max 8 Puffs In 24 Hours	22
inhale one or two puffs when required	22
One Puff To Be Inhaled As needed up to 8 puffs a day	22
One Puff To Be Inhaled with asthma symptoms up to max of 8 puff /day	22
takes 2 puffs as required	22
2 puffs and When Required asd	21
Up to 8 puffs a day using MART regime	21
Use as part of MART regime	21
Use as required, MAXIMUM 8 doses in 24 hours. Switch to MART if using regularly.	21
AS PER SMART LEAFLET	21
MART protocol which may require more frequent inhalers.	21
One Puff To Be Inhaled when required and an extra puff taken as needed up to 8 puffs in 24 hours (MART)	21
1 PUFF WHEN REQUIRED AS PER SMART REGIME	21
As per MART regimen	21
One Puff To Be Inhaled as Directed by Hospital	21
as directed when needed	21
Inhale one puff when needed, up to 6 puffs for any single occasion as directed (max 8puffs in 24 hrs)	21

OPRI PROTOCOL

WHEN REQUIRED MAXIMUM 8 PUFFS IN 24 HOURS	21
1 puff as required up to a max of 8/day	21
one puff as required for relief of symptoms. increased if necessary up to 6 puff when needed. max 8 puff per day	21
Take one puff as needed. Maximum 8 puffs in a day	21
Take 1 puffs as required (If more than 6 in a day then review)	21
TAKE UP TO 12 DOSES PER DAY	21
inhale six puffs at a time As directed	20
USE 1-2 PUFFS WHEN REQUIRED AS PER SMART	20
USE UPTO 6 PUFFS A DAY SMART	20
used as Maintenance and Reliever therapy	20
TWO PUFFS TO BE TAKEN UP TO TWELVE INHALATIONS PER DAY	20
use as SMART therapy	20
As per MART - do not take more than 8 inhalations per 24 hours	20
One Puff To Be Inhaled Each Day pm	20
SMART dosing - max 12 doses/24 hours	20
SMART. use up to 8 puffs per day	20
take the SMART way, rinse mouth well after use.	20
as per mart therapy	20
MART regime.	20
SMART REGIME; MAX 8 puffs per day	20
take as per MART regime	20
1 TO 4 PUFFS AS DIRECTED IN MANAGEMENT PLAN	20
ONE OR TWO PUFFS TO BE USED AS DIRECTED	20
USE 2 PUFFS AS REQUIRED MAX 12 DAY AS PREVENTER AND RELIEVER	20
VARIABLE DOSE AS REQUIRED	20
. in response to symptoms, take another inhalation if needed, up to 8 inhalations a day.	20
1 puff PRN (TOTAL of 8 puffs in 24 hours)	20
1 puff When Required with minimum of dose interval of 12 hours	20
2 PUFFS AS REQUIRED (RELIEVER + PREVENTER)	20
INHALE 2 DOSES AS NEEDED.	20
Inhale one or two dose as required to a maximum of 8 a day	20
no more than 8 inhalations in a day- action plan given	20
One to two puffs as required for asthma symptoms: refer to asthma action plan. Please rinse mouth after use.	20
take 1 puff as required up to 8 puffs in 24 hours	20
To be taken as required as per respiratory	20
1 PUFF AS REQUIRED TO TREAT SYMPTOMS.	20
2 PUFF(S) WHEN REQUIRED	20
One puff to be taken when required. Not to exceed 8 puffs a day	20
two puffs as MART	19
use 2 puffs as MART regime as discussed with nurse	19
Use as Maintenance and Reliever Therapy as Instructed	19

OPRI PROTOCOL

USE AS SYMBICORT SMART	19
use by SMART principles	19
AS PER SMART REGIME FOR ASTHMA	19
Four Puffs To Be Inhaled A Day when required	19
inhale as per SMART regimen, as instructed by your specialist -	19
MART action plan given- instructed how to use	19
To be used as MART max 8pfs / day.	19
As MART- take as required to a maximum of 8 puffs in 24 hours	19
Inhale up to FOUR extra doses as part of SMART therapy when unable to use turbohaler due to shortness of breath	19
Please use SMART treatment. Asthma review due October on this drug	19
1P WHEN REQUIRED ASD BY HOSPITAL	19
USE WHEN NEEDED	19
UP TO 6 PUFFS	19
Use and when required for asthma symptoms. Max 12 puffs per 24 hours.	19
1 -2 AS REQUIRED	19
1 DOSE WHEN REQUIRED	19
1-2 puffs as required, max of 6-8 a day when symptoms worse	19
for wheeze or breathlessness	19
inhale 2 puffs when required for breathing	19
one puff as required, max 8 puffs in 24 hours	19
One puff to be Inhaled as needed, up to maximum of 8 puffs a day	19
one puff to be inhaled when symptoms occur, up to a maximum of 12 puffs per day.	19
one puff to be taken when required (max 8 puffs a day)	19
1 puff as required, up to 8 per day	19
AS REQUIRED.	19
Inhale ONE puff when required, max 16 puffs in 24hours with minimum dosage interval of 5 minutes	19
One puff as needed as a reliever. Up to a maximum of 12 puffs per day. As per GINA guidelines.	19
One Puff To Be Inhaled as reliever of symptoms as needed maximum 8 puffs per day	19
use as MART regimen as advised by asthma nurse	18
use as per SMART regime.	18
1-2 puffs BID and MART regime.	18
2 PUFFS +PRN (SMART USE)	18
SMART Therapy, up to 8 puffs a day	18
then as smart	18
as part of SMART	18
MART therapy as discussed	18
1-2 inhalations as directed	18
TWO PUFFS ASD	18
Two Puffs To Be Inhaled ASD	18
to use as a preventer and as a reliever for 4 weeks then review by carly no more than 8 inhalations per day.	18
TWO puffs TD - extra doses as needed	18

OPRI PROTOCOL

USE 1 PUFF AS NEEDED	18
use 2 puffs twice a day. maximum use 12 puffs	18
TO PREVENT CHEST SYMPTOMS	18
UP TO 8 PUFFS PER DAY	18
1 PUFF(S) WHEN REQUIRED FOR WHEEZE OR MAXIMUM 10 PUFF(S) A DAY	18
1-2 PUFF WHEN REQUIRED	18
2 PUFFS AS NEC NO MORE THAN 12 PUFFS A DAY	18
Inhale ONE or TWO as needed. Maximum 8 doses per day	18
INHALE TWO PUFFS AS AND WHEN NEEDED	18
One dose twice a day, upto additional 6 doses as reliever doses	18
One Or Two Puffs To Be Inhaled as needed for wheezing symptoms	18
one puff as and when required (max 12 per day)	18
One Puff To Be Inhaled as required, maximum 6 puffs at a time	18
ONE puff to be inhaled Each Day, plus additional puffs as needed up to a total of 8 puffs in 24 hours.	18
Take one puff when required	18
1 PUFF AS NEEDED WHEN WHEEZY	18
1-2 puffs as required. Max 6-8 a day	18
1-2 QID WHEN REQUIRED	18
one or two puffs to be inhaled as needed up to 8 puffs in a day	18
One Puff To Be Inhaled Each Day plus as needed (maximum 12 puffs a day)	18
Take 1 puff with symptoms. Do not exceed 6 puffs in a single occasion. Do not exceed 12 puffs in 24 hours.	18
Up to EIGHT puffs in 24hours as per MART regime	17
Use as a SMART inhaler	17
use between 1 puff per day up to a maximum of 8 puffs per day in a SMART regime	17
use 2 puffs as required as per MART regime	17
1 -2 PUFFS BE AND AS NEEDED (SMART)	17
1-2 puff per day. reduce dose if symptoms improve.	17
2 puffs bb use on SMART regimen	17
AS ADVISED (SMART REGIME)	17
mart regime as instructed	17
MART so up to 8 puffs in 24 hours	17
MART- up to eight puffs in 24 hours.	17
PRN use SMART dosing max 8-12 puffs a day	17
SMART dosage regime	17
1-2 puffs when required as instructed by the Asthma Nurse	17
MART REGIME; max 8 puffs per day	17
One suck To Be Inhaled when needed if needing more than 7 sucks a week use as maintenance therapy	17
SMART REGIME AS ADVISED BY RESP REGISTRAR	17
to be used PRN as per respiratory consultant	17
Two Puffs To be Taken on PRN basis - as reliever	17
UP TO 6 TIMES A DAY AS NEEDED	17

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up to 8 puffs a day if needed.	17
Two puffs to be inhaled when needed.	17
UP TO 8 PUFFS A DAY AS DIRECTED	17
1 DOSE AS REQUIRED FOR BREATHING PROBLEMS OR COUGH	17
1 puff per day and up to 6 doses per day for When Required	17
1 PUFF WHEN REQUIRED UP TO 8 PUFFS IN A DAY.	17
As Required - Don't switch from Symbicort 200/6	17
INHALE 1/2 DOSES AS NEEDED	17
INHALE ONE PUFF AS NEEDED	17
One Puff As Required Up To a Maximum of 8 A Day (AIR Asthma Plan)	17
one puff to be inhaled as an when required up to 8 puffs in total per day	17
One puff to be used when required as a reliever, maximum 8 puffs per day	17
One Puff when required up to 12 puffs per day AIR therapy	17
take as needed (no more than 8 puffs a day)	17
1 AS REQUIRED (UP TO 8 PER DAY)	17
1 PUFF TAKE AS REQUIRED	17
4puffs a day as needed	17
inhale 1 puff when you get asthma symptoms - if needing more than 6-8 puffs in 1 day, consult GP	17
INHALE ONE PUFF PRN	17
One puff 'as required' for asthma symptoms - maximum of 8 inhalations in 24 hours if required	17
One puff to be inhaled as necessary-if needed more than x3 a week please inform Julie	17
UP TO 12 PUFFS A DAY AS PER SMART REGIME	16
and to use as SMART approach max of 8 inhalations a day.	16
smart regime	16
Mart regime can use up to 8 puffs / day	16
mds. smart regime	16
MART regime- see care plan for directions	16
SMART regime **Annual Respiratory review birth month***	16
Two puff as directed by consultant	16
ONE OR 2 PUFF AS DIRECTED	16
up to 4 puffs day	16
up to 8 puffs a day as per Resp	16
UP TO 8 RESCUE PUFFS DURING THE DAY IF REQUIRED	16
Use up to 8 times a day as per Hospital letter	16
TWO TO BE TAKEN WHEN NECESSARY	16
up to 8 inhalations per day	16
use as required max 8 puffs in 24 hours	16
1 -8 PER DAY AS REQUIRED	16
1 puff as needed maximum 8 per day	16
1 PUFF AS REQUIRED FOR RELIEF OF SYMPTOMS, INCREASED IF NECESSARY UP TO 6 PUFFS AS REQUIRED, MAX 8 PUFFS PER DAY	16

OPRI PROTOCOL

I inhalation as needed. If symptoms persist take another inhalation. No more than 6 inhalations should be taken on one single occasion. Max 8 per day. Can go up to 12 on a temporary basis but if needing more than 8 seek medical attention urgently.	16
INHALATION AS REQUIRED	16
One - Two Puffs To Be Inhaled - maximum of 8-12 inhalations in 24 hours. Please rinse mouth after use.	16
One puff as required - max 8 puffs per 24 hrs	16
One puff to be inhaled as needed. To be also used as reliever therapy. No more than 8 puffs in one day.	16
One puff when needed during worsening Rinse mouth following inhalation	16
RELIEVER THERAPY: ONE puff to be used ONLY when required. Maximum of SIX puffs at any one time. Maximum of EIGHT puffs per day. If you use more than 2-3 puffs per week regularly please book a respiratory review appointment	16
take 1 puff as needed. no more than 8 puffs in a day	16
take a dose as needed up to 8 puffs a day.	16
To be used as advised by chest clinic - max x8 puffs a day	16
1 PUFF + AS REQUIRED	16
1-2puffs prn(max 10puffs in 24hrs)	16
As needed upto 8 puffs/day	16
inhale as needed. Not to exceed 8 puffs in 24 hrs	16
one dose as needed max 8 per day	16
One Puff To Be Inhaled when required (max 8 puffs in 24hrs)	16
Take as required	16
to start symbicort SMART REGIME; upto six times per day when peakflow drops below 180	15
two puffs as per MART	15
use as per SMART regime	15
Two Puffs To Be Inhaled up to 8 puffs A Day	15
and as SMART regime	15
as part of the mart regime	15
Can us up to 10 puffs per day as per MART Guidelines	15
MART 1 - 6 puff depending on symptoms	15
MART regime as per resp clinic	15
One or two puffs to be used as a releiver - max dose 8 puff in a day, as per MART regime	15
one puff as needed - via SMART regime	15
one to two puffs and upto 6 in between as per MART REGIME	15
or mart	15
As per MART management plan	15
FMART regime - maximum of 8 doses per day, rinse mouth after use.	15
MART regimen up to 8 puffs in 24 hours	15
one puff as needed as per SMART Regime	15
SMART WAY as per plan	15
up to 6 puffs in 24h or as needed	15
1 dose as needed max 8 per day	15
1 inhalation as needed for symptom relief, no more than 6 inhalations at any one time (Do not exceed 12 puffs in 24hrs)	15
1 puff as needed, max 8 in 24 hours	15

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1 puff up to 8 times a day	15
AIR regime. 1 puff as required for relief of symptoms, up to 8 puffs per day	15
as a reliever upto to 6 times a day - see 02-11-21	15
AS PREVENTER AND RELIEVER	15
Inhale 1 puff as needed . maximum 8 puffs in 24 hrs	15
Inhale ONE dose up to 10 times a day as needed for asthma symptoms	15
One Puff as Required for Relief of Symptoms, Max. 8 Puffs/day - AIR	15
One Puff To Be Inhaled as required for relief (no more than 12 inhalations in a day)	15
ONE PUFF TO BE TAKEN AS NEEDED	15
one puff, as needed	15
Take ONE inhalation as needed in response to symptoms. If symptoms persist after a few minutes, an additional inhalation should be taken. Not more than 6 inhalations should be taken on any single occasion.	15
1 PUFF AS NEEDED - PLEASE MAKE APPOINTMENT FOR ASTHA REVIEW	15
1-2 INHALATIONS UP TO 8 INHALATIONS IN 4 DIVIDED DOSES A DAY	15
and up to max 12 puffs (altogether) per day for extra relief of symptoms	15
Inhale ONE puff when required for symptoms - maximum EIGHT puffs per day	15
One Puff To Be Inhaled when needed up to Six TIMES A Day	15
one to be used as required	15
Take ONE to TWO puffs when required (maximum 8 puffs/24 hrs)	15
use SMART regime as advised by the community respiratory nurse	14
using on MART regimen	14
AS PER REGIME GIVEN MART	14
MART regime (Please return your empty or unwanted inhalers to a pharmacy for disposal)	14
mart regime up to 8 inhalations in 24hr	14
PRN- MART regime	14
SMART regime - as per management plan	14
SMART system fo dosing	14
1-2 INHALATIONS AS REQUIRED (SMART)	14
can be used as MART max 8pfs/day	14
MART REGIME; max 8 puffs per day	14
SMART ASTHMA MANAGEMENT	14
SYMBICORT SMART.	14
inhale 2 doses as directed	14
ONE OR TWO PUFFS TO BE INHALED AS DIRECTED	14
two puffs - prn as required	14
use one puff as needed- no more than 8 in a day	14
Use One puff when required as a Reliever . Not more than 8puffs/day	14
use 1-2 puffs, max 8/day. Please discard after open for 3 months.	14
use one puff if wheeze and up to 8 puffs per day	14
1 puff as needed for symptom relief as per GINA step 1. Maximum 8 puffs a day	14
1 puff as required - up to 8 puffs per day - rinse mouth after use	14
1-2 puffs as needed then as required up to 8 puffs in 24 hours until cough clears	14

OPRI PROTOCOL

2 PUFFS AS REQUIRED OR MORE WHEN SYMPTOMATIC	14
as per AIR regime, 1-2 puff as needed for asthma symptoms, no more than 6 puffs at one time and if using more than 8 puffs a day seek medical advice. No more than 12 puffs in 24hours	14
Can use as reliver 1-2 puffs when required. Maximum 8 in 24 hours	14
inhale one dose as needed	14
Inhale One Puff When Required - Max 8 Puffs In 24 Hours	14
max 8 puffs in 24 hours	14
one dose to be take in response to symptoms - AIR regime - maximum 8 doses in 1 day	14
One Or Two Puffs To Be Inhaled as required prior to exercise of with exercise symptoms	14
one puff as needed - up to 8 puffs in 24 hours	14
One puff to be inhaled as needed. Up to max 8 puffs in one day	14
One Puff To Be Inhaled As Required upto 4 puff per day	14
one puff when required, maximum up to 8 puffs in a day	14
take 1-2 puffs as required up to 8 puffs in 24 hrs	14
take as a reliever	14
Take One Puff as Required for Symptoms Max (8) Puffs/day - AIR	14
Take symbicort 1 puff as you need it for asthma symptoms Can take up to 6 puffs per day if needed	14
1 -4 INHALATIONS AS REQUIRED	14
2 PUFFS AS REQUIRED.	14
As a reliever, up to maximum to 12 puffs per day for limited time. (As per GINA guidelines)	14
Inhale 1 puff when needed up to 8 a day	14
INHALE ONE PUFF(S) WHEN REQUIRED UP TO 8 PUFFS IN 24 HOURS	14
One extra puff to be inhaled as needed if you have cough, breathlessness, wheeze, chest tightness (max total of 8 puffs a day)	14
ONE PUFF AS REQUIRE UP TO 12 DOSES IN ONE DAY: DUE ASTHMA REVIEW	14
One Puff To Be Inhaled with asthma symptoms up to max of 12 puff /day	14
take one puff as needed (max 12/day)	14
use as MART via spacer, 2 puffs a.m. and p.m. plus an extra puff as needed. No more than 8 puffs in 24 hours	13
up to 8 puffs a day RESCUE medication MART regime	13
1 Puff a day and as required	13
1 puff at bedtime plus additional 1-2 puffs as required when tight chested and wheezy	13
12puffs per day as per SMART regime	13
1-8 puffs in a day,MART regimme	13
as per SMART protocol so order when needed	13
MART regime as required but if using up to 8 puffs a say SPEAK TO GP/nurse	13
One puff to be inhaled as necessary-if needed more than x3 a week start the SMART system	13
SMART 2 DOSES B/D AND AS REQUIRED	13
SMART THERAPY	13
1SUCK EVERY DAY AND THEN WHEN REQUIRED MAX 6 PER DAY	13
2 PUFFS AND AS REQUIRED	13
One Puff To Be Inhaled Each Day - Can be stepped up SMART	13
One Puff To Be Inhaled When Required And An Addition Puff As Required Up To 8 Puffs In 24 Hours (MART)	13

OPRI PROTOCOL

SYMBICORT SMART	13
Use 1-2 doses as directed for Asthma	13
use as directed max dose 4 puffs in 24 hours	13
TAKE ONE TO TWO PUFFS AS DIRECTED	13
2 PUFFS AS DIRECTED.	13
TO USE AS NEEDED	13
Use as rescue up to FOUR puffs a day	13
When Required as per plan	13
1 puf up to 8x/day	13
1 puff as required, may take a seond puff if needed. Maximum 8 puffs per day	13
2 puff ON as needed	13
2 SUCKS AS REQUIRED	13
8 pouffs in 24 hours max	13
inhale one puff as required	13
inhaler 1 puff up to 8 times per day	13
One inhalation as needed for cough, wheeze or breathlessness, up to 8 per day (Max 12 in 24 hours)	13
one inhalation if required for relief of asthma symptoms upto maximum 8 inhalations per day (RELIEF TRIAL patient).	13
One Or Two Puffs To Be Inhaled ONLY when required	13
One puff as a reliever when required. Max 8 puffs/24hrs. Upto 12 puffs/24hrs can be used for a limited time, please book a review if using more than 8 puffs/24hrs	13
one puff as needed (max 8 puff in 24hrs)	13
One Puff as needed up to 6 times per day as a reliever	13
one puff as required for asthma synmptoms, maximum 8/day	13
ONE PUFF as required, upto 8 puffs per day (NOT exceed 12 inhalations in 24hrs)	13
One Puff To Be Inhaled Each Day + One Puff when needed (Maximum 8puffs in 24hrs)	13
one puff to be inhaled when needed as per AIR regime	13
One puff to be inhaled when required. Maximum of 4 puffs in one day.	13
One suck when required for asthma, up to 8 times per day	13
take 2 doses reducing to 1 as symptoms improve. Can take additional puff if needed, max total of 8 puffs per day.	13
Take ONE puff as needed- AIR therapy	13
>use as required	13
1 puff as required max 8 puffs in 24 hours	13
1-2 puffs as needed extra as discussed	13
AIR regime	13
Inhale One Puff When Required. If your symptoms do not improve after a few minutes take another dose. Maximum of 6 doses on any single occasion and no more than 12 doses per day	13
one actuation as required for wheezing , breathlessness and coughing can be used upto 8 puffs in 24 hours	13
One inhalation as required for relief of symptoms; maximum 8 inhalations per day	13
One puff 10 mins prior to exercising - maximum of 8 inhalations in 24 hours (see asthma action plan)	13
One Puff As needed in Response to Symptoms (Reliever Therapy) - Not More than 8pfs/day	13
one puff as required up to 8 puffs a day	13
ONE TO TWO DOSES AS REQUIRED	13

OPRI PROTOCOL

To Be Used As Maintenance Reliever Therapy	13
To be used when required as per MART regime as per Asthma Nurse	12
To use as SMART	12
Two Puffs To Be Inhaled as per MART management asthma	12
use 2 puffs as MART via spacer	12
USE as MART regime - max of 8 puffs in 24 hrs	12
use as . (SMART)	12
use on MART regimen	12
- may take additional puffs to relieve symptoms (maximum 8 puffs per day)	12
>As per Smart regi	12
1 PUFF AS NEEDED OR SMART Notes for dispenser: PLEASE SEE ASTHMA NURSE TO ORDER MORE Notes for patient: PLEASE SEE ASTHMA NURSE TO ORDER MORE	12
1 PUFF AS NEEDED UP TO EIGHT TIMES PER DAY (SMART)	12
AS PER SMART REGIME ADVISED	12
Inhale ONE - TWO doses as SMART regime, max 12 doses in 24 hours **Annual respiratory review**	12
One Puff To Be Inhaled Each Day, an additional dose can be used if required for symptoms as per MART regimen	12
One Puff to be used when required as a Reliever as part of the MART regime	12
SYMBICORT SMART THERAPY	12
take as per MART booklet	12
, can increase to total of 8 puffs per day as per MART	12
1puff as per the MART regime	12
2 puffs As needed As advised by nurse for SMART regime	12
and upto 8puffs when worse, MART plan	12
as per smart regime discusse wih respiratory nurse	12
Inhale ONE dose as required using forceful inhalation, up to a MAXIMUM of 8 doses in 24 hours. If using regularly then switch to MART.	12
One Puff To Be Inhaled Each Day adjusted according to SMART guidelines	12
One Puff Up To Six Times A Day ((MART regime))	12
SMART DOSE AS PLAN	12
1 PUFF AS NEEDED Notes for patient: Please book an appointment with the nurse for an asthma review	12
Take two puffs as directed	12
1 PUFF AS NEEDED Notes for patient: Please book an appointment with the nurse for an asthma review	12
use as directed 2puffs	12
TAKE 1-4 PUFFS AS DIRECTED	12
1 PUFF(S) AS DIRECTED BY HOSPITAL CONSULTANT	12
1 OR 2 PUFF(S) AS DIRECTED	12
use 1 puff when required as AIR therapy.	12
use as preventor&reliever up to 12 puffs a day	12
WHEN REQUIRED (MAXIMUM 12 PUFFS IN 24 HOURS)	12
TWO DOSES WHEN REQUIRED	12
up to 12 doses in total over 24 hours	12
(also has 400/6 inhaler- UP TO 8 RESCUE PUFFS DURING THE DAY IF REQUIRED	12

OPRI PROTOCOL

1 inhalation as needed in response to symptoms. If symptoms persist an additional inhalation may be used (up to a maximum of 6 inhalations on single occasion).	12
1-2 INHALATIONS INCREASING UP TO 8 IN 4 DIVIDED DOSES IF NEEDED. KEEP SPARE INHALER IN THE FRIDGE UNTIL REQUIRED.	12
1OR2 PUFFS/DAY WHEN REQUIRED	12
2 AS REQUIRED	12
2PUFFS PRN	12
as a reliever - up to 4 puffs a day if needed.	12
AS REQUIRED FOR EXACERBATIONS	12
Asthma - AIR regime - 1 puff as required for relief of symptoms; repeat 1 puff if symptoms have not resolved after a few minutes but do not take more than 6 puffs at any one time. Maximum 8 puffs per day.	12
inhale 1 dose as needed -maximum 8 doses in 24 hrs	12
Inhale ONE puff when needed, up to a maximum of 8 puffs per day	12
inhale up to 8 puffs per 24hours	12
one or two puffs as required	12
one or two puffs when required	12
ONE PUFF TIWCE + ONE PUFF WHEN REQUIRED MAX 8PUFFS IN 24/HRS	12
one puff to be inhaled as required, if symptoms persist after a few minutes an additional inhalation should be taken. No more than 6 inhalations on one occasion	12
One puff to be inhaled up to 8 times a day	12
One Puff To Be Inhaled WHEN REQUIRED. Can take an extra puff when required up to total 8 puffs in 24hr	12
one to two puffs a day when needed	12
PRN1	12
TAKE 2 PUFFS PLUS AS NEEDED	12
take as required - up to 8 inhalation per day (GINA guidelines)	12
TAKE ONE PUFF WHEN NEEDED	12
TAKE ONE TO4 PUFFS BID WHEN REQUIRED TO CONTROL ASTHMA	12
- may take additional puffs to relieve symptoms (maximum 8 puffs oer day)	12
1 inhalation as required for symptoms. maximum 8 inhalations per day	12
1 puff as required. Maximum 8 puffs in 24 hours. If using regularly needs review	12
1-2 puffs as required, up to 12/day	12
INHALE 1 DOSE AS NEEDED	12
one puff can be taken for relieving therapy if needed. Max 8 puffs in a day in total	12
One Puff To Be Inhaled When Required For Relief Of Symptoms, Maximum Eight (8) puffs a Day	12
TAKE 1-2 PUFFS AS REQUIRED	12
take 2 puffs when chest upset by aerosol sprays or perfumes, max 4 puffs in 24 hrs	12
Take one or two puffs as required to a maximum of 8 per day	12
Take two puffs reducing to one puff as symptoms controlled.	12
to use as needed as per Mart license-	11
Two puffs to be used as per MART regimen	11
up to 8 puffs in 24 hours MART	11
use As a reliever and preventer whenever required (SMART plan) if an extra six puffs required contact practice nurse	11
use as mart regimen	11

OPRI PROTOCOL

use as per MART regimen	11
using as per MART regime up to 8 puffs maximum a day	11
to MART regime up to 8 puffs in 24 hrs	11
Two Puffs To Be Inhaled as per MART regime	11
up to 8 puffs a day for the MART regimen	11
USE AS MART regimen. Max 8 inhalations per day.	11
Use Smbicort Smart regime	11
USE WHEN REQUIRED AS MART REGIME- PREVENTER AND RELIEVER (UP TO 12 PUFFS MAX IN 24 HOURS)	11
' MART' regime as discussed with asthma nurse max 8 puffs in 24h	11
1 PUFF WHEN REQUIRED AND UP TO 8 PUFFS VIA SMART REGIME.	11
2 puffs when needed as per MART regime	11
As discussed with nurse as per MART regime.	11
AS PER MART REGIME (MAXIMUM 12 PUFFS IN 24 HOURS)	11
Inhale ONE to TWO puffs when needed. Use as MART as per consultant	11
MART as per resp	11
one or two puffs and smart	11
one to Two Puffs To Be Inhaled as per MART management asthma	11
SMART REGIME (UP TO 12 PUFFS MAX IN 24/HOURS)	11
SMART use - max 8 puffs, in case of emergency can up to 12 puffs use	11
take up to 8 puffs in 24 hours MART	11
1 MART regime	11
2 PUFFS UP TO 8 DOSES PER DAY	11
AS AND WHEN NEEDED. Up to 8 PUFFS A DAY INstead of blue inhaler. MART regime	11
As per MART - do not take more than 18 inhalations per 24 hours	11
One Puff To Be Inhaled Each Day increasing to max 8 puffs if necessary	11
SMART DOSING AS ACTION PLAN.	11
take 1-2 puffs but up to 8 a day inplace of Ventolin (MART regime)	11
2 PUFFS AS DIRECTED Notes for dispenser: CMS asthma review required	11
1 PUFF(S) AS DIRECTED	11
TWO PUFF AS DIRECTED	11
One Or Two Puffs To Be Inhaled prn as directed by UCLH 20/12/21	11
2 puff asd	11
To use as AIR regime - 1-2 inhalations when required.	11
Two Puffs To Be Inhaled prn as per OPD letter	11
Upto 8 puffs a day, to use as required	11
Use as needed, up to 8 puffs in 24 hours.	11
use one puff prn max of 12 puff in 24hrs	11
use ONE to TWO puffs whenever required for symptoms, as advised by respiratory consultant. (this repalces blue inhaler)	11
Use to top up as required for symptom control	11
USE WHEN REQUIRED (MAXIMUM 12 PUFFS IN 24 HOURS)	11
USE 1 PUFF AS REQUIRED	11

OPRI PROTOCOL

use one inhalation as needed, up to 6 inhalations a day inresponse to symptoms. max 12 inhalations a day.	11
1 - 2 PUFFS + AS REQUIRED	11
1 or 2 puffs prn	11
1 puff as required for relief of symptoms, increased if necessary up to 6 puffs as required, max. 8 puffs per day;	11
1SUCK PRN	11
4 puffs as required in 24hrs as a reliever	11
AIR regime to use if Symptomatic	11
AIR. Use one dose when you have symptoms up to a maximum 8/day	11
AS AND WHEN REQUIRED	11
inhale 1 puff as needed - using as needed therapy (AIR)	11
Inhale ONE puff when and if required, up to a total max of 8 puffs in 24 hrs	11
ONE DOSE WHEN REQUIRED	11
One Or Two Puffs To Be Inhaled when required. (unlicensed dose)	11
One puff as needed - maximum 8 puffs a day	11
One puff if needed maximum 8/day	11
ONE PUFF PRN	11
One Puff to be inhaled as required as AIR regime, up to Eight puffs max per day	11
One Puff To Be Inhaled as required as per AIR action plan	11
One Puff To Be Inhaled When Required, can be used total of 8 puffs in 24 hours if needed	11
one to two puff as needed	11
Reliever Dose, Up To x8 Puffs In 24 Hours	11
Take one or two puffs when required for breathing symptoms. Up to 8 puffs can be taken in 24 hours	11
take one puff . then additional puffs upto maximum 6 per day as needed for symptoms.	11
Take ONE Puff when required - maximum EIGHT per day	11
Take One-Two Puffs as and when you require to relieve asthma symptoms	11
To be used as a reliever	11
1 puff as required up to 8 per day for Asthma Symptoms	11
AIR regime- 1 puff for asthma symptoms as needed, if using 8 puffs a day seek medical review, no more than 12 puffs a day	11
Inhale ONE dose as required up to a maximum of 8 puffs per day	11
inhale one to two doses as needed	11
One - Two Puff To Be Inhaled Each Day as required, and rinse mouth after use	11
One Or Two Puffs To Be Inhaled as needed (upto a maximum of 8 puffs per day)	11
One Puff as Required for relief of symptoms, increased if neccesary up to 6 puffs as required, max 8 puffs per day	11
One Puff To Be Inhaled As Required - do not exceed 8 puff per day	11
ONE PUFF WHEN NEEDED.	11
One to two Puffs To Be Inhaled as required, maximum 8 puffs in 24 hours, for asthma triggered by allergens	11
take one puff as required. up to 8 puffs in 24 hours	11
Take up to 8 puffs a day as needed for asthma	11
to use up to 8 puffs in 24hr MART	10
use as discussed SMART, up to six extra doses then see nurse	10
use as required SMART therapy up to 8/day	10

OPRI PROTOCOL

using symbicort SMART	10
1 puff to use as MART	10
and can use as a reliever MAX 6 puffs a day, total day puffs =8	10
and up to 8 further puffs in response to symptoms as SMART regime	10
as MART regime as per Resp Consultant letter	10
Asthma- MART	10
can use as SMART regime	10
following SMART plan	10
INHALE 2-8 PUFFS AS PER MART REGIME Notes for patient: Stop Spiriva and Symbicort	10
Inhale TWO puffs as per MART regime , can take up to 4 extra puffs during the day	10
one dose when symptomatic, up to 6 puffs a day extra as an asthma reliever (MART regime).	10
One Puff To Be Inhaled Each Day Can Also Be Used Like Ventolin As A Reliever Up To 12 Inhalations In 24 Hours	10
One Puff To Be Inhaled When Required And An Additional Puff As Needed Up To 8 Puffs In 24 Hours (MART)	10
1 or 2 puffs and smart	10
One Puff To Be Inhaled Each Day as needed- up to 6 puffs at a time- no more than 12 puffs in a day	10
One Puff To Be Inhaled Each Day when well ,upto 6 extra puffs as a reliever SMART Regime	10
one to two puffs as per MART regime	10
Inhale 1 or 2 puffs As directed	10
One Puff To Be Inhaled when needed as directed by respiratory	10
One Puff To Be Inhaled as directed	10
INHALE TWO PUFFS AS DIRECTED WHEN REQUIRED	10
1 INHALATION AS DIRECTED	10
TWO PUFFS WHEN REQUIRED MAX PUFFS EVERY DAY	10
Up to 8 puffs in 24 hours...not to exceed the recommended dose	10
USE 1-2 PUFFS AS NEEDED	10
Use on puff when needed	10
WHEN REQUIRED FOR WHEEZE	10
up to 8 puffs per day via spacer	10
use as instructed - 1 puff as required as reliver therapy up to max 8 puffs a day	10
(AIR) Inhale ONE puff PRN. Maximum 8 puffs in 24 hours	10
, with 1-2 puffs as needed up to a maximum of 8 puffs/day	10
1 dose as needed up to 8 times a day	10
1 inhalation b d plus as needed	10
1 puff as required up to 8 doses in 24 hours	10
1-2 INHALATIONS UP TO 8 INHALATIONS IN 4 DIVIDED DOSES A DAY Notes for patient: COPD check needed	10
1-2 puffs as both reliever & preventer inhaler	10
1-2 puffs as needed up to 8 puffs for 3 days max, rinsing mouth after	10
Inhale ONE dose when required in response to symptoms. (Please return your empty or unwanted inhalers to a pharmacy for disposal)	10
one puff + When Required	10
one puff as needed max 8 per day	10
one puff bed/ additional puffs in response to symtoms- max 8 total/ 24	10

OPRI PROTOCOL

ONE PUFF DB AND WHEN REQUIRED	10
One Puff To Be Inhaled as needed, up to 8 puffs per day.	10
One puff to be inhaled as needed. Up to max 12 puffs in one day	10
One Puff To Be Inhaled as Symbicort reliever therapy to a maximum of 8 puffs in 1 day	10
One Puff To Be Inhaled Each Day and as reliever	10
One Puff To Be Inhaled Each Day As Required	10
One Puff To Be Inhaled When needed as per respiratory 24.2.23	10
One puff to be inhaled when required. No more than 8 inhalations in a day.	10
One Puff To Be Inhaled when symptomatic/ max 8 puffs in 24 hours	10
One puff when required - max 8 puffs/day	10
one puff as needed up to six times per day	10
ONE TO TWO PUFFS TO BE INHALED AS REQUIRED	10
PRN 1 PUFF	10
Reliever Therapy - one puff to be inhaled up to 6 puffs in response to your asthma symptoms'	10
reliever therapy one puff to be inhaled up to 6 puffs in response to asthma symptoms	10
TAKE ONE TO 4 PUFFS BID WHEN REQUIRED FOR SHORTNESS OF BREATH	10
1 -2 PUFFS AS REQUIRED1P	10
1 PUFF WHEN REQUIRED AND UP TO 8 PUFFS	10
and up to an additional 4 puffs	10
ASTHMA: (budesonide / formoterol fumarate) take as required up to 8 doses in 24 hours	10
Inhale ONE or TWO doses as needed to relieve symptoms of cough, wheeze, breathlessness. Maximum 8 doses per day	10
ONE OR TWO PUFFS WHEN NEEDED	10
one puff as needed no more than 8 doses in 24hrs	10
One puff to be inhaled as needed for relief, with a maximum of 8 puffs in one day	10
One Puff To Be Inhaled As Required Up To Six Times A Day	10
One Puff To Be Inhaled When Required, can be used up to 8 puffs a day.	10
one puff when needed (AIR therapy)	10
reliever and maintainance therapy	10
Take one onhalation to be inhaled as needed, up to 6 inhalations in response to symptoms. Max 8 inhalations a day.	10

Appendix 2: Definite intent to use as AIR (Cohort 2 - Narrow): Examples of prescribing instructions ≥10 Frequency

Text dosage instructions	Frequency
AS REQUIRED	3499
Inhale ONE dose when required in response to symptoms. Max 6 inhalations per occasion. Max 8-12 inhalations per day. (Please return your empty or unwanted inhalers to a pharmacy for disposal)	2136
2 PUFFS AS DIRECTED	1605
When Required	1463
2 puffs as required	996
Inhale ONE to TWO doses as directed using forceful inhalation	867

OPRI PROTOCOL

PRN	650
Two Puffs To Be Inhaled as required up to 8 puffs a day	627
1 PUFF AS DIRECTED	611
USE AS NEEDED	554
2 PUFFS WHEN REQUIRED	548
2 puffs prn	477
to prevent breathlessness and wheeze (this inhaler contains beclometasone and formoterol)	436
TWO PUFFS AS REQUIRED	431
One Or Two puffs to be taken up to a maximum of 8 puffs a day	425
USE AS REQUIRED	404
as needed	400
1 puff as required for asthma symptoms up to 8 per day	339
1 PUFF AS REQUIRED	337
1 -2 puffs as required	324
(AIR) Inhale ONE puff when needed, up to a maximum of 8 puffs per day	309
USE WHEN REQUIRED	297
1-2 PUFFS AS NEEDED	281
1 PUFF AS NEEDED	272
2 PUFFS AS NEEDED	259
use as directed for breakthrough use as per Dr Davies	246
one puff as needed	238
1-2 PUFFS AS REQUIRED	232
ONE PUFF TO BE INHALED AS REQUIRED	215
TWO puffs when required	211
ONE TO TWO PUFFS AS NEEDED	210
1-2 doses As directed	207
One puff to be inhaled as necessary (no more than 8puffs total in 24hrs)	192
one puff to be inhaled as necessary (total of 8 puffs in 24hrs)	186
1 PUFF WHEN REQUIRED	185
take 1 dose as required for asthma symptoms. Max 8/day	184
one puff as directed	183
ONE PUFF UP TO EIGHT TIMES A DAY	177
UP TO EIGHT PUFFS A DAY	174
2 DOSES B.D. WHEN REQUIRED	171
One puff as needed to be used as Symbicort reliever therapy to a maximum of 8 puffs in 24hrs	169
as required - AIR	164
1 -2 PUFFS AS DIRECTED	158
take 1 inhalation as needed in response to symptoms. If symptoms persist after a few minutes, an additional inhalation should be taken. Not more than 6 inhalations should be taken on any single occasion	153
use Take one as needed	144
UP TO 4 PUFFS PER DAY	142
ONE PUFF TO BE INHALED AS NEEDED	142

1 PUFF PRN	138
one or two puffs as needed	138
inhale 2 doses as needed	138
1 -2 PUFF AS REQUIRED	137
1 puff when required for relief of symptoms up to a maximum of 8 a day	136
one puff as required to use as symbicort reliever therapy	134
1 P AS REQUIRED	133
One puff to be inhaled in response to symptoms, if symptoms persist take another dose. Not more than 6 in one occasion or more than 8 a day	129
2PUFFS AS NEEDED	126
1 or 2 puffs as required	123
2 PUFFS AS NEEDED FOR ASTHMA	122
TAKE ONE PUFF AS NEEDED	120
AS NECESSARY-BUT NO MORE THAN 8 EXTRA INHALATIONS IN ONE DAY	112
up to a max of 8 times in 24 hours	111
One puff to be inhaled when needed. No more than 8 puffs in one day.	109
Inhale one puff for symptomatic relief as needed, max 12 puffs per day	109
ONE PUFF TO BE INHALED WHEN REQUIRED	107
One Puff To Be Inhaled as required, up to 8 puffs per day, max 12 in 24 hours, Symbicort Reliever therapy	105
1 puff PRN when short of breath instead of Ventolin (max 6 times a day)	105
1-2 sprays up to 8 puffs per day	104
AS DIRECTED WHEN REQUIRED	102
1-2 puffs to be inhaled as required as per GINA Guidelines	102
2 PUFFS AS REQUIRED (ASTHMA PREVENTER + RELIEVER)	101
1-2 puffs as required, max of 6-8 a day when symptoms worse or exercising	100
to help prevent breathlessness and wheeze (this inhaler contains budesonide and formoterol)	99
1 -2 P WHEN REQUIRED UP TO 8 PUFFS A DAY	99
1 -4 PUFFS PER DAY AS NEEDED	98
2 PUFFS AS REQUIRED (PREVENTOR)	96
TAKE 2 PUFFS AS NEEDED	96
ONE PUFF AS REQUIRED	95
inhale when required	94
use prn	93
1 puff as required for relief of symptoms, increased if necessary up to 6 puffs as required, max. 8 puffs per day	92
1-2puffs as directed by specialist nurse	91
TWO puffs as directed	90
1 PUFF AS NEEDED1	90
Take one puff when needed (no more than 12 puffs within 24 hours)	89
2 PUFFS AS NEEDED	89
1 DOSE AS NEEDED	88
1 puff as needed for symptom relief (do not exceed 12 puffs in 24hrs)	87
one or two inhalations as directed	86

OPRI PROTOCOL

TAKE 2 PUFFS AS DIRECTED	85
1 -8 PUFFS A DAY AS REQUIRED	85
use as directed when chest infection	84
UP TO 8 PUFFS A DAY	84
Two Puffs To Be Inhaled as required up to 10 puffs a day	84
One puff to be inhaled when needed. Up to 8 puffs in 24 Hours MAX. If needed more then 3x a week, seek medical help	84
to help prevent breathlessness and wheeze	82
up to, but not to exceed 8 puffs in 24 hours	82
>2 puffs as required	82
One Or Two Puffs instead of ventolin when feeling wheezy	80
ONE OR TWO PUFFS TO BE INHALED WHEN REQUIRED	80
Take one dose as needed, maximum 6 doses in 24 hours	78
2 PUFFS MAXIMUM 12* DAY	76
inhale one dose when required	76
INHALE ONE PUFF WHEN REQUIRED	75
Inhale up to EIGHT puffs a day	73
use up to 8 puffs in 24 hours	72
use when symptoms present	72
ONE OR TWO PUFFS AS DIRECTED	71
Two Puffs To Be Inhaled as required up to 8 puffs a day- use for 6 weeks	71
2 PUFFS WHEN NEEDED	71
up to 6 puffs per day	70
up to 8 puffs in 24 hours	69
1 OR 2 PUFFS AS DIRECTED	68
1-2 puffs when needed	68
one puff when required	68
UP TO 6 PUFFS DAY	67
one puff as and when needed, no more than 8-12 inhalations in 24hours	67
one puff to be taken as required for mild asthma	67
One puff when needed. No more than 8 puffs in one day.	66
Reliver therapy - one puff to be inhaled up to 6 puffs in response to your asthma symptoms	66
two puffs, as needed	65
1-2 PUFFS WHEN REQUIRED	64
One Puff To Be Inhaled as required for symptoms of breathlessness/wheeze, max total 8 puffs a day	62
1-2pufsprn	62
use as directed prn	61
ASD PRN	61
one puff when required up to 8 times a day	61
1 puff As required, maximum 6 at a time and maximum twelve dose in twenty four hours	60
ONE TO BE TAKEN WHEN NECESSARY	60
TWO PUFFS TO BE INHALED AS DIRECTED	59

OPRI PROTOCOL

1-2 PUFFS AS REQUIRED MAX OF 8 PUFFS A DAY	59
inhale 2 puffs as required for asthma	59
and upto 8 puffs per day as required	59
1 dose as directed	58
One Puff To Be Inhaled as required for symptoms of breathlessness/wheeze, max total 8 puffs a day.	58
use 1 puff as needed with asthma symptoms up to max 8 puffs per day	57
TWO PUFFS AS NEEDED	55
ONE-TWO puffs every 4-6 hours when required	55
TAKE 1-2 PUFFS AS NEEDED	55
INHALE AS DIRECTED ONE DOSE WHEN NEEDED - THIS INHALER REPLACES SYMBICORT	54
USE AS DIRECTED WHEN REQUIRED	54
use as directed and depending on symptoms	54
2 puffs Take as required	53
TAKE 1 -2 INHALATIONS AS NECESSARY	53
ONE OR TWO PUFFS TO BE INHALED AS REQUIRED	53
use 2 puffs as directed	52
1 puff as required for asthma symptoms (MAX TOTAL of 8 puffs in 24 hours)	52
One Puff To Be Inhaled As Required (Max 12 Puffs Per Day)	52
Inhale TWO doses as directed using forceful inhalation	51
use one puff as required	51
2 PUFFS AS REQUIRED MAX 12 PUFFS PER DAY	51
2 PUFF AS REQUIRED	51
One puff to be inhaled when required up to a maximum of 8 puffs a day	51
USE AS NEEDED WITH ASTHMA PLAN	50
one puff to be taken as required - AIR use can take upto 12 puffs in 24 hrs	50
One Puff To Be Inhaled As Required For Asthma Symptoms As Per Plan(Reliever)	50
up to 10 puffs a day as needed, as per specialist advice	49
ONE PUFF WHEN NEEDED	49
One Puff To Be Inhaled as required for symptoms of breathlessness/wheeze, max total 12 puffs a day.	48
AS DIRECTED TO PREVENT BREATHING PROBLEMS	47
TWO PUFFS TO BE INHALED AS REQUIRED	47
1 PUFF(S) WHEN REQUIRED MAX 10 A DAY	47
1 PUFF as needed ,use up to 6 times a day	47
inhale 1 dose as needed, maximum 4 doses in 24 hours	47
two doses when required for asthma	46
1 PRN	46
ONE PUFF WHEN NECESSARY	46
USE ONE PUFF AS DIRECTED	45
2 DOSES AS NEEDED	45
one puff when required (AIR)	45
Inhaler One puff as needed due to cough, wheeze, chest tightness or breathlessness - maximum total of 12 puffs a day	45

UP TO 4 PUFFS A DAY	44
1 dose to be taken as indicated to relieve asthma symptoms (AIR) Max 12 doses in 24 hours	44
1puff prn	44
TAKE 1 PUFF WHEN REQUIRED UP TO 8 TIMES A DAY	44
as required 1-2 puffs. No more than 8 puffs a day	43
TAKE 2 PUFFS WHEN NEEDED- FOR ASTHMA	43
To be used as AIR regime, 1 inhalation when needed to alleviate asthma symptoms up to a maximum of 6 at one time and maximum of 12 inhalations per day	43
1 dose to be taken as indicated to relieve asthma symptoms (AIR) Max 8 doses in 24 hours	43
Two Puff To Be Inhaled As Directed By Chest Clinic	42
one dose as directed	42
TWO PUFFS EVERY 12 HOURS PRN	42
UP TO FOUR PUFFS A DAY	42
Two Puffs To Be Inhaled When Required	42
1-2 puffs as required. Do not take more than 10 puffs in one day	42
One Or Two Puffs To Be Inhaled PRN	42
One Puff To Be Inhaled Each Day to prevent asthma taking extra puffs as required to relieve wheezy symptoms	42
1 puff prn mdu	42
one puff to be inhaled via spacer when needed as reliever and preventer	42
2 PUFFS WHEN REQUIRED. Rinse mouth with water and spit out after use.	41
TAKE 2 PUFFS AS REQUIRED	41
TAKE ONE AS DIRECTED	40
Inhale TWO metered doses AS DIRECTED	40
2 Puff(s) To be taken as directed	40
up to 8 puffs a day as reliever	40
use As often As needed (instead of blue)	40
2 prn	40
Inhale 1 puff as needed. Up to 6 puffs in response of symptoms on any single occasion. Max 8 puffs a day. - seek advice if needing 8 puffs.	40
one puff when needed for wheeze	40
ONE TO TWO AS NEEDED	40
1 PUFF(S) AS NEEDED TO RELIEVE WHEEZE OR COUGH (MAX 10 TIMES A DAY)	40
ONE TO TWO PUFFS AS DIRECTED	39
WHEN NEEDED	39
1 puff as required for asthma symptoms can have up to 8 throughout day	39
1-2 puffs PRN	39
ONE AS NEEDED	39
1 puff as required (Max 4 per day)	39
1 inhalation as required, for relief of symptoms; maximum 8 inhalations per day	38
1 puff with symptoms only. Maximum 12 puffs in 24 hours. In event of an asthma attack, take up to 6 puffs and call 999 if no improvement in symptoms	38
1 When Required	38

OPRI PROTOCOL

2 PUFFS AS REQUIRED MAX 8 IN 24 HRS	38
One Or Two Puffs To Be Inhaled when required as per respiratory consultant	38
1 puff as needed up to 8 puffs in 24 hours - use first then try ventolin	38
1-2 puffs as needed up to 8 in day	38
1 -2 puffs asd	37
TO TAKE MORE FREQUENTLY AS REQUIRED	37
USE AS AND WHEN REQUIRED	37
up to 8p in 24hrs	37
2 Puffs prn for asthma	37
ONE PUFF WHEN REQUIRED MAX 8 PUFFS PER DAY+	37
One Puff To Be Inhaled Each Day, Increase up to a maximum of 8 puffs a day if having asthma symptoms	37
INHALE 1 PUFF AS DIRECTED	36
2 PUFFS ASD	36
Use 1-4 Actuations As Needed To Control Symptoms	36
One puff as needed to relieve wheeze of asthma- maximum 6 a day.	36
To be used as needed to prevent asthma symptoms. maximum 8 puffs per day	35
uses 100/6 for reliever rather than 200.	35
USE AS NEEDED AS DISCUSSED WITH RESPIRATORY NURSE SPECILAIST DISCUSSED	35
1 -6 PUFFS UPTO 8 PUFFS A DAY AS REQUIRED	35
One Puff To Be Inhaled As Required. Maximum Of 12 Puffs In One Day.	35
One Puff To Be Inhaled Each Day As Needed	35
One puff to be inhalad as needed on AIR regime, up to 8 puffs per day.	35
One puff to be used when needed - can have addittional puff - 8 puffs in 24 hours	35
UP TO 8 PUFFS PER DAY AS NEEDED	34
USE ONE OR TWO PUFFS AS REQUIRED	34
1 inhalation as required, for relief of symptoms; maximum 8 inhalations per day.	34
1 reliever dose as needed up to a max 8 in one day	34
one puff as necessary or reliver therapy	34
One Or Two Puffs To Be Inhaled as needed	34
TO BE INHALED ONE DOSE WHEN NEEDED FOR BREATHING	34
Inhale ONE doses as directed using forceful inhalation	33
1 puff asd	33
1 PUFF(S) WHEN REQUIRED FOR WHEEZE MAX 10 PUFF(S) EVERY DAY	33
INHALE ONE DOSE AS REQUIRED	33
TAKE ONE PUFF AS REQUIRED	33
1 PUFF(S) WHEN REQUIRED FOR WHEEZE OR COUGH (MAX 10PER DAY)	33
One Puff To Be Inhaled with spacer as needed. Up to 8 puffs per day if required	33
Take 1 inhalation when required, upto 8 inhalations per day.	33
up to 4 doses a day	32
1 puff as required. Max 4 per day	32
2 When Required	32

OPRI PROTOCOL

Inhale one puff when required, up to a max of 12 doses per day. No more than 6 inhalations should be taken on any single occasion.	32
, single puff for relief. max 8 puffs in 24 hours	32
one puf prn for breathing difficulty max 6 times per day	32
1 -2 P AS DIRECTED	31
To use or two puffs as needed up to a total of 8 puffs in 24 hours	31
use as treatment when wheezey	31
2 PUFFS TO BE TAKEN WHEN REQUIREDWED	31
2 puffs via spacer to be used as a reliever (as advised by respiratory consultant)	31
ONE TO TWO PUFFS WHEN REQUIRED	31
1 -2 SUCKS BP AS REQUIRED	31
1-2 puffs to be inhaled as required	31
Take one puffs as needed	31
1 -2 PUFFS AS NEEDED.	30
no more than 12 doses in 24 hours	30
One Or Two Puffs To Be Inhaled as required - intermittant asthma as per asthma plan	30
One Puff To Be Inhaled as needed upto 8 puffs in 24hours	30
One Puff To Be Inhaled As Required (Max 8 Puffs Per Day)	30
prn max 8 puffs per day	30
as required max 8 puffs/day	30
one puff as needed up to max of 8 in a day	30
take 1 inhalation as needed in response to symptoms. If symptoms persist after a few minutes, an additional inhalation should be taken. Not more than 6 inhalations should be taken on any single occasion.	30
up to 8 puffs in 24 hrs. Do not exceed the dose	29
use As a reliever and preventer whenever required, if an extra six puffs required contact practice nurse	29
2 PUFFS AS REQUIRED WHEN SHORT OF BREATH OR WHEEZY	29
can use an additional puff as a reliever if symptomatic no more than 8 puffs in 24 hours without seeking medical attention	29
one puff as needed, air regime (max. 8 puffs per 24 hrs)	29
One puff to be inhaled as required.To be also used as reliever therapy. No more than 8 puffs in one day.	29
take 1 -2 puffs as needed	29
Take One Puff as Required for Symptoms up to 8 Puffs/24hrs	29
1-4 PUFFS WHEN REQUIRED	29
TAKE 2 PUFFS WHEN NEEDED FOR ASTHMA	29
up to 16 puffs per day as per respiratory specialist -see letter 30.6.22	28
1 puff as required maximum 6 puffs per day	28
1-2 INHALATION AS NEEDED. MAX 8 A DAY	28
one puff prn for cough up to 8 puffs in 24 hours	28
One Puff up to 8 times a day	28
Take one puff as needed for asthma maximum 8 puffs in 24 hours	28
1 PUFF AS REQUIRED UPTO SIX PUFFS A DAY	28
as required max 4puffs in 24hrs	28
One to two puffs as required for asthma symptoms. Please rinse mouth after use.	28

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2puffs as directed	27
up to 8 puffs in 24 hours Do not exceedd recommended dose	27
two puffs when needed	27
One inhalation when needed up to 6 a day .Rinse mouth following inhalation	27
One Puff To Be Inhaled as needed. Up to 6 puffs per day	27
One Puff To Be Inhaled Each Day when required for wheeze/tight chest /cough and can take up to 4 puffs a day if needed	27
Reliever therapy - One puff up to SIX times a day when required	27
1 puff as required (Maximum 4 puffs)	27
one puff as needed maximum of 12 puffs in 24 hours	27
Reliever dose 1 inhalation as required upto a maximum 6 doses per day. Rinse mouth or sip water after use	27
1- 2 PUFFS as directed	26
up to 8 puffs a day or 12 puffs if struggling	26
1 AS REQUIRED FOR BREATHLESSNESS	26
1-2 PUFFS AS REQUIRED.	26
One extra puff to be inhaled as needed if you have cough, breathlessness, wheeze, chest tightness (max total of 24 puffs a day)	26
one puff as needed up to 8 in 24 hours	26
one puff when needed up to 4 puffs a day	26
1 inhalation as required	26
One puff to be Inhaled as needed due to cough, wheeze, chest tightness or breathlessness, maximum total of 12 puffs a day	26
1 puff PRN , max 8 puffs per 24 hours	25
2 puffs as required - maximum 12 puffs a day	25
AS NEEDED, STEP DOWN WHEN WELL	25
One inhalation as required for relief of symptoms via spacer; maximum 8 inhalations per day	25
One puff as required. Up to 8 puffs a day	25
one puff when required up to a maximum of 8 puffs a day	25
1 DOSE WHEN REQUIRED FOR ASTHMA SYMPTOMS	25
One Or Two Puffs to be used as required max 8 puffs in 24 hrs	25
use As often As needed	24
WHEN REQUIRED MAX X12/DAY	24
1 - 8 DOSES A DAY DEPENDING ON ASTHMA SYMPTOMS	24
1 OR 4 PUFFS AS REQUIRED DURING WINTER	24
2 PUFFS AS NECESSARY. NO MORE THAN 12 A DAY	24
One Puff To Be Inhaled As Needed For Cough Up To Maximum Eight In One Day	24
One puff when needed. No more than eight puffs in one day.	24
ONE PUFF WHEN REQUIRED, UP TO 12 A DAY	24
1 puff as needed with symptoms(max 8 puffs in one day)	24
One puff to be inhaled as needed on AIR regime, up to 8 puffs per day.	24
One Puff To Be Inhaled prn up to 8 puffs per day	24
ONE TO TWO PUFFS WHEN NECESSARY	24
Use as AIR regime as directed	23

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INHALE 2 PUFFS AS DIRECTED	23
2 puffs as directed	23
1-2 use as directed	23
to take 1 puff as required up to 8 puffs in 24 hours	23
TWO PUFFS TO BE TAKEN WHEN REQUIRED	23
UP TO 8 PUFFS/DAY	23
UP TO 8 TIMES A DAY	23
1 PUFF AS REQUIRED FOR ASTHMA SYMPTOMS	23
Inhale one puff as required via spacer. Maximum 8 puffs in 24 hours	23
INHALE TWO PUFFS WHEN REQUIRED	23
max 8 puffs in total per day	23
One Puff To Be Inhaled As Needed Up To Maximum Eight In One Day	23
One Puff To Be Inhaled When Required, Max 8 puffs a day as per asthma plan	23
take when needed for breathlessness.	23
1-2 DOSES AS REQUIRED - MAX DOSE 8 PUFFS PER DAY	23
one puff to be inhaled as necessary-no more than 8 puffs in 24hrs	23
Use prn as reliever up to 8 times max in a day	22
1 puff via spacer as required for asthma symptoms up to 8 puffs a day	22
one puff to be inhaled as needed - upto maximum of 8 puffs per day	22
One Puff To Be Inhaled As Required (12 puffs MAX)	22
One puff to be inhaled when required. Maximum of 8 puffs in one day.	22
One-Two Puff When Required - Max 8 Puffs In 24 Hours	22
inhale one or two puffs when required	22
One Puff To Be Inhaled As needed up to 8 puffs a day	22
One Puff To Be Inhaled with asthma symptoms up to max of 8 puff /day	22
takes 2 puffs as required	22
One Puff To Be Inhaled as Directed by Hospital	21
as directed when needed	21
Inhale one puff when needed, up to 6 puffs for any single occasion as directed (max 8 puffs in 24 hrs)	21
WHEN REQUIRED MAXIMUM 8 PUFFS IN 24 HOURS	21
1 puff as required up to a max of 8/day	21
one puff as required for relief of symptoms. increased if necessary up to 6 puff when needed. max 8 puff per day	21
Take one puff as needed. Maximum 8 puffs in a day	21
Take 1 puffs as required (If more than 6 in a day then review)	21
TAKE UP TO 12 DOSES PER DAY	21
1 TO 4 PUFFS AS DIRECTED IN MANAGEMENT PLAN	20
ONE OR TWO PUFFS TO BE USED AS DIRECTED	20
USE 2 PUFFS AS REQUIRED MAX 12 DAY AS PREVENTER AND RELIEVER	20
VARIABLE DOSE AS REQUIRED	20
. in response to symptoms, take another inhalation if needed, up to 8 inhalations a day.	20
1 puff PRN (TOTAL of 8 puffs in 24 hours)	20

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1 puff When Required with minimum of dose interval of 12 hours	20
2 PUFFS AS REQUIRED (RELIEVER + PREVENTER)	20
INHALE 2 DOSES AS NEEDED.	20
Inhale one or two dose as required to a maximum of 8 a day	20
no more than 8 inhalations in a day- action plan given	20
One to two puffs as required for asthma symptoms: refer to asthma action plan. Please rinse mouth after use.	20
take 1 puff as required up to 8 puffs in 24 hours	20
To be taken as required as per respiratory	20
1 PUFF AS REQUIRED TO TREAT SYMPTOMS.	20
2 PUFF(S) WHEN REQUIRED	20
One puff to be taken when required. Not to exceed 8 puffs a day	20
1P WHEN REQUIRED ASD BY HOSPITAL	19
USE WHEN NEEDED	19
UP TO 6 PUFFS	19
Use and when required for asthma symptoms. Max 12 puffs per 24 hours.	19
1 -2 AS REQUIRED	19
1 DOSE WHEN REQUIRED	19
1-2 puffs as required, max of 6-8 a day when symptoms worse	19
for wheeze or breathlessness	19
inhale 2 puffs when required for breathing	19
one puff as required, max 8 puffs in 24 hours	19
One puff to be Inhaled as needed, up to maximum of 8 puffs a day	19
one puff to be inhaled when symptoms occur, up to a maximum of 12 puffs per day.	19
one puff to be taken when required (max 8 puffs a day)	19
1 puff as required, up to 8 per day	19
AS REQUIRED.	19
Inhale ONE puff when required, max 16 puffs in 24hours with minimum dosage interval of 5 minutes	19
One puff as needed as a reliever. Up to a maximum of 12 puffs per day. As per GINA guidelines.	19
One Puff To Be Inhaled as reliever of symptoms as needed maximum 8 puffs per day	19
1-2 inhalations as directed	18
TWO PUFFS ASD	18
Two Puffs To Be Inhaled ASD	18
to use as a preventer and as a reliever for 4 weeks then review by carly no more than 8 inhalations per day.	18
TWO puffs TD - extra doses as needed	18
USE 1 PUFF AS NEEDED	18
use 2 puffs twica aday. maximum use 12 puffs	18
TO PREVENT CHEST SYMPTOMS	18
UP TO 8 PUFFS PER DAY	18
1 PUFF(S) WHEN REQUIRED FOR WHEEZE OR MAXIMUM 10 PUFF(S) A DAY	18
1-2 PUFF WHEN REQUIRED	18
2 PUFFS AS NEC NO MORE THAN 12 PUFFS A DAY	18

OPRI PROTOCOL

Inhale ONE or TWO as needed. Maximum 8 doses per day	18
INHALE TWO PUFFS AS AND WHEN NEEDED	18
One dose twice a day, upto additional 6 doses as reliever doses	18
One Or Two Puffs To Be Inhaled as needed for wheezing symptoms	18
one puff as and when required (max 12 per day)	18
One Puff To Be Inhaled as required, maximum 6 puffs at a time	18
ONE puff to be inhaled Each Day, plus additional puffs as needed up to a total of 8 puffs in 24 hours.	18
Take one puff when required	18
1 PUFF AS NEEDED WHEN WHEEZY	18
1-2 puffs as required. Max 6-8 a day	18
1-2 QID WHEN REQUIRED	18
one or two puffs to be inhaled as needed up to 8 puffs in a day	18
One Puff To Be Inhaled Each Day plus as needed (maximum 12 puffs a day)	18
Take 1 puff with symptoms. Do not exceed 6 puffs in a single occasion. Do not exceed 12 puffs in 24 hours.	18
to be used PRN as per respiratory consultant	17
Two Puffs To be Taken on PRN basis - as reliever	17
UP TO 6 TIMES A DAY AS NEEDED	17
up to 8 puffs a day if needed.	17
Two puffs to be inhaled when needed.	17
UP TO 8 PUFFS A DAY AS DIRECTED	17
1 DOSE AS REQUIRED FOR BREATHING PROBLEMS OR COUGH	17
1 puff per day and up to 6 doses per day for When Required	17
1 PUFF WHEN REQUIRED UP TO 8 PUFFS IN A DAY.	17
As Required - Don't switch from Symbicort 200/6	17
INHALE 1/2 DOSES AS NEEDED	17
INHALE ONE PUFF AS NEEDED	17
One Puff As Required Up To a Maximum of 8 A Day (AIR Asthma Plan)	17
one puff to be inhaled as and when required up to 8 puffs in total per day	17
One puff to be used when required as a reliever, maximum 8 puffs per day	17
One Puff when required up to 12 puffs per day AIR therapy	17
take as needed (no more than 8 puffs a day)	17
1 AS REQUIRED (UP TO 8 PER DAY)	17
1 PUFF TAKE AS REQUIRED	17
4puffs a day as needed	17
inhale 1 puff when you get asthma symptoms - if needing more than 6-8 puffs in 1 day, consult GP	17
INHALE ONE PUFF PRN	17
One puff 'as required' for asthma symptoms - maximum of 8 inhalations in 24 hours if required	17
One puff to be inhaled as necessary-if needed more than x3 a week please inform Julie	17
Two puff as directed by consultant	16
ONE OR 2 PUFF AS DIRECTED	16
up to 4 puffs day	16

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up to 8 puffs a day as per Resp	16
UP TO 8 RESCUE PUFFS DURING THE DAY IF REQUIRED	16
Use up to 8 times a day as per Hospital letter	16
TWO TO BE TAKEN WHEN NECESSARY	16
up to 8 inhalations per day	16
use as required max 8 puffs in 24 hours	16
1 -8 PER DAY AS REQUIRED	16
1 puff as needed maximum 8 per day	16
1 PUFF AS REQUIRED FOR RELIEF OF SYMPTOMS, INCREASED IF NECESSARY UP TO 6 PUFFS AS REQUIRED, MAX 8 PUFFS PER DAY	16
1 inhalation as needed. If symptoms persist take another inhalation. No more than 6 inhalations should be taken on one single occasion. Max 8 per day. Can go up to 12 on a temporary basis but if needing more than 8 seek medical attention urgently.	16
INHALATION AS REQUIRED	16
One - Two Puffs To Be Inhaled - maximum of 8-12 inhalations in 24 hours. Please rinse mouth after use.	16
One puff as required - max 8 puffs per 24 hrs	16
One puff to be inhaled as needed. To be also used as reliever therapy. No more than 8 puffs in one day.	16
One puff when needed during worsening Rinse mouth following inhalation	16
RELIEVER THERAPY: ONE puff to be used ONLY when required. Maximum of SIX puffs at any one time. Maximum of EIGHT puffs per day. If you use more than 2-3 puffs per week regularly please book a respiratory review appointment	16
take 1 puff as needed. no more than 8 puffs in a day	16
take a dose as needed up to 8 puffs a day.	16
To be used as advised by chest clinic - max x8 puffs a day	16
1 PUFF + AS REQUIRED	16
1-2puffs prn(max 10puffs in 24hrs)	16
As needed upto 8 puffs/day	16
inhale as needed. Not to exceed 8 puffs in 24 hrs	16
one dose as needed max 8 per day	16
One Puff To Be Inhaled when required (max 8 puffs in 24hrs)	16
Take as required	16
up to 6 puffs in 24h or as needed	15
1 dose as needed max 8 per day	15
1 inhalation as needed for symptom relief, no more than 6 inhalations at any one time (Do not exceed 12 puffs in 24hrs)	15
1 puff as needed, max 8 in 24 hours	15
1 puff up to 8 times a day	15
AIR regime. 1 puff as required for relief of symptoms, up to 8 puffs per day	15
as a reliever upto to 6 times a day - see 02-11-21	15
AS PREVENTER AND RELIEVER	15
Inhale 1 puff as needed . maximum 8 puffs in 24 hrs	15
Inhale ONE dose up to 10 times a day as needed for asthma symptoms	15
One Puff as Required for Relief of Symptoms, Max. 8 Puffs/day - AIR	15
One Puff To Be Inhaled as required for relief (no more than 12 inhalations in a day)	15
ONE PUFF TO BE TAKEN AS NEEDED	15

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one puff, as needed	15
Take ONE inhalation as needed in response to symptoms. If symptoms persist after a few minutes, an additional inhalation should be taken. Not more than 6 inhalations should be taken on any single occasion.	15
1 PUFF AS NEEDED - PLEASE MAKE APPOINTMENT FOR ASTHA REVIEW	15
1-2 INHALATIONS UP TO 8 INHALATIONS IN 4 DIVIDED DOSES A DAY	15
and up to max 12 puffs (altogether) per day for extra relief of symptoms	15
Inhale ONE puff when required for symptoms - maximum EIGHT puffs per day	15
One Puff To Be Inhaled when needed up to Six TIMES A Day	15
one to be used as required	15
Take ONE to TWO puffs when required (maximum 8 puffs/24 hrs)	15
inhale 2 doses as directed	14
ONE OR TWO PUFFS TO BE INHALED AS DIRECTED	14
two puffs - prn as required	14
use one puff as needed- no more than 8 in a day	14
Use One puff when required as a Reliever . Not more than 8puffs/day	14
use 1-2 puffs, max 8/day. Please discard after open for 3 months.	14
use one puff if wheeze and up to 8 puffs per day	14
1 puff as needed for symptom relief as per GINA step 1. Maximum 8 puffs a day	14
1 puff as required - up to 8 puffs per day - rinse mouth after use	14
1-2 puffs as needed then as required up to 8 puffs in 24 hours until cough clears	14
2 PUFFS AS REQUIRED OR MORE WHEN SYMPTOMATIC	14
as per AIR regime, 1-2 puff as needed for asthma symptoms, no more than 6 puffs at one time and if using more than 8 puffs a day seek medical advice. No more than 12 puffs in 24hours	14
Can use as reliver 1-2 puffs when required. Maximum 8 in 24 hours	14
inhale one dose as needed	14
Inhale One Puff When Required - Max 8 Puffs In 24 Hours	14
max 8 puffs in 24 hours	14
one dose to be take in response to symptoms - AIR regime - maximum 8 doses in 1 day	14
One Or Two Puffs To Be Inhaled as required prior to exercise of with exercise symptoms	14
one puff as needed - up to 8 puffs in 24 hours	14
One puff to be inhaled as needed. Up to max 8 puffs in one day	14
One Puff To Be Inhaled As Required upto 4 puff per day	14
one puff when required, maximum up to 8 puffs in a day	14
take 1-2 puffs as required up to 8 puffs in 24 hrs	14
take as a reliever	14
Take One Puff as Required for Symptoms Max (8) Puffs/day - AIR	14
Take symbicort 1 puff as you need it for asthma symptoms Can take up to 6 puffs per day if needed	14
1 -4 INHALATIONS AS REQUIRED	14
2 PUFFS AS REQUIRED.	14
As a reliever, up to maximum to 12 puffs per day for limited time. (As per GINA guidelines)	14
Inhale 1 puff when needed up to 8 a day	14
INHALE ONE PUFF(S) WHEN REQUIRED UP TO 8 PUFFS IN 24 HOURS	14

OPRI PROTOCOL

One extra puff to be inhaled as needed if you have cough, breathlessness, wheeze, chest tightness (max total of 8 puffs a day)	14
ONE PUFF AS REQUIRE UP TO 12 DOSES IN ONE DAY: DUE ASTHMA REVIEW	14
One Puff To Be Inhaled with asthma symptoms up to max of 12 puff /day	14
take one puff as needed (max 12/day)	14
Use 1-2 doses as directed for Asthma	13
use as directed max dose 4 puffs in 24 hours	13
TAKE ONE TO TWO PUFFS AS DIRECTED	13
2 PUFFS AS DIRECTED.	13
TO USE AS NEEDED	13
Use as rescue up to FOUR puffs a day	13
When Required as per plan	13
1 puff up to 8x/day	13
1 puff as required, may take a second puff if needed. Maximum 8 puffs per day	13
2 puff ON as needed	13
2 SUCKS AS REQUIRED	13
8 puffs in 24 hours max	13
inhale one puff as required	13
inhaler 1 puff up to 8 times per day	13
One inhalation as needed for cough, wheeze or breathlessness, up to 8 per day (Max 12 in 24 hours)	13
one inhalation if required for relief of asthma symptoms upto maximum 8 inhalations per day (RELIEF TRIAL patient).	13
One Or Two Puffs To Be Inhaled ONLY when required	13
One puff as a reliever when required. Max 8 puffs/24hrs. Upto 12 puffs/24hrs can be used for a limited time, please book a review if using more than 8 puffs/24hrs	13
one puff as needed (max 8 puff in 24hrs)	13
One Puff as needed up to 6 times per day as a reliever	13
one puff as required for asthma symptoms, maximum 8/day	13
ONE PUFF as required, upto 8 puffs per day (NOT exceed 12 inhalations in 24hrs)	13
One Puff To Be Inhaled Each Day + One Puff when needed (Maximum 8puffs in 24hrs)	13
one puff to be inhaled when needed as per AIR regime	13
One puff to be inhaled when required. Maximum of 4 puffs in one day.	13
One suck when required for asthma, up to 8 times per day	13
take 2 doses reducing to 1 as symptoms improve. Can take additional puff if needed, max total of 8 puffs per day.	13
Take ONE puff as needed- AIR therapy	13
>use as required	13
1 puff as required max 8 puffs in 24 hours	13
1-2 puffs as needed extra as discussed	13
AIR regime	13
Inhale One Puff When Required. If your symptoms do not improve after a few minutes take another dose. Maximum of 6 doses on any single occasion and no more than 12 doses per day	13
one actuation as required for wheezing , breathlessness and coughing can be used upto 8 puffs in 24 hours	13
One inhalation as required for relief of symptoms; maximum 8 inhalations per day	13

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One puff 10 mins prior to exercising - maximum of 8 inhalations in 24 hours (see asthma action plan)	13
One Puff As needed in Response to Symptoms (Reliever Therapy) - Not More than 8pfs/day	13
one puff as required up to 8 puffs a day	13
ONE TO TWO DOSES AS REQUIRED	13
To Be Used As Maintenance Reliever Therapy	13
1 PUFF AS NEEDED Notes for patient: Please book an appointment with the nurse for an asthma review	12
Take two puffs as directed	12
1 PUFF AS NEEDED Notes for patient: Please book an appointment with the nurse for an asthma review	12
use as directed 2puffs	12
TAKE 1-4 PUFFS AS DIRECTED	12
1 PUFF(S) AS DIRECTED BY HOSPITAL CONSULTANT	12
1 OR 2 PUFF(S) AS DIRECTED	12
use 1 puff when required as AIR therapy.	12
use as preventor&reliever up to 12 puffs a day	12
WHEN REQUIRED (MAXIMUM 12 PUFFS IN 24 HOURS)	12
TWO DOSES WHEN REQUIRED	12
up to 12 doses in total over 24 hours	12
(also has 400/6 inhaler- UP TO 8 RESCUE PUFFS DURING THE DAY IF REQUIRED	12
1 inhalation as needed in response to symptoms. If symptoms persist an additional inhalation may be used (up to a maximum of 6 inhalations on single occasion).	12
1-2 INHALATIONS INCREASING UP TO 8 IN 4 DIVIDED DOSES IF NEEDED. KEEP SPARE INHALER IN THE FRIDGE UNTIL REQUIRED.	12
1OR2 PUFFS/DAY WHEN REQUIRED	12
2 AS REQUIRED	12
2PUFFS PRN	12
as a reliever - up to 4 puffs a day if needed.	12
AS REQUIRED FOR EXACERBATIONS	12
Asthma - AIR regime - 1 puff as required for relief of symptoms; repeat 1 puff if symptoms have not resolved after a few minutes but do not take more than 6 puffs at any one time. Maximum 8 puffs per day.	12
inhale 1 dose as needed -maximum 8 doses in 24 hrs	12
Inhale ONE puff when needed, up to a maximum of 8 puffs per day	12
inhale up to 8 puffs per 24hours	12
one or two puffs as required	12
one or two puffs when required	12
ONE PUFF TIWCE + ONE PUFF WHEN REQUIRED MAX 8PUFFS IN 24/HRS	12
one puff to be inhaled as required, if symptoms persist after a few minutes an additional inhalation should be taken. No more than 6 inhalations on one occasion	12
One puff to be inhaled up to 8 times a day	12
One Puff To Be Inhaled WHEN REQUIRED. Can take an extra puff when required up to total 8 puffs in 24hr	12
one to two puffs a day when needed	12
PRN1	12
TAKE 2 PUFFS PLUS AS NEEDED	12
take as required - up to 8 inhalation per day (GINA guidelines)	12

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TAKE ONE PUFF WHEN NEEDED	12
TAKE ONE TO 4 PUFFS BID WHEN REQUIRED TO CONTROL ASTHMA	12
- may take additional puffs to relieve symptoms (maximum 8 puffs per day)	12
1 inhalation as required for symptoms. maximum 8 inhalations per day	12
1 puff as required. Maximum 8 puffs in 24 hours. If using regularly needs review	12
1-2 puffs as required, up to 12/day	12
INHALE 1 DOSE AS NEEDED	12
one puff can be taken for relieving therapy if needed. Max 8 puffs in a day in total	12
One Puff To Be Inhaled When Required For Relief Of Symptoms, Maximum Eight (8) puffs a Day	12
TAKE 1-2 PUFFS AS REQUIRED	12
take 2 puffs when chest upset by aerosol sprays or perfumes, max 4 puffs in 24 hrs	12
Take one or two puffs as required to a maximum of 8 per day	12
Take two puffs reducing to one puff as symptoms controlled.	12
2 PUFFS AS DIRECTED Notes for dispenser: CMS asthma review required	11
1 PUFF(S) AS DIRECTED	11
TWO PUFF AS DIRECTED	11
One Or Two Puffs To Be Inhaled prn as directed by UCLH 20/12/21	11
2 puff asd	11
To use as AIR regime - 1-2 inhalations when required.	11
Two Puffs To Be Inhaled prn as per OPD letter	11
Upto 8 puffs a day, to use as required	11
Use as needed, up to 8 puffs in 24 hours.	11
use one puff prn max of 12 puff in 24hrs	11
use ONE to TWO puffs whenever required for symptoms, as advised by respiratory consultant. (this replaces blue inhaler)	11
Use to top up as required for symptom control	11
USE WHEN REQUIRED (MAXIMUM 12 PUFFS IN 24 HOURS)	11
USE 1 PUFF AS REQUIRED	11
use one inhalation as needed, up to 6 inhalations a day in response to symptoms. max 12 inhalations a day.	11
1 - 2 PUFFS + AS REQUIRED	11
1 or 2 puffs prn	11
1 puff as required for relief of symptoms, increased if necessary up to 6 puffs as required, max. 8 puffs per day;	11
1 SUCK PRN	11
4 puffs as required in 24hrs as a reliever	11
AIR regime to use if Symptomatic	11
AIR. Use one dose when you have symptoms up to a maximum 8/day	11
AS AND WHEN REQUIRED	11
inhale 1 puff as needed - using as needed therapy (AIR)	11
Inhale ONE puff when and if required, up to a total max of 8 puffs in 24 hrs	11
ONE DOSE WHEN REQUIRED	11
One Or Two Puffs To Be Inhaled when required. (unlicensed dose)	11
One puff as needed - maximum 8 puffs a day	11

OPRI PROTOCOL

One puff if needed maximum 8/day	11
ONE PUFF PRN	11
One Puff to be inhaled as required as AIR regime, up to Eight puffs max per day	11
One Puff To Be Inhaled as required as per AIR action plan	11
One Puff To Be Inhaled When Required, can be used total of 8 puffs in 24 hours if needed	11
one to two puff as needed	11
Reliever Dose, Up To x8 Puffs In 24 Hours	11
Take one or two puffs when required for breathing symptoms. Up to 8 puffs can be taken in 24 hours	11
take one puff . then additional puffs upto maximum 6 per day as needed for symptoms.	11
Take ONE Puff when required - maximum EIGHT per day	11
Take One-Two Puffs as and when you require to relieve asthma symptoms	11
To be used as a reliever	11
1 puff as required up to 8 per day for Asthma Symptoms	11
AIR regime- 1 puff for asthma symptoms as needed, if using 8 puffs a day seek medical review, no more than 12 puffs a day	11
Inhale ONE dose as required up to a maximum of 8 puffs per day	11
inhale one to two doses as needed	11
One - Two Puff To Be Inhaled Each Day as required, and rinse mouth after use	11
One Or Two Puffs To Be Inhaled as needed (upto a maximum of 8 puffs per day)	11
One Puff as Required for relief of symptoms, increased if necessary up to 6 puffs as required, max 8 puffs per day	11
One Puff To Be Inhaled As Required - do not exceed 8 puff per day	11
ONE PUFF WHEN NEEDED.	11
One to two Puffs To Be Inhaled as required, maximum 8 puffs in 24 hours, for asthma triggered by allergens	11
take one puff as required. up to 8 puffs in 24 hours	11
Take up to 8 puffs a day as needed for asthma	11
Inhale 1 or 2 puffs As directed	10
One Puff To Be Inhaled when needed as directed by respiratory	10
One Puff To Be Inhaled as directed	10
INHALE TWO PUFFS AS DIRECTED WHEN REQUIRED	10
1 INHALATION AS DIRECTED	10
TWO PUFFS WHEN REQUIRED MAX PUFFS EVERY DAY	10
Up to 8 puffs in 24 hours...not to exceed the recommended dose	10
USE 1-2 PUFFS AS NEEDED	10
Use on puff when needed	10
WHEN REQUIRED FOR WHEEZE	10
up to 8 puffs per day via spacer	10
use as instructed - 1 puff as required as reliever therapy up to max 8 puffs a day	10
(AIR) Inhale ONE puff PRN. Maximum 8 puffs in 24 hours	10
, with 1-2 puffs as needed up to a maximum of 8 puffs/day	10
1 dose as needed up to 8 times a day	10
1 inhalation b d plus as needed	10
1 puff as required up to 8 doses in 24 hours	10

OPRI PROTOCOL

1-2 INHALATIONS UP TO 8 INHALATIONS IN 4 DIVIDED DOSES A DAY Notes for patient: COPD check needed	10
1-2 puffs as both reliever & preventer inhaler	10
1-2 puffs as needed up to 8 puffs for 3 days max, rinsing mouth after	10
Inhale ONE dose when required in response to symptoms. (Please return your empty or unwanted inhalers to a pharmacy for disposal)	10
one puff + When Required	10
one puff as needed max 8 per day	10
one puff bed/ additional puffs in response to symptoms- max 8 total/ 24	10
ONE PUFF DB AND WHEN REQUIRED	10
One Puff To Be Inhaled as needed, up to 8 puffs per day.	10
One puff to be inhaled as needed. Up to max 12 puffs in one day	10
One Puff To Be Inhaled as Symbicort reliever therapy to a maximum of 8 puffs in 1 day	10
One Puff To Be Inhaled Each Day and as reliever	10
One Puff To Be Inhaled Each Day As Required	10
One Puff To Be Inhaled When needed as per respiratory 24.2.23	10
One puff to be inhaled when required. No more than 8 inhalations in a day.	10
One Puff To Be Inhaled when symptomatic/ max 8 puffs in 24 hours	10
One puff when required - max 8 puffs/day	10
one puff as needed up to six times per day	10
ONE TO TWO PUFFS TO BE INHALED AS REQUIRED	10
PRN 1 PUFF	10
Reliever Therapy - one puff to be inhaled up to 6 puffs in response to your asthma symptoms'	10
reliever therapy one puff to be inhaled up to 6 puffs in response to asthma symptoms	10
TAKE ONE TO 4 PUFFS BID WHEN REQUIRED FOR SHORTNESS OF BREATH	10
1 -2 PUFFS AS REQUIRED 1P	10
1 PUFF WHEN REQUIRED AND UP TO 8 PUFFS	10
and up to an additional 4 puffs	10
ASTHMA: (budesonide / formoterol fumarate) take as required up to 8 doses in 24 hours	10
Inhale ONE or TWO doses as needed to relieve symptoms of cough, wheeze, breathlessness. Maximum 8 doses per day	10
ONE OR TWO PUFFS WHEN NEEDED	10
one puff as needed no more than 8 doses in 24hrs	10
One puff to be inhaled as needed for relief, with a maximum of 8 puffs in one day	10
One Puff To Be Inhaled As Required Up To Six Times A Day	10
One Puff To Be Inhaled When Required, can be used up to 8 puffs a day.	10
one puff when needed (AIR therapy)	10
reliever and maintenance therapy	10
Take one inhalation to be inhaled as needed, up to 6 inhalations in response to symptoms. Max 8 inhalations a day.	10