

Generic	Brand & Company	Strength	Form	Dosage
ANTICHOLINERGIC				
ipratropium bromide	— various	0.02%	soln	Children: Not recommended. Adults: 500mcg orally by nebulization 3–4 times daily; separate doses by 6–8hrs
	Atrovent HFA Boehringer Ingelheim	17mcg	MDI	Children: Not established. Adults: 2 inh 4 times daily; max 12 inh/day
β ₂ -AGONIST				
albuterol sulfate	— various	0.5%	soln	Children: Use other forms Adults: Use nebulizer. 2.5mg 3–4 times daily.
		0.083%	soln	Asthma: <4yrs: Not recommended.
		90mcg	MDI	≥4yrs: 2 inh every 4–6hrs as needed; 1 inh every 4hrs may suffice EIB: 2 inh 15min before exercise
	ProAir HFA Teva	90mcg	MDA	Asthma: <4yrs: Not established. ≥4yrs: 2 inh every 4–6hrs; 1 inh every 4hrs may suffice
	Proventil HFA Merck	90mcg	MDA	EIB Prevention: ≥4yrs: 2 inh 15–30min before exercise
levalbuterol HCl	Xopenex Sunovion	0.31mg/3mL, 0.63mg/3mL, 1.25mg/3mL	soln	<6yrs: Not recommended. 6–11yrs: 0.31mg by nebulization 3 times daily; max 0.63mg 3 times daily
	Xopenex Concentrate Sunovion	1.25mg/0.5mL	soln	>12yrs: Initially 0.63mg 3 times daily at 6–8hr intervals; may increase to 1.25mg 3 times daily.
levalbuterol tartrate	Xopenex HFA Sunovion	45mcg	MDI	<4yrs: Not established. ≥4yrs: 2 inh every 4–6hrs; 1 inh every 4hrs may suffice
metaproterenol sulfate	— various	5%	soln	<6yrs: Not recommended. 6–12yrs: Use nebulizer. 0.1–0.2mL 3–4 times daily, up to every 4hrs. ≥12yrs: 3–4 times daily (see literature).
		0.4%, 0.6%	soln	Children: Not recommended. Adults: Use intermittent positive pressure breathing apparatus (IPPB): 2.5mL 3–4 times daily; up to every 4hrs
LONG-ACTING β ₂ -AGONIST				
formoterol fumarate	Foradil Aerolizer Merck	12mcg	dry pwd	Asthma: <5yrs: Not recommended. ≥5yrs: 1 inh every 12hrs; max 2 doses/day EIB Prevention: ≥5yrs: 1 inh at least 15min before exercise
salmeterol xinafoate	Serevent Diskus GlaxoSmithKline	50mcg	dry pwd	Asthma: <4yrs: Not recommended. ≥4yrs: 1 inh twice daily EIB Prevention: ≥4yrs: 1 inh at least 30min before exercise; max 2 doses/day
MAST CELL STABILIZER				
cromolyn sodium	— various	20mg/2mL	soln	<2yrs: Not recommended. ≥2yrs: Use nebulizer. 20mg 4 times a day.
STEROID				
beclomethasone dipropionate	Qvar Teva	40mcg, 80mcg	MDI	<5yrs: Not recommended. ≥5–11yrs: Initially 40mcg twice daily; max 80mcg twice daily Adults: Previously on bronchodilators alone: Initially 40–80mcg twice daily. Previously on inhaled corticosteroids: Initially 40–160mcg twice daily. Max 320mcg twice daily.
budesonide	Pulmicort Flexhaler AstraZeneca	90mcg, 180mcg	dry pwd	<6yrs: Not recommended. 6–17yrs: Initially 180mcg twice daily; may start at 360mcg twice daily; max 360mcg twice daily ≥18yrs: Initially 360mcg twice daily; 180mcg twice daily may suffice; max 720mcg twice daily
	Pulmicort Respules AstraZeneca	0.25mg/2mL, 0.5mg/2mL, 1mg/2mL	susp	<6mos: Not recommended. 6–12mos: Not established. 12mos–8yrs: Previously on bronchodilators alone: 0.5mg once daily or 0.25mg twice daily. Previously on inhaled corticosteroids: 0.5mg once daily or 0.25mg twice daily; max 1mg/day. Previously on oral corticosteroids: 0.5mg twice daily or 1mg once daily.

(continued)

Generic	Brand & Company	Strength	Form	Dosage
STEROID (continued)				
ciclesonide	Alvesco <i>Sunovion</i>	80mcg, 160mcg	MDA	<12yrs: Not recommended. ≥12yrs: <i>Previously on bronchodilators alone:</i> initially 80mcg twice daily, max 160mcg twice daily. <i>Previously on inhaled corticosteroids:</i> Initially 80mcg twice daily; max 320mcg twice daily. <i>Previously on oral corticosteroids (see literature):</i> 320mcg twice daily.
fluticasone propionate	Flovent Diskus <i>GlaxoSmithKline</i>	50mcg, 100mcg, 250mcg	dry pwd	<4yrs: Not recommended. 4–11yrs: <i>Previously on bronchodilators alone or on inhaled corticosteroids:</i> Initially 50mcg twice daily; max 100mcg twice daily. ≥11yrs: <i>Previously on bronchodilators alone:</i> initially 100mcg twice daily; max 500mcg twice daily. <i>Previously on inhaled corticosteroids:</i> initially 100–250mcg twice daily; max 500mcg twice daily. <i>Previously on oral corticosteroids (wean gradually):</i> initially 500–1000mcg twice daily; max 1000mcg twice daily.
	Flovent HFA <i>GlaxoSmithKline</i>	44mcg, 110mcg, 220mcg	MDI	<4yrs: Not recommended. 4–11yrs: 88 mcg twice daily. ≥12yrs: <i>Previously on bronchodilators alone:</i> Initially 88mcg twice daily; max 440mcg twice daily. <i>Previously on inhaled steroids:</i> Initially 88–220mcg twice daily; max 440mcg twice daily. <i>Previously on oral steroids:</i> Initially 440mcg twice daily; max 880mcg twice daily.
mometasone furoate	Asmanex Twisthaler <i>Merck</i>	110mcg, 220mcg	dry pwd	<4yrs: Not recommended. 4–11yrs: 110mcg once in PM; max 110mcg/day. ≥12yrs: <i>Previously on bronchodilators alone or inhaled steroids:</i> Initially 220mcg once in PM; max 440mcg/day (as 2 inh once daily or 1 inh twice daily). <i>Previously on oral steroids:</i> Initially 440mcg twice daily; max 880mcg/day.

STEROID/LONG-ACTING β_2 -AGONIST

budesonide/ formoterol fumarate dihydrate	Symbicort <i>AstraZeneca</i>	80/4.5, 160/4.5 (mcg)	MDI	≥12yrs: 2 inh twice daily; max 160/4.5 twice daily
fluticasone propionate/ salmeterol	Advair Diskus <i>GlaxoSmithKline</i>	100/50, 250/50, 500/50 (mcg)	dry pwd	<4yrs: Not recommended. 4–11yrs: 1 inh of 100/50 twice daily ≥12yrs: 1 inh of 100/50, 250/50, or 500/50 twice daily; max 1 inh of 500/50 twice daily
	Advair HFA <i>GlaxoSmithKline</i>	45/21, 115/21, 230/21 (mcg)	MDI	<12yrs: Not recommended. ≥12yrs: 2 inh of 45/21, 115/21, or 230/21 twice daily; max 2 inh 230/21 twice daily
mometasone furoate/ formoterol fumarate	Dulera <i>Merck</i>	100/5, 200/5 (mcg)	MDI	<12yrs: Not recommended. ≥12yrs: <i>Previously on medium dose of steroid:</i> Use 100/5. <i>Previously on high dose of steroid:</i> Use 200/5. <i>Both:</i> 2 inh twice daily.

NOTES

Key: dry pwd = dry powder for inhalation; EIB = exercise induced bronchospasm; MDI = metered-dose inhaler; MDA = metered dose aerosol; soln = solution for inhalation; susp = suspension for inhalation (Rev. 3/2014)