

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:

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:

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:

MEDICATION	PUFFER COLOUR	DOSE	PUFFS	TIMES PER DAY
CONTROLLER				
RELIEVER				

Other:

INSTRUCTIONS:

- Increase _____ controller (_____) to: _____ puffs _____ times per day for _____ days.
- Add _____ controller (_____): _____ puffs _____ times per day for _____ days
- Take _____ reliever (_____) 1-2 puffs 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:

INSTRUCTIONS:

Take _____ reliever (_____) _____ 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.

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