

ASTHMA ACTION PLAN FOR CHILDREN

Name: _____ Date: _____

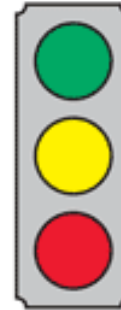
Medical record #: _____ Physician phone number: _____

Patient goal: _____

Important! Your triggers to avoid: _____

Personal best peak flow: _____

The colors of the traffic light will help you use your asthma medicines.



Green means: Go Zone!

Use preventive medicine.

Yellow means: Caution Zone!

Add quick-relief medicine.

Red means: Danger Zone!

Get help from a physician.

GO

You have *all* of these:

- Breathing is good
- No cough or wheeze
- Sleep through the night
- Can work and play



Peak flow from

to

Use these daily preventive anti-inflammatory medicines:

Medicine	How much	How often/when

CAUTION

You have *any* of these:

- First signs of a cold
- Exposure to known trigger
- Cough
- Mild wheeze
- Tight chest
- Coughing at night



Peak flow from

to

Continue with green Go Zone medicine and add:

Medicine	How much	How often/when

Call your family physician if you are not better soon.

DANGER

Your asthma is getting worse fast:

- Medicine is not helping
- Breathing is hard and fast
- Nose opens wide
- Ribs show
- Can't talk well



Peak flow from

to

Take these medicines and call your family physician now.

Medicine	How much	How often/when

Get help now! Do not be afraid of causing a fuss. Your physician will want to see you right away. It's important! If you cannot contact your family physician, go directly to the emergency room. DO NOT WAIT. Make an appointment with your family physician within two days of an emergency room visit or hospitalization.

Physician's signature: _____