Asthma Action Plan

Doing Well

- No cough, wheeze, chest tightness, or shortness of breath during the day or night
- Can do usual activities

And, if a peak flow meter is used,

Peak flow: more than ________
(80 percent or more of my best peak flow)

My best peak flow is: ________________

Before exercise

☐ 2 or 4 puffs ________ 5 to 60 minutes before exercise

Take these long-term control medicines each day (include an anti-inflammatory).

<table>
<thead>
<tr>
<th>Medicine</th>
<th>How much to take</th>
<th>When to take it</th>
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Asthma Is Getting Worse

- Cough, wheeze, chest tightness, or shortness of breath, or
- Waking at night due to asthma, or
- Can do some, but not all, usual activities

- Or-

Peak flow: ________ to ________
(60 to 79 percent of my best peak flow)

First

Add: quick-relief medicine—-and keep taking your GREEN ZONE medicine.

☐ 2 or 4 puffs, every 20 minutes for up to 1 hour
☐ Nebulizer, once

Second

If your symptoms (and peak flow, if used) return to GREEN ZONE after 1 hour of above treatment:
☐ Continue monitoring to be sure you stay in the green zone.

- Or-

If your symptoms (and peak flow, if used) do not return to GREEN ZONE after 1 hour of above treatment:

☐ Take: ____________________________ 2 or 4 puffs or Nebulizer
☐ Add: ____________________________ mg per day For _________ (3–10) days
☐ Call the doctor before/within ________ hours after taking the oral steroid.

Medical Alert!

- Very short of breath, or
- Quick-relief medicines have not helped, or
- Cannot do usual activities, or
- Symptoms are same or get worse after 24 hours in Yellow Zone

- Or-

Peak flow: less than __________
(50 percent of my best peak flow)

Take this medicine:

☐ ____________________________ 4 or 6 puffs or Nebulizer
☐ ____________________________ (short-acting beta2-agonist)
☐ ____________________________ mg
☐ ____________________________ (oral steroid)

Then call your doctor NOW. Go to the hospital or call an ambulance if:

- You are still in the red zone after 15 minutes AND
- You have not reached your doctor.

DANGER SIGNS

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

Take 4 or 6 puffs of your quick-relief medicine AND

Go to the hospital or call for an ambulance ___________________________ NOW!

See the reverse side for things you can do to avoid your asthma triggers.
This guide suggests things you can do to avoid your asthma triggers. Put a check next to the triggers that you know make your asthma worse and ask your doctor to help you find out if you have other triggers as well. Then decide with your doctor what steps you will take.

**Allergens**

- **Animal Dander**
  Some people are allergic to the flakes of skin or dried saliva from animals with fur or feathers.
  The best thing to do:
  - Keep furred or feathered pets out of your home.

- **Dust Mites**
  Many people with asthma are allergic to dust mites. Dust mites are tiny bugs that are found in every home—in mattresses, pillows, carpets, upholstered furniture, bedcovers, clothes, stuffed toys, and fabric or other fabric-covered items.
  Things that can help:
  - Encase your mattress in a special dust-proof cover.
  - Encase your pillow in a special dust-proof cover or wash the pillow each week in hot water. Water must be hotter than 130º F to kill the mites.
  - Cold or warm water used with detergent and bleach can also be effective.
  - Wash the sheets and blankets on your bed each week in hot water.
  - Reduce indoor humidity to below 60 percent (ideally between 30—50 percent). Dehumidifiers or central air conditioners can do this.
  - Try not to sleep or lie on cloth-covered cushions.
  - Remove carpets from your bedroom and those laid on concrete, if you can.
  - Keep stuffed toys out of the bed or wash the toys weekly in hot water or cooler water with detergent and bleach.

- **Cockroaches**
  Many people with asthma are allergic to the dried droppings and remains of cockroaches.
  The best thing to do:
  - Keep food and garbage in closed containers. Never leave food out.
  - Use poison baits, powders, gels, or paste (for example, boric acid). You can also use traps.
  - If a spray is used to kill roaches, stay out of the room until the odor goes away.

- **Indoor Mold**
  Fix leaky faucets, pipes, or other sources of water that have mold around them.
  Clean moldy surfaces with a cleaner that has bleach in it.

- **Pollen and Outdoor Mold**
  What to do during your allergy season (when pollen or mold spore counts are high):
  - Try to keep your windows closed.
  - Stay indoors with windows closed from late morning to afternoon, if you can. Pollen and some mold spore counts are highest at that time.
  - Ask your doctor whether you need to take or increase anti-inflammatory medicine before your allergy season starts.

**Irritants**

- **Tobacco Smoke**
  - If you smoke, ask your doctor for ways to help you quit. Ask family members to quit smoking, too.
  - Do not allow smoking in your home or car.

- **Smoke, Strong Odors, and Sprays**
  - If possible, do not use a wood-burning stove, kerosene heater, or fireplace.
  - Try to stay away from strong odors and sprays, such as perfume, talcum powder, hair spray, and paints.

Other things that bring on asthma symptoms in some people include:

- **Vacuum Cleaning**
  - Try to get someone else to vacuum for you once or twice a week, if you can. Stay out of rooms while they are being vacuumed and for a short while afterward.
  - If you vacuum, use a dust mask (from a hardware store), a double-layered or microfilter vacuum cleaner bag, or a vacuum cleaner with a HEPA filter.

- **Other Things That Can Make Asthma Worse**
  - Sulfites in foods and beverages: Do not drink beer or wine or eat dried fruit, processed potatoes, or shrimp if they cause asthma symptoms.
  - Cold air: Cover your nose and mouth with a scarf on cold or windy days.
  - Other medicines: Tell your doctor about all the medicines you take. Include cold medicines, aspirin, vitamins and other supplements, and nonselective beta-blockers (including those in eye drops).

For More Information, go to: www.nhlbi.nih.gov

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