COPD Multidisciplinary **Care Checklist Template**

This form requires completion by the multidisciplinary team, including medical, nursing and allied health staff, aligning with the **COPD Clinical Care Standard**[1] and **The COPD-X Plan: Australian and New Zealand Guidelines for the Management of Chronic Obstructive Pulmonary Disease**[2].

Hospital Admission for COPD Exacerbation

Patient Name: _____

DOB: _____ /_____ /_____

URN: _____

Address: _____

In Hospital

Task: Smoking/vaping cessation support

Record smoking/vaping status for tobacco or other substances, offer cessation advice (Ask, Advise, Help model), pharmacotherapy, and referral

☐ Yes ☐ No ☐ Declined ☐ N/A ☐ Quitline referral ☐ NRT offered

Comments: _____

Sign: _____ Designation: _____ Date: _____ /_____ /_____

Task: Inhaler technique assessment

Assess and document inhaler technique, provide further education and assessment if required

☐ Competent ☐ Needs follow-up ☐ Declined ☐ N/A

Comments: _____

Sign: _____ Designation: _____ Date: _____ /_____ /_____

Task: Pharmacist medication review

Review current medications and provide education on correct use and inhaler device technique

☐ Yes ☐ No ☐ N/A

Comments: _____

Sign: _____ Designation: _____ Date: _____ /_____ /_____

Task: Spirometry referral or assessment

Confirm diagnosis and severity, or refer if unavailable

☐ Referred ☐ Completed ☐ Previously done ☐ Declined ☐ Attended as inpatient ☐ N/A

Comments: _____

Sign: _____ Designation: _____ Date: _____ /_____ /_____

Task: Oxygen therapy / NIV documented

Deliver controlled oxygen therapy and provide NIV if indicated under medical direction only

☐ Document target SpO_2 ☐ NIV provided ☐ Not indicated ☐ Reason documented

Comments: _____

Sign: _____ Designation: _____ Date: _____ /_____ /_____

Lung Foundation Australia

Discharge Planning

Task: GP appointment arranged

Arrange follow-up assessment with primary care or specialist within 7 days

☐ Recommended ☐ Booked ☐ Declined ☐ N/A Date of booking: ____ /____ /____

Comments: _____

Sign: _____ Designation: _____ Date: ____ /____ /____

Task: COPD Action Plan

Provide or update COPD Action Plan with clear instructions

☐ Provided ☐ Updated ☐ GP follow-up advised

Comments: _____

Sign: _____ Designation: _____ Date: ____ /____ /____

Task: Pulmonary rehabilitation referral

Refer, educate on benefits, and aim to commence within 4 weeks of discharge

☐ Referred ☐ Active client ☐ Declined - reason: _____ ☐ N/A Service: _____

Comments: _____

Sign: _____ Designation: _____ Date: ____ /____ /____

Task: Vaccination status

Discuss influenza, pneumococcal, and COVID-19 vaccination

☐ Influenza ☐ Pneumococcal ☐ COVID-19 ☐ Other ☐ N/A

Comments: _____

Sign: _____ Designation: _____ Date: ____ /____ /____

Education & Support

Task: My COPD Hospital Stay Checklist

Explain checklist to patient and encourage to complete

☐ Provided ☐ Declined ☐ N/A

Comments: _____

Sign: _____ Designation: _____ Date: ____ /____ /____

Task: Transitional care program referral

Consider referral to transitional care program to reduce risk of readmission

☐ Referred ☐ Declined ☐ Active client ☐ N/A

Comments: _____

Sign: _____ Designation: _____ Date: ____ /____ /____

Task: Follow-up care plan documented

Send discharge summary and arrange follow-up assessment within 7 days

☐ Discharge summary sent ☐ GP notified ☐ Specialist & allied health referral ☐ Provided information

Comments: _____

Sign: _____ Designation: _____ Date: ____ /____ /____

For your patients requiring additional self-management support on discharge, refer to Lung Foundation Australia's Respiratory Care Nurses who provide telephone support to patients and carers across Australia. This service provides practical information and guidance about their lung disease, personal care and management, and referral to local support services where necessary. This free and confidential service is available Monday to Friday 8am – 4.30pm (AEST) (excl. public holidays).

Freeall **1800 654 301** or email **enquiries@lungfoundation.com.au**

[1] Australian Commission on Safety and Quality in Health Care. Chronic Obstructive Pulmonary Disease Clinical Care Standard. Sydney: ACSQHC; 2024.
[2] Yang I, George J, McDonald C, McDonald V, Ordman R, Goodwin A, et al. The COPD-X plan: Australian and New Zealand guidelines for the management of chronic obstructive pulmonary disease 2024. Version 2.75. [Internet]. Brisbane: Lung Foundation Australia; 2024. Available from: https://copdx.org.au/copd-x-plan