

# A.S.M.A. (Asthma Self-Management Action) Plan

A.S.M.A. plan for \_\_\_\_\_ Health care provider name \_\_\_\_\_ Date \_\_\_\_\_

Health care provider phone \_\_\_\_\_ After hours \_\_\_\_\_ Hospital/Emergency Department phone \_\_\_\_\_

## GREEN ZONE: Doing Well

- No cough, wheeze, chest tightness, or shortness of breath during the day or night
- Can do usual activities

### If a peak flow meter is used:

My personal best peak flow is \_\_\_\_\_ (L/min)

**Peak flow:** more than \_\_\_\_\_  
(80% or more of my best peak flow)

Before exercise, take \_\_\_\_\_

**Even if you do not have symptoms, take these long-term control medicines each day.**

Medicine	How much to take	When to take it
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

(Medicine) (Dose) (Minutes/Hours before exercise)

## YELLOW ZONE: Asthma Is Getting Worse

- Cough, wheeze, chest tightness, or shortness of breath **or**
- Waking at night due to asthma **or**
- Can do some, but not all, usual activities

**or**

**Peak flow:** \_\_\_\_\_ to \_\_\_\_\_ (L/min)  
(50%–79% of my best peak flow)

**FIRST**

**Add quick-relief medicine and keep taking your GREEN ZONE medicine.**

\_\_\_\_\_ (short-acting  $\beta_2$ -agonist)  2 to \_\_\_\_\_ puffs every \_\_\_\_\_ minutes for \_\_\_\_\_ treatments **or**  
 Nebulizer treatments.

**SECOND**

**If your symptoms (and peak flow, if used) return to the GREEN ZONE after 1 hour of above treatment:**

Continue monitoring to be sure you stay in the GREEN ZONE.

**or**

**If your symptoms (and peak flow, if used) do not return to the GREEN ZONE after 1 hour of above treatment:**

Take \_\_\_\_\_ (short-acting  $\beta_2$ -agonist)  2 or  4 puffs or  Nebulizer every \_\_\_\_\_ hours.

Add \_\_\_\_\_ mg per day for \_\_\_\_\_ (3–10) days.  
(oral steroid)

Add \_\_\_\_\_ per day for \_\_\_\_\_ days.

Call the health care provider  before **or**  within \_\_\_\_\_ hours after taking the oral steroid.

## RED ZONE: Medical Alert!

- Very short of breath **or**
- Quick-relief medicines have not helped **or**
- Cannot do usual activities **or**
- Symptoms are the same or worse after 24 hours in YELLOW ZONE

**or**

**Peak flow:** less than \_\_\_\_\_ (L/min)  
(less than 50% of my best peak flow)

**Take this medicine:**

\_\_\_\_\_ (short-acting  $\beta_2$ -agonist)  4 or  6 puffs or  nebulizer

\_\_\_\_\_ mg  
(oral steroid)

**Call your health care provider NOW.** Go to the hospital or call for an ambulance if:

- You are still in the RED ZONE after 15 minutes **AND**
- You have not reached your doctor

## DANGER SIGNS

- Trouble walking and talking due to shortness of breath
- Lips or fingernails are blue

Take  4 or  6 puffs of your quick-relief medicine **AND**  
Go to the hospital or call for an ambulance ( \_\_\_\_\_ ) **NOW!**

**People who should have a copy of my A.S.M.A. plan: spouse, school nurse, coworkers, babysitter, family members, friends.**

Adapted from National Heart, Lung, and Blood Institute. *Asthma Action Plan*. Bethesda, MD: US Dept of Health and Human Services: April 2007. NIH publication 07-5251.

# Your Asthma Control Goals

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## Asthma control: What can it mean for you?

### The goals of asthma treatment are to help you:

- Experience relief from asthma symptoms, such as wheezing, coughing, shortness of breath, and chest tightness
- Need a fast-acting inhaler fewer than 2 days a week
- Sleep through the night and not wake up because of asthma symptoms
- Go to work or school and not have to miss days because of asthma
- Join in activities, including sports and exercise
- Avoid unscheduled doctor, emergency room, or urgent-care visits

### Notes:

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## Tips to help control your asthma

### Your health:

- Take your asthma medicines as your doctor recommends, even when you feel well.
- Do not take over-the-counter cold medicines without talking to your doctor or pharmacist first.
- Avoid people with colds or flu as much as possible and talk to your doctor about getting a flu shot every year.

### Where you live, work, or go to school:

- Keep your **HOUSE** clean of dust and molds.
- Avoid cigar and cigarette **SMOKE** as much as possible.
- Avoid strong **ODORS**, such as paint, perfume, and hair spray.
- Wear a scarf or a **COLD AIR** mask over your mouth when it's cold outside.

### In addition, if you have allergies:

- Wash blankets and sheets once a week in **HOT WATER**.
- Wash clothing and stuffed toys in **HOT WATER**.
- Keep **PETS** out of the bedroom and wash pets weekly.
- Avoid going outside if the **POLLEN COUNT** is high.
- Cover mattress and pillows with airtight **PLASTIC COVERS**.