Asthma Action Plan

		_ Doctor:				
Doctor's Phone Number	Hospital/Emergency D	_ Hospital/Emergency Department Phone Number				
 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, 	Take these long-term control me Medicine	edicines each da How muc		i-inflammatory). When to take	e it	
Peak flow: more than(80 percent or more of my best peak flow)						
My best peak flow is:						
Before exercise	0	□ 2 or □ ·	4 puffs	5 minutes befo	re exercise	
Asthma Is Getting Worse Cough, wheeze, chest tightness, or shortness of breath or				ouffs, every 20 minutes for up Ince	lo i nour	
	(short-acting beta Second If your symptoms (and p Continue monitoring to -Or- If your symptoms (and point) Take:	2-agonist) eak flow, if used) be sure you stay in eak flow, if used) short-acting beta2-ago (oral steroid)	 Nebulizer, c return to GREE the green zone. do not return to 	Ance N ZONE after 1 hour of ab GREEN ZONE after 1 hour _ 0 2 or 0 4 puffs or 0 1 _ mg per day For	ove treatment: r of above treatmen Nebulizer	
 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 	(short-acting beta Second If your symptoms (and p Continue monitoring to -Or- If your symptoms (and po Take:	2-agonist) eak flow, if used) be sure you stay in eak flow, if used) short-acting beta2-ago (oral steroid)	 Nebulizer, c return to GREE the green zone. do not return to 	Ance N ZONE after 1 hour of ab GREEN ZONE after 1 hour _ 0 2 or 0 4 puffs or 0 1 _ mg per day For	ove treatment: r of above treatmen Nebulizer	