

Asthma Action Plan

Name _____

Date _____

It is important in managing asthma to keep track of your symptoms, medications, and peak expiratory flow (PEF). You can use the colors of a traffic light to help learn your asthma medications:

- A. GREEN means GO - use preventive (anti-inflammatory) medicine
- B. YELLOW means CAUTION - use quick-relief (short-acting bronchodilator) medicine in addition to preventive medicine
- C. RED means STOP! - get help from a doctor

a. Your GREEN ZONE is _____ 80 to 100% of your personal best. GO!

Breathing is good with no cough, wheeze, or chest tightness during work, school, exercise, or play.

ACTION:

- Continue with medications listed in your daily treatment plan.

b. Your YELLOW ZONE is _____ 50 to less than 80% of your personal best.

CAUTION!

Asthma symptoms are present (cough, wheeze, chest tightness).

Your peak flow number drops below _____ or you notice:

- Increased need for inhaled quick-relief medicine
- Increased asthma symptoms upon awakening
- Awakening at night with asthma symptoms
- _____

ACTIONS:

- Take _____ puffs of your quick-relief (bronchodilator) medicine _____ . Repeat _____ times.
- Take _____ puffs of _____ (anti-inflammatory) _____ times/day.
- Begin/increase treatment with oral steroids: Take _____ mg of _____ every a.m. _____ p.m. _____.
- Call your doctor (phone) _____ or emergency room _____.

c. Your RED ZONE is _____ 50% or less of your best. DANGER!!

Your peak flow number drops below _____, or you continue to get worse after increasing treatment according to the directions above.

ACTIONS:

³ Take _____ puffs of your quick-relief (bronchodilator) medicine_

Repeat _____ times.

³ Begin/increase treatment with oral steroids: Take _____ mg now.

³ Call your doctor now (phone) _____. If you cannot contact your doctor, go directly to the emergency room (phone) _____.

Other important phone numbers for transportation _____.

AT ANY TIME, CALL YOUR DOCTOR IF:

- Asthma symptoms worsen while you are taking oral steroids, or
- Inhaled bronchodilator treatments are not lasting 4 hours, or
- Your peak flow number remains or falls below _____ in spite of following the plan.

Daily Treatment Plan

Albuterol

Corticosteroid MDI

Serovent

Singulaire

Physician Signature _____

Patient's/Family Member's Signature _____