



Asthma Action Plan

Name: _____

Emergency Contact: _____

Phone Numbers: _____

Physician/ Health Care Provider: _____ Phone Number: (____) _____

Physician Signature: _____ Date: _____

Triggers	
<input type="checkbox"/> Air Pollution	<input type="checkbox"/> Animals
<input type="checkbox"/> Colds	<input type="checkbox"/> Dust
<input type="checkbox"/> Exercise	<input type="checkbox"/> Foods
<input type="checkbox"/> Smoke	<input type="checkbox"/> Smoke
<input type="checkbox"/> Weather	

Exercise
1. Medications before exercise & dose amount: _____
2. Modifications to Exercise: _____

Green Zone: Doing Well

- * Breathing is good
- * No cough or wheezing
- * Attending school or work
- * Playing and active
- * Sleeping well
- * Taking regular medications

PEAK FLOW METER PERSONAL BEST= _____

Control Medications

Medication	How Much To Take	When To Take It
_____	_____	_____
_____	_____	_____
_____	_____	_____

Peak Flow Meter
More than 80% of personal best or _____

Yellow Zone: Getting Worse

- * Some breathing difficulties
- * Cough, wheeze, tight chest
- * Missing some school or work
- * Difficulty playing and being active
- * Waking up at night
- * Avoid Triggers
- * Monitor Peak Flow Carefully
- * Taking regular medications

Contact Physician if using quick relief more than 2 times per week.

Continue control medications and add:

Medication	How Much To Take	When To Take It
_____	_____	_____
_____	_____	_____
_____	_____	_____

Peak Flow Meter
Between 50-80% of personal best or _____ to _____

Red Zone: Medical Alert

- * Don't Panic, but your asthma is out of control
- * Breathing hard and fast
- * Medicine is not helping
- * Can not work or play
- * Avoid Triggers

Ambulance/Emergency Phone Number: _____

Continue control medications and add:

Medication	How Much To Take	When To Take It
_____	_____	_____
_____	_____	_____
_____	_____	_____

Peak Flow Meter
Between 50-80% of personal best or _____ to _____

- Go to the hospital or call for an ambulance if:**
- Still in the red zone after 15 minutes
 - If you have not been able to reach your physician/health care provider for help
 - _____

Call an ambulance immediately if the following danger signs are present

- Trouble walking/talking due to shortness of breath
- Lips or fingernails are blue