**YOUR ASTHMA ACTION PLAN**

### Name:

### SYMPTOMS:

**EVERY DAY**

You have ALL of these:
- Breathing is good
- No coughing
- No wheezing (noise with breathing)
- Can play as usual
- Sleeping all night

**SICK**

You have ANY of these:
- Coughing
- Cough at night
- A little wheeze (some noise with breathing)
- Trouble breathing
- Tight/pain in chest
- Difficulty playing/running

**VERY SICK**

You are getting WORSE, fast!
- Breathing hard and fast
- Can not stop coughing
- Trouble talking
- Ribs are showing
- Nostrils are moving with breathing

### ACTION:

#### ALWAYS USE YOUR SPACER with EVERY inhaler!

<table>
<thead>
<tr>
<th>Medication</th>
<th>Dosage</th>
<th>Usage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Advair HFA</td>
<td>45 / 115 / 230</td>
<td>2 puffs</td>
</tr>
<tr>
<td>Dulera</td>
<td>100 / 200</td>
<td>2 puffs</td>
</tr>
<tr>
<td>Flovent</td>
<td>44 / 110 / 220</td>
<td>2 puffs</td>
</tr>
<tr>
<td>Qvar</td>
<td>40 / 80</td>
<td>1-2 puffs</td>
</tr>
<tr>
<td>Symbicort</td>
<td>80 / 160</td>
<td>1-2 puffs</td>
</tr>
<tr>
<td>Pulmicort Respules (Budesonide)</td>
<td>0.25 / 0.5 / 1.0</td>
<td>1 unit</td>
</tr>
<tr>
<td>Singular (Montelukast)</td>
<td>4 / 5 / 10 mg</td>
<td>1 tab</td>
</tr>
<tr>
<td>Claritin/ Zyrtec/ Allegra</td>
<td>5 mL / 10 mL</td>
<td>1 dose</td>
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<tr>
<td>Flonase / Nasonex</td>
<td>55 mcg / 110 mcg</td>
<td>1-2 sprays per nostril</td>
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#### STEP 1: Keep taking DAILY / CONTROLLER medication

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#### STEP 2: ADD SICK / QUICK RELIEF medication

- Albuterol nebulized: 1 / 2 units, Every 4 hours as needed
- Albuterol inhaler (Proventil, Ventolin, Proair): 2 / 4 puffs, Every 4 hours as needed

#### STEP 3: If you feel better, go back to the Green Zone

#### STEP 4: If you are not better in 6 hours - Call the office

**If you have been in the YELLOW ZONE for > 24 hours**

1. Use Albuterol inhaler (Proventil, Ventolin, Proair): 4 puffs, Every 3-4 hours
2. CALL your doctor

**OR**

1. Go to hospital OR call 911
2. CONTINUE to use your SICK medication on the way!

### Things that can worsen your asthma:

- Cold/flu
- Exercise
- Dust
- Pollen
- Mold
- Pets
- Perfumes or things that smell strong
- Very hot or very cold weather
- Smoke: cigarette, wood
- Foods:________________________
- Other:________________________
- Take SICK / QUICK RELIEF medication (before exercise/trigger)

### Personal Goals:

# 1: Get your Flu shot every fall!

SC Tobacco Quit line: 1-800-QUIT-NOW