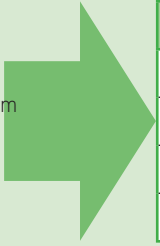


Name: \_\_\_\_\_ Date: \_\_\_\_\_  
 Emergency Contact: \_\_\_\_\_ Relationship: \_\_\_\_\_  
 Cell phone: \_\_\_\_\_ Work phone: \_\_\_\_\_  
 Health Care Provider: \_\_\_\_\_ Phone number: \_\_\_\_\_  
 Personal Best Peak Flow: \_\_\_\_\_

## ASTHMA ACTION PLAN

### GREEN ZONE:

#### Doing Well

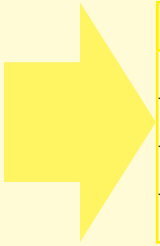
- ✓ No coughing, wheezing, chest tightness, or difficulty breathing
  - ✓ Can work, play, exercise, perform usual activities without symptoms
  - OR
  - ✓ Peak flow \_\_\_\_ to \_\_\_\_  
(80% to 100% of personal best)
- 

Take these medicines every day for control and maintenance:

Medicine	How much to take	When and how often

### YELLOW ZONE:

#### Caution/Getting Worse

- ✓ Coughing, wheezing, chest tightness, or difficulty breathing
  - ✓ Symptoms with daily activities, work, play, and exercise
  - ✓ Nighttime awakenings with symptoms
  - OR
  - ✓ Peak flow \_\_\_\_ to \_\_\_\_  
(50% to 80% of personal best)
- 

CONTINUE your Green Zone medicines PLUS take these quick-relief medicines:


Medicine	How much to take	When and how often

**Call your doctor if you have been in the Yellow Zone for more than 24 hours.**

Also call your doctor if: \_\_\_\_\_  
 \_\_\_\_\_

### RED ZONE:

#### Alert!

- ✓ Difficulty breathing, coughing, wheezing not helped with medications
  - ✓ Trouble walking or talking due to asthma symptoms
  - ✓ Not responding to quick relief medication
  - OR
  - ✓ Peak flow is less than \_\_\_\_  
(50% of personal best)
- 

### FOR EXTREME TROUBLE BREATHING/SHORTNESS OF BREATH GET IMMEDIATE HELP!

Take these quick-relief medicines:

Medicine	How much to take	When and how often

**CALL your doctor NOW.**

**GO to the hospital/emergency department or CALL for an ambulance NOW!**