# COPD: patient education guide

A plain-language guide to symptoms, diagnosis, care planning and Ontario resources.

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**General health information only. This guide does not diagnose a condition or replace an assessment by a qualified clinician.**

## Start with the big picture

COPD is a group of lung conditions that can make airflow harder. Chronic bronchitis and emphysema are common patterns. Symptoms can be influenced by smoke, workplace or environmental exposures, asthma, infections, genetics and other health conditions.

## What you may notice

- Breathlessness with activity or at rest
- Persistent cough or cough with mucus
- Wheeze or chest tightness
- Reduced stamina, fatigue or sleep disruption
- A sustained change in your usual symptoms, sometimes called a flare-up

## How COPD is assessed

A clinician may review your symptom pattern, exposures, medical history, medicines, function, flare-ups and family history. Post-bronchodilator spirometry is the key breathing test used to confirm airflow obstruction when COPD is suspected. Chest imaging or other tests may be considered to look for another explanation or a complication.

## Care topics to discuss

- Smoking and vaping cessation support without blame
- Inhaler device choice, technique and medication review
- Vaccines and infection prevention
- Physical activity, pulmonary rehabilitation and energy conservation
- Written action plan, oxygen assessment and respiratory referral when appropriate
- Sleep, mood, substance use, nutrition and other conditions

## Medication classes are discussion topics only

A clinician or pharmacist may discuss short-acting bronchodilators, long-acting bronchodilators such as LAMA or LABA classes, selected inhaled corticosteroid-containing therapy, and other options for particular situations. This guide does not recommend a medicine or dose. Bring all inhalers and devices to a review.

## When to get help

Call 911 for severe or rapidly worsening breathing difficulty, blue or grey lips, inability to speak in full sentences, new confusion or extreme drowsiness, collapse, severe chest pain or a large amount of blood. Contact your care team promptly for a sustained increase in breathlessness, cough or mucus, fever or a flare-up that is not settling.

## Ontario care and coverage

OHIP generally covers medically necessary insured physician and hospital services, but the exact test, setting and billing rules matter. Prescriptions outside hospital are generally not covered by OHIP. ODB, OHIP+, Trillium, Exceptional Access and private insurance coverage depend on eligibility and the exact product. Pulmonary rehabilitation and allied-health programs may be public, program-dependent or privately paid. Confirm fees, referral requirements and eligibility directly.

## Sources and limitations

Canadian guidance is listed first. U.S., U.K. and global sources are comparison resources. Links were verified on 20 November 2026. Source content is copyrighted and is summarized in original wording.


Ontario Health COPD quality standard: https://www.ontariohealth.ca/clinical/quality-standards/chronic-obstructive-pulmonary-disease

Canadian Thoracic Society COPD guideline: https://cts-sct.ca/guideline-library/

Lung Health Foundation COPD: https://lunghealth.ca/lung-disease/copd/

HealthLink BC COPD: https://www.healthlinkbc.ca/healthwise/copd-chronic-obstructive-pulmonary-disease

Health811 and Ontario care: https://www.ontario.ca/page/your-health

Ontario prescription-drug coverage: https://www.ontario.ca/page/get-coverage-prescription-drugs

NHLBI COPD diagnosis: https://www.nhlbi.nih.gov/health/copd/diagnosis

CDC About COPD: https://www.cdc.gov/copd/about/

American Thoracic Society pulmonary rehabilitation: https://www.thoracic.org/advocacy-patients/patient-resources/pulmonary-rehabilitation

NICE NG115 COPD guideline: https://www.nice.org.uk/guidance/ng115

GOLD 2026 report: https://goldcopd.org/2026-gold-report-and-pocket-guide/