Take Control of Asthma

Your guide to better asthma management
The more you know, the more you can control your asthma

Learning about asthma is one of the most important things you can do to get control of your asthma.

- Learn to identify things that may trigger an asthma attack.
- Learn to recognize asthma symptoms—and know how to handle them.
- Learn to manage your asthma by sticking with your asthma treatment plan, making sure you always have your medicines on hand, and using your devices correctly.
- Learn how working with your doctor can make a big difference in how well you can control your asthma.

This booklet has information that can help you learn more about asthma and its treatment. Discuss any questions you have with your doctor.

Remember that your doctor is a good source of information about asthma, because your doctor knows you and your medical history.
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What is **asthma**?

Asthma is a chronic disease of the lungs that makes it hard for you to breathe. There is no cure for asthma, but it *can* be managed and you *can* enjoy an active life with better asthma control.

Asthma symptoms can be mild, moderate, or severe. They can change from day to day. Some asthma symptoms include:

- Wheezing—a whistling noise when you breathe
- Coughing
- Chest tightness—a feeling that someone is sitting on your chest
- Shortness of breath
- Trouble breathing at night and in the early morning
- Mucus (phlegm or sputum)

When you breathe, air goes in and out of your lungs through small tubes called airways. With asthma, two main things happen in the airways of your lungs that make it hard to breathe:

1. **Inflammation** *(irritation)*—the airways become swollen and have more mucus
2. **Constriction**—the muscles around the airways tighten, making the airways narrower

Both inflammation and constriction make it hard for you to breathe and can cause asthma symptoms.
Warning signs

When you have asthma, your airways may get smaller when you are around your asthma triggers. (Learn more about asthma triggers on pages 6-7.) This is called a flare-up.

You may have warning signs hours before a flare-up begins. Everyone’s warning signs are different. Check those that apply to you:

- Wheezing
- Getting out of breath easily
- Tightness in the chest
- Increased coughing and mucus

- Breathing faster than normal
- Needing quick-relief (rescue) medicine more than twice a week
- Drop in peak flow meter reading

What to do during an asthma flare-up

- Take quick-relief (rescue) medicine as directed by your doctor (see Asthma Medicines on page 10).
- Follow your Asthma Action Plan and directions from your doctor (see Asthma Action Plan on page 12).
- Relax. Stay calm and try to breathe slowly and deeply.
- Get help when you need it. Tell someone if you notice it is getting hard to breathe.
- A severe asthma flare-up (asthma attack) can be life-threatening. Get help fast.

What is an asthma attack?

When your asthma symptoms become worse than usual, it is called an asthma attack. In a severe asthma attack, the airways can tighten so much that not enough oxygen can get to your vital organs. People can die from severe asthma attacks. Most people with asthma can manage their disease and have fewer asthma symptoms and attacks.
Know your asthma triggers

Pay attention to things that seem to make your asthma worse—these are called triggers. Everyone’s triggers are different. In some people, a strong emotion (such as crying) or even heartburn can trigger an asthma flare-up.

Your goal is to know your triggers and how to avoid them as much as possible. Some common triggers are listed below, with simple ways to manage them. You may be exposed to these triggers at home, outdoors, or at work. Check those that apply to you, and make sure your doctor is aware of them too. If you just cannot stay away from certain triggers, talk to your doctor to find ways to manage them.

- **Smoke**
  - If you smoke, get help to quit.
  - Do not allow smoking in the house or car.
  - Make sure wood-burning stoves and fireplaces are well ventilated.

- **Dust mites**
  - Keep mattresses and pillows in dustproof covers.
  - Wash your pillows, sheets, and blankets each week. Use very hot water.
  - Remove stuffed toys from the bedroom, or wash them weekly in hot water.
  - Stay out of rooms that are being vacuumed.
  - Take rugs or carpets out of the bedroom.

- **Pets**
  - Do not keep pets with fur or feathers in your bedroom.
Cockroaches
- Do not keep food in your bedroom.
- Keep food and garbage sealed.

Mold
- Fix leaky faucets and pipes.
- Clean moldy surfaces with bleach.
- Keep shower curtains clean.

Strong odors
- Avoid perfume, talcum powder, aerosol sprays like hair spray or insect spray, and strong-smelling cleaning products.

Weather
- On cold days, cover your nose and mouth with a scarf or wear a turtleneck.

Pollen
- Stay inside and keep windows closed when pollen levels are high.

Exercise
- Ask your doctor if you should take asthma medicine before you exercise.

Colds
- Avoid people with colds.
- Get plenty of rest.
- Drink plenty of fluids.

Allergies
- Manage your allergies to help reduce asthma flare-ups.
Living with asthma

The symptoms of asthma can change from day to day or month to month. You can feel fine one minute and have trouble breathing the next. This change can be frustrating and can make you feel out of control.

**Your asthma can be controlled** with effective asthma management. People with asthma should be able to sleep well at night and be active all day. The goals of asthma care include:

- Have few or no asthma symptoms during the day and the night.
- Reduce or eliminate asthma attacks.
- Have no limitations on activities—no missed school or work days.
- Use a quick-relief (rescue) inhaler less often and not more than twice a week.
- Reduce or have no side effects from medicines.
- Maintain normal or almost normal lung function.

Asthma symptoms can be managed and you can enjoy an active life!

Asthma can be well managed. Effective asthma management requires a “partnership” between you and your doctor:

- ✔ Work with your doctor to set goals for managing your asthma.
- ✔ Sit down with your doctor to develop an Asthma Action Plan—and follow it.
- ✔ Take your long-term controller medicine every day and use your quick-relief (rescue) medicine as directed by your doctor.
- ✔ Be aware of your asthma triggers and avoid them when possible.
Asthma medicines

Asthma makes two main things happen in the airways of your lungs:

1. **Swelling**—your airways become inflamed. They swell up and fill with mucus.

2. **Tightness**—the muscles around the airways tighten and make the airways narrow.

Asthma is treated with two kinds of medicines: controller medicines and quick-relief (rescue) medicines

**Controller medicines**

Controller medicines help prevent asthma symptoms. They help prevent or reduce the swelling and tightness in your airways. Use your controller medicine every day—as directed by your doctor—even when you feel fine.

- Inhaled corticosteroids are effective, long-term controller medicines that are inhaled directly into the lungs. They help decrease inflammation and swelling in the airways and help decrease asthma symptoms like wheezing and coughing. They are not quick relief medicines and, therefore, should not be used as a rescue medication when you are having an asthma flare-up.

- Other long-term controller medicines include inhaled long-acting beta-agonists in combination with an inhaled corticosteroid, leukotriene modifiers, cromolyn/nedocromil, oral corticosteroids, and theophylline.
Quick-relief (rescue) medicines

These medicines, used “as needed,” act quickly to relax the muscles around your airways. Your airways will open up, which will help you breathe better fast.

- Short-acting inhaled beta-agonists are the preferred quick-relief medicine. Other quick-relief medicines include inhaled anticholinergics and oral corticosteroids.
- Oral corticosteroids are most often used to treat moderate to severe asthma flare-ups for a short period of time. As quick-relief medicines (not controller medicines), they act within a few hours to decrease inflammation and help you feel better.
- Use your quick-relief (rescue) medicine during a flare-up or before you exercise, as directed by your doctor.
- Talk to your doctor if you use your quick-relief medicine more than two times a week—your treatment plan may need to be changed.

Some important information about asthma medicines

- All medicines have side effects. Talk to your doctor if you think you are having side effects from these or any other medicines.
- Steroids used to treat asthma are not the same as the steroids some athletes take to build muscles (anabolic steroids).
- It is important that you take your medicines exactly as your doctor tells you. If you do, you
  - may have more days without asthma symptoms.
  - won’t have to use the quick-relief medicine as often.
  - may have fewer asthma symptoms at night.
  - may breathe better.

Keep your prescriptions filled!

Taking your asthma controller and quick-relief (rescue) medicines as directed by your doctor is one of the most important things you can do to stay healthy. Always have your quick-relief (rescue) medicine on hand in case you have an asthma flare-up.
Your asthma action plan

What is an asthma action plan?

An Asthma Action Plan is a simple way to keep track of your asthma based on your symptoms and peak flow meter numbers. (Learn more about peak flow meters on page 18.) An example of an asthma action plan is listed below.

The Asthma Action Plan is made up of three color-coded “zones.” The zones are based on your asthma symptoms and your peak flow numbers. The plan also has a place for your doctor to add your asthma medicines. Your doctor will write down which asthma medicine you should take for each zone.
The zones are like a traffic light:

✓ **Green means Go.** Your breathing is good and you are not having any asthma symptoms. Your peak flow number is greater than 80% of your personal best. (Learn more about your “personal best” on page 19.)

✓ **Yellow means Caution.** You are having some asthma symptoms. Your peak flow number is 50% to 80% of your personal best.

✓ **Red means Stop or Danger.** Your asthma symptoms are bad. It is hard to breathe. Get help now! Your peak flow number is less than 50% of your personal best.

### Why you need a plan

Everyone with asthma should have an Asthma Action Plan. The plan tells you which medicine to take and when to take it based on your asthma symptoms. A plan can be very helpful, especially during an asthma flare-up.

Work with your doctor to complete your Asthma Action Plan. Your doctor will help you identify your “personal best” peak flow number, and will make sure you know when to call for help and what to do in an emergency.

Use your Asthma Action Plan to teach others about your asthma. You may want to give a copy to friends, relatives, teachers, coaches, neighbors, and babysitters so that they can help you (or a child with asthma) if an asthma flare-up occurs.
Keep a daily asthma journal

Whether you’ve recently been diagnosed with asthma or have lived with it for years, managing your asthma every day can help you live an active, healthy life. Taking an active role in your care is an important step in controlling your asthma.

By keeping a daily journal, you can track your good and bad days, your triggers, and your symptoms. You and your doctor can then use this information to create a management plan for your asthma.

Four Tips for Keeping a Successful Journal

1. **Write in your journal every day.** Try to make writing in your journal a habit. Keep it in the same place and take just a few minutes to write in it every day.

2. **Answer as many questions as possible.** You can never have too much information about your asthma. By looking at the information in your journal, your doctor will be able to recognize problems or progress over time.

3. **Keep on writing.** If you miss a day or so of writing in your journal, start up again. The goal is to make it a habit.

4. **Take your journal to every visit with your doctor.** Discuss your progress with your doctor to find out whether or not your asthma is under control. Remember to ask your doctor when you should schedule your next visit and write down the appointment in your journal.
Sample Asthma Journal

One type of journal is shown below. It is easy to use, and takes just a few minutes to complete.

<table>
<thead>
<tr>
<th>DATE</th>
<th>SUNDAY</th>
<th>MONDAY</th>
<th>TUESDAY</th>
<th>WEDNESDAY</th>
<th>THURSDAY</th>
<th>FRIDAY</th>
<th>SATURDAY</th>
</tr>
</thead>
<tbody>
<tr>
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<td>/</td>
</tr>
</tbody>
</table>

- Did you have an asthma flare-up today?
- Did you experience any of the following symptoms today?
  - Wheezing
  - Cough
  - Shortness of breath
  - Chest tightness
  - Other
- What do you think triggered the asthma flare-up?
- Did you miss or avoid any activities because of your asthma symptoms?
- Was your sleep interrupted by asthma symptoms?
- Did you take your long-term controller medicine today?
  - This is the medicine you take every day as directed by your doctor to help prevent asthma symptoms.
- Did you need to use your quick-relief (rescue) inhaler?
  - Yes
  - No
  - How many puffs?
- What was your peak flow reading today?
- Other comments and/or observations:

Use your asthma journal and follow your Asthma Action Plan as directed by your doctor to help you control your asthma as effectively as possible.
Taking charge of your asthma

Asthma affects your life, but it does not have to control it. By managing your asthma, you can take charge of your life.

Work with your doctor

You and your doctor are a team working together to effectively manage your asthma. It is important for you to take an active role in your asthma care.

Start by:

- Scheduling an “asthma only” office visit at least twice a year.
- Giving clear information to your doctor about your signs and symptoms (see Keep a Daily Asthma Journal on page 14.)
- Making sure you understand how to use your Asthma Action Plan.
- Listening closely and carefully to the instructions your doctor gives you.
- Asking questions about what you do not understand.
- Writing down any information you and your doctor talk about.

At your doctor visit

<table>
<thead>
<tr>
<th>Tell your doctor:</th>
<th>Ask your doctor:</th>
</tr>
</thead>
<tbody>
<tr>
<td>What medicine(s) you are taking</td>
<td>What medicines should I be taking? When? How often?</td>
</tr>
<tr>
<td>How often you take your controller medicine</td>
<td>How often should I be using my quick-relief (rescue) medicine?</td>
</tr>
<tr>
<td>How often you use your quick-relief (rescue) medicine</td>
<td>What are asthma “triggers” and how can I avoid them?</td>
</tr>
<tr>
<td>What asthma symptoms you are having</td>
<td>Should I get a lung function test to see how serious my asthma is?</td>
</tr>
<tr>
<td>Whether you sleep through the night or not</td>
<td>Should I be using a peak flow meter at home?</td>
</tr>
<tr>
<td>How your asthma affects your daily activities</td>
<td>Do we need to update my Asthma Action Plan?</td>
</tr>
</tbody>
</table>
Take action to achieve your goals for asthma control

You play a very important part in controlling your asthma symptoms. The actions you take can directly affect your quality of life.

- Learn what asthma is and what causes it.
- Learn about your personal triggers for asthma.
- Take steps to avoid these triggers and prevent asthma flare-ups.
- Keep a diary of your activities and symptoms at home and away from home.
- Share the diary with your doctor.
- Work with your doctor to put together an Asthma Action Plan to manage your asthma.
- Follow your Asthma Action Plan.
- Take your asthma medicines as directed and learn to use devices correctly.
- Share facts about asthma, your triggers, and your Asthma Action Plan with your family. Once they understand, they can support and help you with your asthma.
- Let your doctor know how you are doing.

Remember...

Asthma does not go away when your symptoms go away. It cannot be cured but it can be managed and you can enjoy an active life with better asthma control.
Using your **asthma control devices correctly**

**Peak flow meter**

A peak flow meter shows how well you can push air out of your lungs. You can use it to find out if your airways are getting tighter. Your peak flow number can warn you of a coming flare-up. Use your peak flow meter as directed by your doctor. Try to take the readings at the same time every day and record your results. Talk to your doctor if you have any questions about your peak flow meter.

**Follow these steps each day***:

1. Stand up or sit up straight.
   - Slide the marker to 0.
   - Hold the meter in one hand. Do not cover the numbers with your fingers.

2. Take in as big a breath as you can with your mouth open.
   - Quickly close your lips around the tube. Do not put your tongue in the hole.
   - Blow out once, as fast and as hard as you can.

3. Take the meter out of your mouth.
   - Find the number where the marker stopped.
   - Mark this number on your peak flow tracking sheet.
   - Slide the marker back to 0.

**Then:**

- Take 2 more readings.
- Mark each number on your peak flow tracking sheet.
- Then circle the highest number. This is your peak flow number today.
- Check your Asthma Action Plan to see which medicine you should take.

*Always follow the instructions that come with your peak flow meter for best results.
Find your “personal best” peak flow number

✔️ Use your peak flow meter daily for 2 to 3 weeks or as instructed by your doctor.
✔️ Write down the peak flow number you get for each peak flow reading.
✔️ The highest peak flow number you had during the 2 to 3 weeks is your “personal best.”

After you know your “personal best”

- Compare the highest peak flow number you get each day to your “personal best.”
- Your “personal best” can change over time. Ask your doctor when to check for a new “personal best.”
Metered-dose inhaler

One way to take asthma medicine is with an inhaler. It sends the medicine directly to your lungs. If you use more than one inhaler, ask your doctor which order to use them in.

Follow these simple steps:

1. Remove the cap while holding the inhaler upright.
2. Check inside and outside of the inhaler, including the mouthpiece, for the presence of loose objects.
3. Then shake the inhaler gently but well.
4. Stand up or sit up straight and tilt your chin up.
5. Breathe out completely through your mouth.
6. Then place the mouthpiece of the inhaler in your mouth and close your lips around it. Make sure your tongue doesn’t block the opening of the mouthpiece.
7. While starting to take in a slow, deep breath, push down once on the top of the inhaler.
8. Hold your breath and count to 10 or for as long as comfortable.
9. Remove the mouthpiece from your mouth and breathe out slowly.
10. Most medicines require 2 puffs. If your medicine does, wait 1 minute and repeat the steps above.
11. Replace the cap when finished.
12. If your inhaler is a corticosteroid medicine, rinse your mouth and throat with water after use and spit out the rinse.

TIP: A spacer makes it easier for some people to take their inhaler medicine correctly. Ask your doctor or pharmacist for help if you are having trouble using your inhaler.
Nebulizer

Some people use a nebulizer to take their asthma medicine. A nebulizer makes a mist from your asthma medicine. You breathe the mist into the airways of your lungs. Nebulizers can be especially helpful for young children and other people who are not able to use inhalers accurately.

- Many asthma medicines come pre-mixed for use in nebulizers. If your medicine does not come pre-mixed, make sure you get instructions for mixing it from your doctor or pharmacist.

- The instructions for setting up your nebulizer come in the manufacturer’s packaging and are generally simple and easy to follow. If you have any questions, call your doctor or pharmacist for help. If necessary, they can explain each step of setup and use.

- Breathing in medicine through a nebulizer is easy:
  - Put the mouthpiece in your mouth or secure the mask over your face.
  - Turn on the machine.
  - Take slow, deep breaths through your mouth and hold for 1-2 seconds (a count of 2) before releasing.
  - Continue breathing until the mist is gone. This usually takes about 10 minutes.

- Keep your nebulizer clean! Follow the manufacturer’s instructions to keep all the parts working their best.
Asthma and smoking

Did you know that smoking can make your asthma worse?

Smoking is a common trigger of asthma symptoms for many people. Smoke, and even the smell of smoke on clothes, can irritate your airways and cause the muscles around your airways to tighten. This makes the airways narrow and can cause asthma symptoms like coughing and wheezing. Smoking may also increase the risk of permanent lung damage, even in those without asthma.

Smoking affects others

If you are a smoker, you need to stop smoking. If you are not a smoker, find ways to avoid secondhand smoke. Inhaling other people’s smoke can cause your asthma to flare up. If you have a child with asthma, remember to keep him or her away from secondhand smoke. Do not let anyone smoke around you or your child.

How to ask people not to smoke around you

Telling friends or family members that their smoking makes your asthma worse can be difficult. But if you have asthma, it is important to let people know how their smoke affects you.

- Tell them that smoke or even the smell of smoke can make your asthma worse.
- Ask them to smoke outdoors.
Some tips to help you stop smoking

Quitting is hard. Giving up something you do every day is not easy. Here are some tips:

- Create a “quit plan.” Make a list of all the reasons why you want to stop smoking and carry it around with you. Set a quit date and stick to it.
- Tell your doctor, nurse, or pharmacist you want to stop. They may be able to assist you in creating a quit plan and suggest ways to stop. They may also recommend products approved to help those who try to quit smoking.
- Ask for support from a friend or family member. Let the people who care about you help you stay on track. The more support you have, the more likely you will be able to stop.
- Find out what makes you want to smoke. Plan how you can avoid these situations or how you can deal with them without smoking.
- Make your entire home smoke-free. Not smoking in certain rooms is not enough to reduce the risk of secondhand smoke.
Asthma and depression

You may feel sad or “down” if asthma limits your daily life. If these feelings do not go away, talk to your doctor.

Do you have symptoms of depression?

Depression affects people in many ways. Talk to your doctor if you have 5 or more of these symptoms that last for 2 or more weeks:

- Feel sad or “down”
- Do not care about things you liked before
- Eat more or eat less
- Feel tired
- Feel anxious
- Cannot think or make up your mind
- Feel like you are bad or not worth much
- Sleep too much or too little
- Think about dying or killing yourself

If you are thinking about suicide

- Call 911. Get help right away before you act on these thoughts
- Talk with your doctor
- Do not stay alone
- Call the National Suicide Prevention Lifeline at 1-800-SUICIDE (1-800-784-2433)

Getting help with depression may help you feel better

- Talk to your doctor about how you feel.
- Your doctor may prescribe medicines to help with your depression.
- If you take a depression medicine, make sure all your doctors know about it.
- Talk to your doctor before stopping or changing any of your medicines.
Learn all you can about asthma. These Web sites may help you find answers and support.

**Allergy and Asthma Network/Mothers of Asthmatics**
2751 Prosperity Avenue, Suite 150
Fairfax, VA  22031
800-878-4403
www.aanma.org

**American Academy of Allergy, Asthma and Immunology**
555 East Wells Street, Suite 1100
Milwaukee, WI  53202
414-272-6071
www.aaaai.org

**American Lung Association®**
61 Broadway, 6th Floor
New York, NY  10006
800-586-4872
www.lungusa.org

**Asthma and Allergy Foundation of America**
1233 20th Street NW, Suite 402
Washington, DC  20036
800-727-8462
www.aafa.org

**United States Environmental Protection Agency**
United States EPA/Office of Radiation and Indoor Air
Indoor Environments Division
1200 Pennsylvania Avenue, NW, Mail Code 6609J
Washington, DC 20460
202-343-9370
www.epa.gov/asthma
Take control of ASTHMA

National Heart, Lung, and Blood Institute, National Institutes of Health
NHLBI Health Information Center
PO Box 30105
Bethesda, MD 20824-0105
301-592-8573
www.nhlbi.nih.gov

National Jewish Medical and Research Center
1400 Jackson Street
Denver, CO 80206
800-222-5864 (Lung Line)
www.nationaljewish.org

Asthma Action America®
www.asthmaactionamerica.org

Asthma Control Test™
Sponsored by GlaxoSmithKline
www.asthmacontrol.com

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Appendix

In this section we have provided you with tools to help you manage your asthma.

By recording your results and sharing them with your doctor, you will track your good and bad days more effectively.

- Your Daily Asthma Journal
- Peak Flow Tracking Sheet
- Asthma Action Plan
Your Daily Asthma Journal
(For ages 12 years and older)

Whether you've recently been diagnosed with asthma or have lived with it for years, managing your asthma every day can help you live an active, healthy life. Taking an active role in your care is an important step in managing your asthma.

Why Should I Keep a Daily Journal?
By keeping a daily journal, you can track your good and bad days, your triggers, and your symptoms. You and your doctor can then use this information to create a management plan for your asthma.

Four Tips for Keeping a Successful Journal

1. **Write in your journal every day.**
   Try to make writing in your journal a habit. Keep it in the same place and take just a few minutes to write in it every day.

2. **Answer as many questions as possible.**
   You can never have too much information about your asthma. By looking at the information in your journal, your doctor will be able to recognize problems or progress over time.

3. **Keep on writing.**
   If you miss a day or so of writing in your journal, start up again. The goal is to make it a habit.

4. **Take your journal to every visit with your doctor.**
   Discuss your progress with your doctor to find out whether or not your asthma is under control. Remember to ask your doctor when you should schedule your next visit and write down the appointment in your journal.

Use your asthma journal and follow your asthma management plan as directed by your doctor. This may help you better control your asthma.
My Daily Asthma Journal (For ages 12 years and older)

Use this journal to help you take an active role in your asthma management.

Please check the boxes that apply.

<table>
<thead>
<tr>
<th>DATE</th>
<th>SUNDAY</th>
<th>MONDAY</th>
<th>TUESDAY</th>
<th>WEDNESDAY</th>
<th>THURSDAY</th>
<th>FRIDAY</th>
<th>SATURDAY</th>
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<tbody>
<tr>
<td>Did you have an asthma flare-up today?</td>
<td>☐ Yes ☐ No</td>
<td>☐ Yes ☐ No</td>
<td>☐ Yes ☐ No</td>
<td>☐ Yes ☐ No</td>
<td>☐ Yes ☐ No</td>
<td>☐ Yes ☐ No</td>
<td>☐ Yes ☐ No</td>
</tr>
<tr>
<td>Did you experience any of the following symptoms today?</td>
<td>☐ Yes ☐ No</td>
<td>☐ Yes ☐ No</td>
<td>☐ Yes ☐ No</td>
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<td>Wheezing</td>
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<td>What do you think triggered the asthma flare-up?</td>
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<tr>
<td>Did you miss or avoid any activities because of your asthma symptoms?</td>
<td>☐ Yes ☐ No</td>
<td>☐ Yes ☐ No</td>
<td>☐ Yes ☐ No</td>
<td>☐ Yes ☐ No</td>
<td>☐ Yes ☐ No</td>
<td>☐ Yes ☐ No</td>
<td>☐ Yes ☐ No</td>
</tr>
<tr>
<td>Was your sleep interrupted by asthma symptoms?</td>
<td>☐ Yes ☐ No</td>
<td>☐ Yes ☐ No</td>
<td>☐ Yes ☐ No</td>
<td>☐ Yes ☐ No</td>
<td>☐ Yes ☐ No</td>
<td>☐ Yes ☐ No</td>
<td>☐ Yes ☐ No</td>
</tr>
<tr>
<td>Did you take your long-term controller medicine today?</td>
<td>☐ Yes ☐ No</td>
<td>☐ Yes ☐ No</td>
<td>☐ Yes ☐ No</td>
<td>☐ Yes ☐ No</td>
<td>☐ Yes ☐ No</td>
<td>☐ Yes ☐ No</td>
<td>☐ Yes ☐ No</td>
</tr>
<tr>
<td>This is the medicine you take every day as directed by your doctor to help prevent asthma symptoms.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Did you need to use your quick-relief (rescue) inhaler?</td>
<td>☐ Yes ☐ No</td>
<td>☐ Yes ☐ No</td>
<td>☐ Yes ☐ No</td>
<td>☐ Yes ☐ No</td>
<td>☐ Yes ☐ No</td>
<td>☐ Yes ☐ No</td>
<td>☐ Yes ☐ No</td>
</tr>
<tr>
<td>This is the medicine you take when you first begin to have symptoms.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>If yes, how many puffs?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>What was your peak flow reading today?</td>
<td>______ L/min</td>
<td>______ L/min</td>
<td>______ L/min</td>
<td>______ L/min</td>
<td>______ L/min</td>
<td>______ L/min</td>
<td>______ L/min</td>
</tr>
<tr>
<td>Other comments and/or observations:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Next doctor appointment: _____ / _____ / ______

Monthly overview: Did you use your quick-relief (rescue) inhaler more than twice a week? ☐ Yes ☐ No
Did you wake up at night with symptoms more than twice in the past one month? ☐ Yes ☐ No

If you answered “Yes” to either of these questions, call your doctor—your asthma may not be well controlled.

Photocopy this page to use each week to help track your asthma control.
Peak Flow Tracking Sheet

Directions:

1. Use your peak flow meter as directed by your doctor. Try to take the readings at the same time of the day and record your results on the columns below.

2. Take 3 peak flow readings each time you use your peak flow meter. Mark each number in the column below. Circle the highest number. This is your peak flow number for the day.

Please make copies of this sheet to track your peak flow readings each week.
3 After you know your peak flow number, look at the table below and determine which zone you are in.
   • First, find your Personal Best Peak Flow number in the blue column on the left (this number should also be recorded on your Asthma Action Plan). Ask your doctor if you do not know your Personal Best.
   • Then, follow the line across to find where today’s peak flow number falls—green, yellow, or red zone.

4 Adjust your medicine according to your Asthma Action Plan. Keep a journal of your peak flow readings. Show it to your doctor.

<table>
<thead>
<tr>
<th>If your Personal Best Peak Flow number is:</th>
<th>You are in the Green Zone if your peak flow number is:</th>
<th>You are in the Yellow Zone if your peak flow number is:</th>
<th>You are in the Red Zone if your peak flow number is:</th>
</tr>
</thead>
<tbody>
<tr>
<td>100</td>
<td>above 80</td>
<td>between 80 and 50</td>
<td>below 50</td>
</tr>
<tr>
<td>125</td>
<td>above 100</td>
<td>between 100 and 63</td>
<td>below 63</td>
</tr>
<tr>
<td>150</td>
<td>above 120</td>
<td>between 120 and 75</td>
<td>below 75</td>
</tr>
<tr>
<td>175</td>
<td>above 140</td>
<td>between 140 and 88</td>
<td>below 88</td>
</tr>
<tr>
<td>200</td>
<td>above 160</td>
<td>between 160 and 100</td>
<td>below 100</td>
</tr>
<tr>
<td>225</td>
<td>above 180</td>
<td>between 180 and 113</td>
<td>below 113</td>
</tr>
<tr>
<td>250</td>
<td>above 200</td>
<td>between 200 and 125</td>
<td>below 125</td>
</tr>
<tr>
<td>275</td>
<td>above 220</td>
<td>between 220 and 138</td>
<td>below 138</td>
</tr>
<tr>
<td>300</td>
<td>above 240</td>
<td>between 240 and 150</td>
<td>below 150</td>
</tr>
<tr>
<td>325</td>
<td>above 260</td>
<td>between 260 and 163</td>
<td>below 163</td>
</tr>
<tr>
<td>350</td>
<td>above 280</td>
<td>between 280 and 175</td>
<td>below 175</td>
</tr>
<tr>
<td>375</td>
<td>above 300</td>
<td>between 300 and 188</td>
<td>below 188</td>
</tr>
<tr>
<td>400</td>
<td>above 320</td>
<td>between 320 and 200</td>
<td>below 200</td>
</tr>
<tr>
<td>425</td>
<td>above 340</td>
<td>between 340 and 213</td>
<td>below 213</td>
</tr>
<tr>
<td>450</td>
<td>above 360</td>
<td>between 360 and 225</td>
<td>below 225</td>
</tr>
<tr>
<td>475</td>
<td>above 380</td>
<td>between 380 and 238</td>
<td>below 238</td>
</tr>
<tr>
<td>500</td>
<td>above 400</td>
<td>between 400 and 250</td>
<td>below 250</td>
</tr>
<tr>
<td>525</td>
<td>above 420</td>
<td>between 420 and 263</td>
<td>below 263</td>
</tr>
<tr>
<td>550</td>
<td>above 440</td>
<td>between 440 and 275</td>
<td>below 275</td>
</tr>
<tr>
<td>575</td>
<td>above 460</td>
<td>between 460 and 288</td>
<td>below 288</td>
</tr>
<tr>
<td>600</td>
<td>above 480</td>
<td>between 480 and 300</td>
<td>below 300</td>
</tr>
</tbody>
</table>

GREEN ZONE = Doing well
YELLOW ZONE = Asthma symptoms worse — call your doctor
RED ZONE = Asthma symptoms severe — call your doctor immediately!

Know your Personal Best Peak Flow number. Personal Best Peak Flow: ____________________

Take peak flow readings as directed by your doctor to see if your asthma is well managed.
Asthma Action Plan

An Asthma Action Plan can help you manage your asthma from day to day. It is based on your symptoms and peak flow numbers. Your doctor can tell you when and how often you should take your peak flow reading.

Name: _____________________ Date: _____________________
Doctor’s Name: _______________ Doctor’s Phone: _______________
Controller Medicine: __________ Quick-Relief (Rescue) Medicine: __________
Personal Best Peak Flow: __________ Before Exercise Take: __________
Other: _______________________

How Are My Symptoms Today?

Breathing is good

Green Zone: Go
• No cough, wheeze, or shortness of breath
• Sleeping through the night
• Can do usual activities (work, play)
• Don’t need quick-relief (rescue) medicine most days

or Peak Flow: __________

TAKE:
Controller medicine
Medicine: _______________
How much: _______________
When: _______________
Medicine: _______________
How much: _______________
When: _______________
Medicine: _______________
How much: _______________
When: _______________
Medicine: _______________
How much: _______________
When: _______________

You are having a flare-up

Yellow Zone: Caution
• Cough, wheeze, or shortness of breath, chest tightness
• Waking at night due to asthma symptoms
• Can do some but not all usual activities
• Using more quick-relief (rescue) medicine

or Peak Flow: __________

Continue with Green Zone medicine:
ADD:
Medicine: _______________
How much: _______________
When: _______________
Medicine: _______________
How much: _______________
When: _______________
Medicine: _______________
How much: _______________
When: _______________

You are having a serious flare-up—CALL YOUR DOCTOR NOW!

Red Zone: Danger
• Very short of breath, ribs show
• Quick-relief (rescue) medicine has not helped
• Cannot do usual activities
• Symptoms in the yellow zone are the same after 24 hours or are worse

or Peak Flow: __________

DANGER

CALL 911 or Go to the Hospital
IF
• You have trouble walking or talking
• Your lips or fingernails are blue
• You are feeling faint

ADD ADDITIONAL:
Medicine: _______________
How much: _______________
When: _______________
Medicine: _______________
How much: _______________
When: _______________
Medicine: _______________
How much: _______________
When: _______________

Work with your doctor to complete this Asthma Action Plan.
Use it every day to manage your asthma symptoms.