



ASTHMA ACTION PLAN

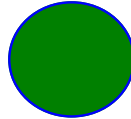
Name: _____ Date: _____

ASTHMA IS UNDER CONTROL

Green Level—Good Control

WHAT SHOULD I DO?

- Normal breathing
- No cough or wheeze
- Normal activity
- Normal sleep
- No need for Reliever medicine



CONTROLLER

MEDICINE	PUFFS/DOSE	TIMES/DAY

RELIEVER

		As needed
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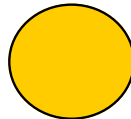
Keep Up The Good Work!

- **Reliever** medicine can be used for asthma symptoms (cough, wheeze, difficulty breathing).

TIME TO TAKE ACTION!

Yellow Level—Caution

- Cold symptoms
- Symptoms at night
- Symptoms with activity
- Reliever medicine used more than 3 times a week for symptoms



CONTROLLER

MEDICINE	PUFFS/DOSE	TIMES/DAY

RELIEVER

		As needed
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- Start or increase **Controller** medicine
- When better, return to Green Level

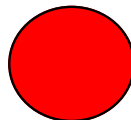
- If **Reliever** medicine is needed every 4 hours, call your doctor.
- **See your doctor** if asthma symptoms are not improving after two days.

GET HELP!

RED LEVEL—DANGER

GO TO THE CLOSEST EMERGENCY IMMEDIATELY!

- Reliever medicine needed in less than 3 hours
- Reliever medicine does not begin to improve asthma symptoms in 10 minutes



- **Use Reliever** medicine as much as needed on the way to the Emergency!

Comments: _____

Doctor: _____ Phone Number: _____

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