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# ADULT ASTHMA ACTION PLAN



# Adult Asthma Action Plan (16yrs+)

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

Review your action plan with your healthcare provider at every visit.

EMERGENCY CONTACT: \_\_\_\_\_ PHONE: \_\_\_\_\_

PHYSICIAN NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

**PERSONAL BEST PEAK FLOW** \_\_\_\_\_ litres per minute.

**The goal of asthma treatment is to live a healthy, active life. It is very important to remain on your maintenance medication, even if you are not having any asthma symptoms.**

## Go: Maintain Therapy

### DESCRIPTION:

You have **ALL** of the following:

- Use your reliever **no more than** 3 times per week
- Cough, wheezing, shortness of breath or chest tightening **no more than** 3 days per week
- Can do physical activities and sports without difficulty
- Night asthma symptoms less than 1 night per week
- No missed regular activities or school/work

Peak flow: > 80% personal best, or > \_\_\_\_.

Other:

### INSTRUCTIONS:

MEDICATION	PUFFER COLOUR	DOSE	PUFFS	TIMES PER DAY
<b>CONTROLLER</b>				
<b>RELIEVER</b>				

Other:

## Caution: Step Up Therapy

### DESCRIPTION:

You have **ANY** of the following:

- Use your reliever **more than** 3 times per week
- Have daytime cough, wheezing, shortness of breath or chest tightening **more than** 3 days per week
- Physical activity is limited due to symptoms
- Asthma symptoms at night or in early AM 1 or more nights per week

Peak flow: 60-80% personal best, or \_\_\_\_ to \_\_\_\_.

Other:

### INSTRUCTIONS:

Increase \_\_\_\_\_ controller ( \_\_\_\_\_ ) to:  
(colour) (medication)  
\_\_\_\_ puffs \_\_\_\_ times per day for \_\_\_\_ days.

Add \_\_\_\_\_ controller ( \_\_\_\_\_ ):  
(colour) (medication)  
\_\_\_\_ puffs \_\_\_\_ times per day for \_\_\_\_ days.

Take \_\_\_\_\_ reliever ( \_\_\_\_\_ ) 1-2 puffs  
(colour) (medication)  
every 4 to 6 hours as needed.

If no improvement in your symptoms and/or peak flows in 2-3 days, or your reliever only lasts for 2-3 hours, go to the red zone.

Other:

## Stop: Get Help Now

### DESCRIPTION:

You have **ANY** of the following:

- Reliever lasts for 2-3 hours or less
- Continuous asthma symptoms
- Continuous cough
- Wheezing all the time
- Severe shortness of breath
- Sudden severe attack of asthma

Peak flow: <60% personal best, or < \_\_\_\_.

Other:

### INSTRUCTIONS:

Take \_\_\_\_\_ reliever ( \_\_\_\_\_ )  
(colour) (medication)  
\_\_\_\_ puffs every 10-30 minutes as needed.

Asthma symptoms can get worse quickly. When in doubt, seek medical help.

Asthma can be life-threatening - **DO NOT WAIT!**

#### If you cannot contact your doctor:

Call 911 for an ambulance, or go directly to the Emergency Department!

Bring this asthma action plan with you to the emergency room or hospital.

Stay calm.

Other:

**Controller** - has a lasting effect, treats inflammation, prevents asthma attacks, may take time to act.

**Reliever** - rapidly relieves symptoms of cough, wheeze, lasts 4 hours.

**Allergies may be triggering your asthma** - avoid the things that you are allergic to and have allergy skin testing if you are unsure.



## GETTING THE MOST OUT OF YOUR VISIT WITH YOUR HEALTHCARE PROVIDER

**Successful management of your asthma will involve a team approach. It is important to work with your healthcare providers and tell them how things are going.**

- 1 Before your next appointment make sure that you write down your concerns or questions.**
- 2 At your appointment discuss the following areas:**
  - What is your level of physical activity? Is it less than you would like because of asthma symptoms?
  - How frequently are you using your reliever inhaler? Is this your usual pattern or are you generally using more or less medication?
  - How frequently are you experiencing asthma symptoms?
  - Do you wake up at night because of asthma symptoms?
  - What are your asthma triggers?
- 3 Take notes of what was said for future reference.**
- 4 Bring your asthma medications to your appointment and ask to have your inhaler technique checked.**
- 5 Ask if you don't understand something that was said. It is important to repeat what you think was said and what you are supposed to do.**

If you have any questions call the Lung Health Line at 1-888-344-LUNG (5864) or email [info@lunghealth.ca](mailto:info@lunghealth.ca) or visit [lunghealth.ca](http://lunghealth.ca).

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