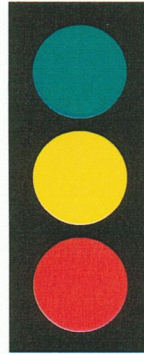


# Asthma Action Plan

Name	Date
Doctor	Medical Record #
Doctor's Office Phone #: Day	Night/Weekend
Emergency Contact	
Doctor's Signature	



The Colors of a traffic light will help you use your asthma medicines.

**Green** means **Go Zone!**  
Use preventive medicine.

**Yellow** Means **Caution Zone!**  
Add quick-relief medicine.

**Red** means **Danger Zone!**  
Get help from a doctor.

Personal Best Peak Flow \_\_\_\_\_

## GO

You have ***all*** of these:

- Breathing is good
- No cough or wheeze
- Sleep through the night
- Can work and play

Peak flow from \_\_\_\_\_ to \_\_\_\_\_

## CAUTION

You have ***any*** of these:

- First signs of a cold
- Exposure to known trigger
- Cough
  - Mild wheeze
- Tight chest
  - Coughing at night

Peak flow from \_\_\_\_\_ to \_\_\_\_\_

## DANGER

Your asthma is getting worse fast:

- Medicine is not helping
- Breathing is hard and fast
- Nose opens wide
- Ribs show
- Can't talk well

Peak flow reading below \_\_\_\_\_

## Use these daily preventive anti-inflammatory medicines:

MEDICINE	HOW MUCH	HOW OFTEN/WHEN

For asthma with exercise, take:

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## Continue with green zone medicine and add:

MEDICINE	HOW MUCH	HOW OFTEN/WHEN

CALL YOUR PRIMARY CARE PROVIDER.

## Take these medicines and call your doctor now.

MEDICINE	HOW MUCH	HOW OFTEN/WHEN

**GET HELP FROM A DOCTOR NOW! Do not be afraid of causing a fuss. Your doctor will want to see you right away. It's important! If you cannot contact your doctor, go directly to the emergency room. DO NOT WAIT.**

Make an appointment with your primary care provider within two days of an ER visit or hospitalization.