

ASTHMA ACTION PLAN

Name: Date: Best Peak Flow*

**Not recommended for children under 12 years*

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| <p>WHEN WELL</p> <p>Asthma under control (<i>almost no symptoms</i>)</p> <p>Preventer Dose</p> <p>..... Dose</p> <p>Reliever Dose</p> <p>Symptom controller (if prescribed) Dose</p> <p>Combination medication (if prescribed) Dose</p> | <p>Peak flow above</p> <div style="border: 1px solid black; width: 60px; height: 20px; margin: 0 auto;"></div> |
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| <p>WHEN NOT WELL</p> <p>Asthma getting worse (<i>waking from sleep, at the first sign of a cold, using more reliever</i>)</p> <p>Preventer Dose</p> <p>Reliever Dose</p> <p>Continue symptom controller</p> <p>Continue combination medication</p> <p>Continue on this increased dosage for before returning to the dose you take when well</p> | <p>Peak flow between</p> <div style="border: 1px solid black; width: 60px; height: 20px; margin: 0 auto;"></div> <p style="text-align: center;">and</p> <div style="border: 1px solid black; width: 60px; height: 20px; margin: 0 auto;"></div> |
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| <p>IF SYMPTOMS GET WORSE</p> <p>Asthma is severe</p> <p>Start prednisolone/prednisone and contact doctor Dose</p> <ul style="list-style-type: none"> Stay on this dose until your peak flow is above on two consecutive mornings Reduce prednisolone/prednisone to dose daily for days, then cease <p>Extra steps to take:</p> <p>When your symptoms get better, return to the dose you take when well.</p> | <p>Peak flow between</p> <div style="border: 1px solid white; width: 60px; height: 20px; margin: 0 auto;"></div> <p style="text-align: center;">and</p> <div style="border: 1px solid white; width: 60px; height: 20px; margin: 0 auto;"></div> |
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| <p>DANGER SIGNS</p> <p style="text-align: center;">(symptoms get worse very quickly, need reliever more than 2 hourly)</p> <p>Continue reliever</p> | <p>Peak flow below</p> <div style="border: 1px solid white; width: 60px; height: 20px; margin: 0 auto;"></div> |
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Doctor's stamp and/or contact details:

Pharmacist's stamp and/or contact details:



To reorder more Asthma Action Plans,
please call the National Asthma Council hotline: 1800 032 495

WHEN WELL

You will be

- free of regular night-time wheeze or cough or chest tightness
- have no regular wheeze or cough or chest tightness on waking or during the day
- be able to take part in normal physical activity without getting asthma symptoms
- need reliever medication less than 3 times a week (except if it is used before exercise)

WHEN NOT WELL

You will

- have increasing night-time wheeze or cough or chest tightness
- have symptoms regularly in the morning when you wake up
- have a need for extra doses of reliever medication
- have symptoms which interfere with exercise
- (You may experience one or more of these)

IF SYMPTOMS GET WORSE, THIS IS AN ACUTE ATTACK

You will

- have one or more of the following: wheeze, cough, chest tightness or shortness of breath
- need to use your reliever medication at least once every 3 hours or more often

DANGER SIGNS

- **your symptoms get worse very quickly**
- **wheeze or chest tightness or shortness of breath continue after using reliever medication or return within minutes of taking reliever medication**
- **severe shortness of breath, inability to speak comfortably, blueness of lips**

IMMEDIATE ACTION IS NEEDED: CALL AN AMBULANCE

Take this Action Plan with you when you visit your doctor.