I want to be able to:	



## My asthma action plan

	D				
Ooctor's name:					
octor's phone #:		Date:	-		
Controller medicines	How much to take	How often	Other instructions		
		times per day EVERY DAY	☐ Gargle or rinse mouth after use		
		times per day			
		times per day EVERY DAY			
Quick-relief medicines	How much to take	How often	Other instructions		
	□ 2 puffs □ 4-6 puffs □ 1 nebulizer treatment	Take ONLY as needed (see below — starting in Yellow Zone or before excercise)	NOTE: If you need this medicine more than 2 days a week, call your doctor.		
Asthma triggers (check all that Described Desc	emperature 🔾 Molds	☐ Strong emotions	odors or fumes		
- "			ima symptoms every day:		
Doing well.  • No coughing, wheezing, chest tightness, shortness of breath during the day or night  • Can go to school and play		Take my controller medicines (above) every day  Before exercise, take puff(s) of  Avoid triggers that make my asthma worse (See above)			
Be careful.  Coughing, wheezing, chee tightness, shortness of bree Waking at night due to asthma symptoms  Can do some, but not all, usual activities  Runny nose, watery eyes		Take quick relief within one line ded. Ca	by Continue taking my controller medicines every day.  ke puffs or nebulizer treatment(s) of ick relief medicine. If I am not back in the Green Zone thin one hour, then I should:  antinue using quick relief medicine every 4 hours as eded. Call provider if not improving in days.  trease		
Ask for help.  • Very short of breath  • Continual coughing  • Skin between ribs is pullin	g inwards t running	Take quick-minutes and	relief medicine: puffs every d get help immediately.		

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