Peak flow meters and inhalers are important in both OSCE scenarios and real clinical practice! Inhaler technique is frequently suboptimal amongst patients with COPD and asthma, and it is important to take all opportunities to review their technique. Respiratory clinical nurse specialists are important members of the respiratory MDT and can help show patients (and you!) how to use all of the various devices.

How to use a metered dose inhaler:
- Wash your hands
- Either sit upright in a chair, or stand up straight
- Remove the mouth piece cap
- Take 2 deep breaths in and out
- Shake the inhaler
- Breath out
- Put the inhaler into your mouth in an upright position and make sure that there is a good seal between lips and mouthpiece
- Start breathing in slowly and immediately press the inhaler button
- Breath in deeply and slowly
- Hold your breath for 10 seconds
- Repeat as many times as has been prescribed
  - Wait a 30 seconds until giving the next dose
- If using steroids, must use mouth wash to rinse out your mouth after use

How to use a spacer:
- Wash hands
- Firstly, explain why you use spacer devices. Can help to deliver the medicine in the lungs even more efficaciously, with fewer side effects in the mouth when used with inhaled steroids
- Assemble the spacer
- Remove the cap from the inhaler
- Shake the inhaler and insert into the end of it
- Put your mouth securely around the mouth piece, ensuring your lips form a tight seal
  - Put at a 45 degree angle when child is <2 and a half years old
- Press the inhaler to release the contents into the spacer
- Either take one slow and deep breath in and hold for 10 seconds, or if this is not possible (e.g. too short of breath) then take 5 deep breaths in and out through the mouth piece
- Repeat as many times as has been prescribed
  - Wait a 30 seconds between doses
- Looking after the spacer:
  - Should wash spacer with warm water and soap and leave to drip dry before using for the first time
  - Repeat every month
  - Make sure you don’t towel dry as this will change the static in the spacer so it won’t work as well
  - Should change every 6 months to 1 year
- Each spacer fits different devices so it is important to have the right one
• Use with a face mask if very young child (< 2 ½)
• If using steroids, must use mouth wash to rinse out your mouth after use

How to use a peak flow meter
• Unpack the spacer and insert the washable mouthpiece into the end
• Stand up straight
• Ensure that the 'marker' in the peak flow gauge is moved to the zero position
• Hold the peak flow horizontally
• Take a deep breath in
• Form a good seal around mouthpiece with lips
• Blow out through the mouthpiece as **hard and fast** as possible
• Take the reading from the meter - this is the 'peak expiratory flow rate'
• Repeat 2 further times and take the **best** reading
• Compare the patient's reading with the peak flow charts, according to age, gender and height