

# ASTHMA ACTION PLAN

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Name: \_\_\_\_\_

Doctor: \_\_\_\_\_

Number of Doctor or Clinic: \_\_\_\_\_

Number of friend/ relative/ taxi: \_\_\_\_\_

Personal best peak flow reading: \_\_\_\_\_



Remember the traffic light!

**RED – DANGER**

**YELLOW – BE CAREFUL**

**GREEN – GO**

## GREEN (GO!) – USE YOUR PREVENTER MEDICATION

If all the following apply:

- Breathing well
- No cough, SOB, or wheeze
- Can sleep through the night.
- Can work and play.
- Peak flow  $\geq 80\%$



MEDICATION NAME (colour)	HOW MUCH	HOW OFTEN/ WHEN
If you have symptoms with exercise, use this medication 20 minutes before sports/ exercise: _____		

## YELLOW (BE CAREFUL!) – CONTINUE GREEN ZONE MEDICATION AND ADD:

If you have **any** of these:

- Symptoms of a cold
- Cough
- Mild wheezing
- Tight chest
- Night-time cough
- Peak flow 51 to 79 %



MEDICATION NAME (colour)	HOW MUCH	HOW OFTEN/ WHEN

## RED (DANGER!) – CALL/ SEE YOUR DOCTOR NOW & USE THESE MEDICATIONS

If you have **any** of these, then you are getting worse and fast:

- Not feeling better
- Breathing hard and fast
- Ribs show
- Nose opens wide
- Can't talk well
- Peak flow  $\leq 50\%$



MEDICATION NAME (colour)	HOW MUCH	HOW OFTEN/ WHEN

**NB: This is not to be used for those using MART® therapy.**

# ASTHMA ACTION PLAN: INSTRUCTIONS FOR PATIENTS

This plan is to help you with the management of your asthma.

Each of the coloured blocks represents the various stages of asthma symptoms and how to approach treatment.

Make sure to discuss this plan with your/your child's doctor/clinician before you leave the office.

## For the GREEN ZONE:

- This is for when asthma control is good.
- Daily use of the medications listed should be expected to keep asthma symptoms away.

## For the YELLOW ZONE:

- This is for when asthma control has suddenly fallen.
- A fall of 20% below personal best peak flow likely puts you/your child in the yellow zone.
- If the preventer medication was not being used regularly, then it is to be restarted.
- If the preventer medication was being used, then the dose is to be increased, as listed in the table, until symptoms go away, or peak flow has returned to an acceptable value.
- Start reliever medications as listed in table.
- If there is no improvement within 48 hours, then contact your regular or nearest doctor/ health facility.
- If the peak flow falls below 60% of the personal best, then you may need to use oral prednisone/ prednisolone (as listed in table).
- If oral prednisone/prednisolone has been taken (according to the table), then make sure to go to the nearest doctor/ health facility within 24 hours.

## For the RED ZONE:

- **This is the emergency zone and requires quick medical attention!**
- Sit up straight and try to remain calm.
- Take the reliever medications as listed in the table while you are preparing to go to the nearest doctor/ health facility.
- Start oral prednisone/ prednisolone if prescribed (according to the table).
- Plan to get to the nearest doctor/ health facility/ emergency room within 1 hour of these symptoms.

**If you can't see another doctor, then go to the emergency room as soon as possible. Make an appointment with your doctor/ clinic within 2 days after being seen at the emergency room.**

## ASTHMA ACTION PLAN: INSTRUCTIONS FOR CLINICIANS

This plan is to help with patient self-management of their asthma.

Each of the coloured blocks represents the various stages of asthma symptoms and how to approach treatment.

All medications are to be given using a spacer (as well as a facemask, if applicable).

Can be used with/or without peak flow information in most cases.

This plan **must be discussed** between doctor/clinician and the patient/parent before the patient/parent leaves the office.

A copy of the Asthma Action Plan should be printed along with the patient's instructions.

Device use education must be done and checked at every opportunity.

### For the GREEN ZONE:

- This is for when asthma control is good.
- Educate patient/parent that daily use of the medications listed should be expected to keep asthma symptoms away.

### For the YELLOW ZONE:

- This is for when asthma control has suddenly fallen.
- A fall of 20% below personal best peak flow likely puts the patient in the yellow zone.
- Instruct the patient that if preventer medication was not being used regularly, then it is to be restarted.
- Or, if the preventer medication was being used, then the dose is to be increased (quadrupled daily dosing in most instances<sup>¥</sup>). List the medication accordingly in the table and instruct the patient to use it until symptoms go away, or peak flow has returned to an acceptable value.
- List reliever medications as in table and instruct the patient how to use it.
- If the peak flow falls below 60% of the personal best, then prednisone/prednisolone use may be warranted. List it in the table and instruct the patient how to use it.

### For the RED ZONE:

- **This is the emergency zone and requires quick medical attention!**
- Advise the patient that if they are in the red zone to sit up straight, and remain calm, and go to the nearest doctor/health facility.
- List reliever medications in the table and instruct the patient that they are to take it while preparing to go to the nearest doctor/health facility.
- List oral prednisone/prednisolone and instruct the patient how/when to use it.
- Instruct the patient that they are to get to the nearest doctor/health facility/ emergency room within 1 hour of these symptoms.

**Instruct the patient/parent that if they can't see a doctor, then go to the emergency room as soon as possible. Make an appointment with their doctor/clinic within 2 days after being seen at the emergency room.**

<sup>¥</sup> - in cases where a patient is already on highest dose steroids, then addition of oral steroids may be more useful.

# MART ASTHMA ACTION PLAN

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Name: \_\_\_\_\_

Doctor: \_\_\_\_\_

Number of Doctor or Clinic: \_\_\_\_\_

Number of friend/ relative/ taxi: \_\_\_\_\_

Personal best (PB) peak flow reading: \_\_\_\_\_



Remember the traffic light!

**RED – DANGER**

**YELLOW – BE CAREFUL**

**GREEN – GO**

## GREEN (GO!) – USE YOUR PREVENTER MEDICATIONS

If all the following apply:

- Breathing well
- No cough, SOB, or wheeze
- Can sleep through the night.
- Can work and play.
- Peak flow >80% of PB



MEDICATION NAME & DOSE	HOW MUCH	HOW OFTEN/ WHEN
Formoterol/budesonide____		Every 12 hours
If you have symptoms with exercise, use this medication 20 minutes before sports/exercise:		
*Salbutamol	2 puffs	20 mins before exercise

## YELLOW (BE CAREFUL!) USE MEDICATIONS AS FOLLOWS

- Cough
- Mild wheezing
- Tight chest
- Night-time cough
- Peak flow <80% of PB



MEDICATION NAME & DOSE	HOW MUCH	HOW OFTEN/ WHEN
Formoterol/budesonide____		Every 6 hours
<b>NB: Up to 12 puffs/inhalations daily (age ≥12 years)</b>		
If no improvement over 2 – 3 days please seek medical attention!		

## RED (DANGER!) – SEE YOUR DOCTOR NOW & USE THESE MEDICATIONS!

If there is no improvement over 2-3 days or you are getting worse:

- Not feeling better
- Breathing hard and fast
- Ribs show
- Nose opens wide
- Can't talk well
- Meds not working
- Peak flow <50% of PB



MEDICATION NAME & DOSE	HOW MUCH	HOW OFTEN/ WHEN
Formoterol/budesonide____	1 puff/ inhalation	Every 2 mins <sup>y</sup>
<b><sup>y</sup>Up to a maximum of 6 puffs (age ≥ 12 years) on a single occasion on the way to seek emergency medical attention. Daily maximum is 12 puffs/day (age ≥ 12 years).</b>		

**NB: This asthma plan is only to be used for those using MART therapy.**

\*MART therapy is not suggested for patients with exercise induced asthma.

## INSTRUCTIONS FOR USE OF MART ASTHMA ACTION PLAN FOR PATIENTS

- This plan is to help you with self-management of your/your child's asthma with a maintenance and reliever single device.
- Each of the coloured blocks represents the various stages of asthma symptoms and how to approach treatment.
- All medications are to be given using a spacer, if needed, depending on device (as well as a facemask as recommended by the doctor).
- Can be used with or without peak flow information in most cases.
- This plan **must be discussed** with your/your child's doctor before parent leaves the office.
- You must carry the device at all times.
- A separate rescue inhaler such as salbutamol is not necessary in most cases (except perhaps if there are exercise-induced symptoms).

### For the GREEN ZONE:

- This is for when asthma control is good.
- Daily use of the medications listed should be expected to keep asthma symptoms under control.
- Please note that there is no reliever component in the Green zone. You/your child should be well controlled on budesonide/formoterol maintenance and **not use** formoterol/budesonide as a reliever.
- If you/your child experience breakthrough symptom such as cough, and mild wheeze, it puts you/ them into the Yellow zone and they will use the budesonide/formoterol maintenance and reliever according to the Yellow zone of the table.

### For the YELLOW ZONE:

- This is for when asthma control has suddenly fallen.
- A fall of 20% below personal best peak flow likely puts the patient in the yellow zone.
- If the preventer medication was not being used regularly, then it is to be restarted.
- If the preventer medication was being used, then the dose is to be increased as listed, until symptoms go away, or peak flow has returned to an acceptable value.
- If there is no improvement within 2 days, then contact your regular or nearest doctor/ health facility.
- If more than 8 inhalations (your child) or 12 inhalations (you) are needed in a day, then urgently seek medical care.

### For the RED ZONE:

- **This is the emergency zone and requires quick medical attention!**
- Sit up straight and try to remain calm.
- Take the medications listed in the table while you are preparing to go to the nearest doctor/ health facility.
- Plan to get to the nearest doctor/health facility/emergency room within 1 hour of these symptoms even if the symptoms seem to settle.

**If you can't see another doctor, then go to the emergency room as soon as possible. Make an appointment with your doctor/ clinic within 2 days after being seen at the emergency room.**

## INSTRUCTIONS FOR USE OF MART ASTHMA ACTION PLAN FOR CLINICIANS

- This plan is to help with patient self-management of their asthma with a maintenance and reliever single device.
- Each of the coloured blocks represents the various stages of asthma symptoms and how to approach treatment.
- All medications are to be given using a spacer, if needed, depending on device (as well as a facemask as recommended by the doctor).
- Can be used with or without peak flow information in most cases.
- This plan **must be discussed** between the doctor and the patient/parent before the patient/parent leaves the office.
- Device use education must be done and checked at every opportunity.
- Device must be carried with the patient at all times.
- A copy of the MART Asthma Action Plan should be printed along with these instructions.
- A separate rescue inhaler such as salbutamol is not necessary in most cases (except perhaps if there are exercise-induced symptoms).

### For the GREEN ZONE:

- This is for when asthma control is good.
- Daily use of the medications listed should be expected to keep asthma symptoms under control.
- Please note that there is no reliever component in the Green zone. Patients should be well controlled on budesonide/formoterol maintenance and **not use** formoterol/budesonide as a reliever. Whenever they experience breakthrough symptoms, it puts them into the Yellow zone and they will use the budesonide/formoterol maintenance and reliever according to the Yellow zone of the table.

### For the YELLOW ZONE:

- This is for when asthma control has suddenly fallen.
- A fall of 20% below personal best peak flow likely puts the patient in the yellow zone.
- If the preventer medication was not being used regularly, then it is to be restarted.
- If the preventer medication was being used, then the dose is to be increased as listed, until symptoms go away, or peak flow has returned to an acceptable value.
- If there is no improvement within 7 days, then contact your regular or nearest doctor/ health facility.
- If the peak flow falls below 60% of the personal best, then prednisone/prednisolone use may be warranted.
- If prednisone/prednisolone has been taken (according to the table), then make sure to go to the nearest doctor/ health facility within 24 hours.
- If more than 12 inhalations are needed in a day, then urgently seek medical care.

**For the RED ZONE:**

- **This is the emergency zone and requires quick medical attention! Give them the following directions:**
  - Sit up straight and try to remain calm.
  - Take the medications listed in the table while you are preparing to go to the nearest doctor/ health facility.
  - Plan to get to the nearest doctor/health facility/emergency room within 1 hour of these symptoms even if the symptoms seem to settle.
  - **If they can't see another doctor, then go to the emergency room as soon as possible.**
  - **Make an appointment with your doctor/ clinic within 2 days after being seen at the emergency room.**