

# **Rx REMEMBER**

**REPLENISH  
Emergency Department Asthma  
Program (EDAP)  
PRE-PACKS**



**FOR MEDICATION SUPPLIES  
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# **REMEMBER**

**Use Emergency Department  
Asthma Program (EDAP)  
GUIDELINES**



**FOR ED PATIENTS AGE 4 AND UP  
PRESENTING WITH ASTHMA OR  
ASTHMA RELATED EXACERBATION**

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