

Steps for Safe Use of ADASUVE®

ADASUVE is indicated for the acute treatment of agitation associated with schizophrenia or bipolar I disorder in adults.

ADASUVE can cause bronchospasm that has the potential to lead to respiratory distress and respiratory arrest. Patients with asthma, chronic obstructive pulmonary disease (COPD), or other lung disease associated with bronchospasm are at increased risk of bronchospasm.



Steps for Safe Use of ADASUVE	
 SCREEN	<ul style="list-style-type: none"> <input type="checkbox"/> Ask if patient is taking medication to treat asthma or COPD and/or check medical records <input type="checkbox"/> Ask if patient has a current diagnosis or history of asthma, COPD, or other lung disease, and/or check medical records <input type="checkbox"/> Examine patients (including chest auscultation) for respiratory abnormalities (e.g., wheezing) <input type="checkbox"/> Do not use in patients with acute respiratory signs or symptoms; with a current diagnosis or history of asthma, COPD, or other lung disease associated with bronchospasm; or with current use of medications to treat airways disease, such as asthma or COPD
 COUNSEL	<ul style="list-style-type: none"> <input type="checkbox"/> Counsel patient/caregiver on potential for bronchospasm that may occur after dosing and the need for them to report symptoms immediately
 MONITOR	<ul style="list-style-type: none"> <input type="checkbox"/> Monitor patient every 15 minutes for at least 1 hour after treatment for signs and symptoms of bronchospasm including chest auscultation <input type="checkbox"/> Ask patient every 15 minutes about any difficulty breathing
 If bronchospasm occurs MANAGE	<ul style="list-style-type: none"> <input type="checkbox"/> Treat bronchospasm with an inhaled short-acting beta-agonist bronchodilator (e.g., albuterol) <input type="checkbox"/> If medically necessary, provide additional therapy for bronchospasm per asthma guidelines

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