Asthma action plan

for patients over 12 years old

Take this sheet to your next visit and fill out with your provider.

Patient Name:	Date:
Date of Birth:	Peak Flow: □ Predicted □ Personal Best

When indicated, use a spacer with your inhalers.

Green Zone

Good to go!

 No asthma symptoms – able to do usual activities and sleep without having symptoms like cough.

Peak Flow: greater than:	(80% or more of my best pe	ak flow)			
Avoid known triggers:					
1. Take controller medicines every day					
Medicine	Amount	How often			
2. Take these medicines prescribed by the doctor (i.e. antihistamines and nasal sprays)					
Medicine	Amount	How often			
3. Take this medicine 15 minutes before exercise (prime it first, if needed)					
Medicine	Amount	How often			

Yellow Zone

Caution!

- Asthma symptoms such as coughing, wheezing, shortness of breath or chest tightness may be occurring. If not better in 24-48 hours, call your doctor or nurse.
- Waking at night due to wheeze or cough more than 2 times a month
- Cannot do everyday activities
- Using quick relief medicine more than 2 times a week (not counting use before exercise)

Peak Flow:	to	(50% to 79% percent or more of my best peak flow)				
Remember: Keep taking your Green Zone medicines.						
1. Start rescue medicine						
Medicine (prime it first, if needed)		Amount	How often			
2. If not improving or symptoms worsen, increase or add the following						
Medicine			Amount	How often		

Sed Zone

Danger!

- Asthma symptoms may be severe or not responding to yellow zone treatments.
- Severe shortness of breath, fast and hard breathing, and non-stop coughing.

Peak Flow: less than	(50% of my best peak flow)						
1. Increase rescue medicine							
Medicine		Amount	How often				

Notify your prescriber's office while administering the treatments. Call 911 if unable to talk to doctor or nurse right away. OR Go to nearest emergency room.

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