

# Asthma Action Plan

I FEEL GREAT



Name: \_\_\_\_\_

MR #: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Provider: \_\_\_\_\_

## Green Zone:

Lungs are NORMAL. No Cough. No Wheeze. No Chest Tightness.

Peak Flow more than \_\_\_\_\_

Take this medicine **EVERY DAY** to **PREVENT** asthma:

☐ Beclovent® ☐ Azmacort® \_\_\_\_\_, via \_\_\_\_\_, \_\_\_\_\_ times a day.  
☐ Cromolyn ☐ Flovent® \_\_\_\_\_ Dose Route Frequency

If there is cough, wheeze, or chest tightness **when exercising take:**

☐ Albuterol (Ventolin®, Proventil®) \_\_\_\_\_, via \_\_\_\_\_ 15-30 minutes before exercise or active play. Dose Route

Other Medication: \_\_\_\_\_

## Yellow Zone:

Watch out. Starting to Lose Control.

Peak Flow \_\_\_\_\_ to \_\_\_\_\_

Take this medicine to temporarily relieve asthma symptoms:

☐ Albuterol (Ventolin®, Proventil®) \_\_\_\_\_, via \_\_\_\_\_, \_\_\_\_\_ times a day. Dose Route Frequency

Increase preventive medication for \_\_\_\_\_ weeks.

☐ Beclovent ☐ Azmacort \_\_\_\_\_, via \_\_\_\_\_, \_\_\_\_\_ times a day.  
☐ Cromolyn ☐ Flovent® \_\_\_\_\_ Dose Route Frequency

Other Medicine: \_\_\_\_\_

*Call your doctor or advice nurse if you are more than 2 days in yellow zone!*

## Red Zone:

**AN ASTHMA FLARE HAS STARTED. TAKE ACTION NOW!**

Peak Flow under \_\_\_\_\_

To temporarily relieve asthma symptoms:

☐ Albuterol (Ventolin®, Proventil®) \_\_\_\_\_, via \_\_\_\_\_, \_\_\_\_\_ times a day. Dose Route Frequency

To shrink the swelling of the breathing tubes:

☐ Prednisone \_\_\_\_\_ mg tablets \_\_\_\_\_, take by mouth \_\_\_\_\_ times a day for \_\_\_\_\_ days.  
☐ Prednisolone \_\_\_\_\_ mg/5ml syrup \_\_\_\_\_ Dose Frequency

Increase preventive medicine for \_\_\_\_\_ weeks.

☐ Beclovent® ☐ Azmacort® \_\_\_\_\_, via \_\_\_\_\_, \_\_\_\_\_ times a day.  
☐ Cromolyn ☐ Flovent® \_\_\_\_\_ Dose Route Frequency

Other Medicine: \_\_\_\_\_

***CALL YOUR DOCTOR OR ADVICE NURSE! YOUR CHILD NEEDS TO BE SEEN!***

I am feeling bad





## GET MEDICAL CARE IMMEDIATELY IF:

- **Very Fast or Hard Breathing**
- **Sucking in the Stomach or Ribs to Breathe**
- **Breathing so Hard You Can't Walk or Speak**
- **Lips or Fingers Turn Blue**
- **Best effort on Peak Flow is less than \_\_\_\_\_**



## Using Symptoms to Determine Zones:

Most children over 5 or 6 years can use a *peak flow meter*. Finding out your child's **peak flow is the best** way to find out how bad (or good) your child's asthma is.

You can estimate if your child is in the green, yellow, or red zone by counting your child's breathing rate (the number of breaths taken in one minute) and watching for his or her early asthma symptoms.

### Green Zone by Symptoms:



- **No Coughing**
- **No Wheezing**
- **No Chest Tightness**

#### ➤ **Normal Breathing Rate at Rest:**

- 20-40 breaths per minute for an infant
- 18-30 breaths per minute for a toddler
- 16-25 breaths per minute for a school age child

### Yellow Zone by Symptoms:



- **Slight Cough**
- **Mild Wheeze**
- **Mild Chest Congestion**

- **Slight Chest Tightness**
- **Breathing rate at rest may be a little bit faster than normal**

### Red Zone by Symptoms:



- **Persistent Cough**
- **Persistent Wheeze**
- **Waking at Night due to Cough or Wheeze**
- **Sucking in Skin Between Ribs or Below Chest**

#### ➤ **Fast Breathing:**

- Over 50 breaths per minute for an infant
- Over 40 breaths per minute for a toddler
- Over 30 breaths per minute for a school age child.