Asthma action plan for adults
Your self-care plan to prevent and treat acute episodes

Keeping your asthma in good control can make it easier to do normal daily activities. Good control can also help you avoid trips to the emergency room or hospital to treat a flare up or episode of asthma.

Many people can’t tell when their asthma is starting to flare up until after they are well into an episode. Developing an asthma action plan can help you keep your asthma under control and avoid episodes.

Putting your asthma action plan together
Your asthma action plan is based on your symptoms and best possible peak flow number. Take your personal best peak flow recorded on your chart. **Your personal best is ________.**

The Peak Flow Zone System
Peak flow numbers are often put into **zones** set up like a traffic light. This helps you know what to do when your peak flow number changes. Your asthma medicines depend on if you’re in the green, yellow, or red zone. See the back of this page to set up your asthma action plan.

Medicines for asthma
**Controller medicines** are used everyday to help keep your airways open. Examples include inhaled corticosteroids such as QVAR®, Flovent®, Advair®, and oral medicine such as Singulair®.

**Rescue medicines** are used to relax the airways in your lungs to help stop an episode. Albuterol is one example of a rescue medicine.

**Oral corticosteroids** (called oral steroids) are medicines that treat the swelling and extra mucus produced by inflamed airways. Examples include prednisone and Medrol®. These are similar to the steroids our bodies make every day (they are not the muscle-building type of steroids.) You’ll use an oral steroid if your rescue medicine doesn’t work to control a flare of asthma.

**Side effects of oral steroids**
Taking oral steroids for a short time rarely causes side effects. When side effects do happen, they can usually be reversed once you stop taking the medicine.

Side effects include the following: mood changes, acne, problems sleeping, full or red cheeks, feeling hungrier, and gaining weight. Steroids can also make some health problems worse. These include peptic ulcer disease, tuberculosis, glaucoma, depression, aseptic necrosis, high blood pressure or diabetes. If you have, or have had, any of these health conditions, talk to your doctor before taking oral steroids.
**Green Zone: I feel well**

You want to be here every day. If you’re in this zone it means you have no signs of an asthma episode. You can do your usual activities and sleep without having symptoms.

Peak flow above: __________

(over 80% of personal best)

- Take your inhaled corticosteroid as usual.
- You may sometimes need a rescue medicine: Use albuterol MDI inhaler, 1-2 puffs every 4-6 hours as needed and before exercise.

If you need your rescue medicine more than 2 times a week, talk to your doctor about increasing your controller medicines.

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**Yellow Zone: I do not feel well**

You might have mild or moderate signs of an asthma episode. These could include coughing, wheezing, being short of breath or feeling tightness in the chest. Symptoms might keep you from your usual activities or sleeping.

**High Yellow Zone:**

Peak flow: ______ to ______

(65-80% of personal best)

**Low Yellow Zone:**

Peak flow: ______ to ______

(50%-65% of personal best)

- Use albuterol inhaler: 2-4 puffs every 20 minutes for up to 1 hour or until you return to the green zone.
- Check peak flow 10 minutes after each treatment.
- If you stay in this zone for more than 12 hours, take twice as much of your inhaled corticosteroid, unless your doctor has given you other instructions. Do this until your peak flow stays in the green zone for the same amount of time that it was in the yellow zone.

**Low Yellow Zone**

- Use albuterol inhaler and check peak flow following instructions above.
- If you stay in this zone for more than 12 hours, take four times as much of your inhaled corticosteroid, unless your doctor has given you other instructions. Do this until your peak flow stays in the green zone for the same amount of time that it was in the yellow zone.

If you’re in the high yellow zone for more than 5 days, call your doctor. We might need to change your controller medicines to keep your asthma under better control and avoid episodes.

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**Red Zone: I feel awful**

This is an emergency. Your asthma is seriously out of control. Signs include coughing, having trouble breathing, wheezing loudly, or having trouble walking or talking. If you aren’t wheezing, it could be because air can’t easily move out of your airways.

Peak flow below: __________

(below 50% of personal best)

- Use albuterol inhaler: 4-6 puffs every 10 minutes for up to 30 minutes or until you return to the yellow zone.
- Check peak flow 10 minutes after each treatment.
  - If you have prednisone, take 60 mg right away. Then take 20 mg twice a day for at least 3 days, even if your symptoms go away or your peak flow stays in the green zone for 24 hours. Do not take prednisone for more than 10 days. **Call your doctor whenever you start taking prednisone.**
  - If you don’t have prednisone, call your doctor. After hours, call the Consulting Nurse Service: 1-800-297-6877.
- **Call your doctor.** Follow-up is critical.
- If you don’t return to the yellow zone within 30 minutes or your asthma gets worse, get medical care right away.

If your lips or fingernails become blue or if you’re struggling to breathe, **call 911 right away.**