

Your personal asthma action plan

This plan aims to help you recognise early warning signs and what to do to prevent an asthma attack.

Your doctor or nurse will fill in this plan with you.

Your plan should be reviewed regularly and if your medicines change.

Never stop taking your asthma medicines without talking to your doctor or nurse first.

Further information

Asthma UK
www.asthma.org.uk

British Lung Foundation
www.lunguk.org

Contacts

Asthma UK Adviceline
0800 121 6244

GP surgery:

Hospital respiratory nurse:
.....

Produced by:
The Ipswich Hospital NHS Trust
Heath Road, Ipswich, Suffolk IP4 5PD
Hospital switchboard: 01473 712233
www.ipswichhospital.nhs.uk

Your asthma goals

- No need for your reliever inhaler.
- No daytime symptoms (cough, wheeze).
- No waking during the night due to asthma.
- No attacks or limitations on your lifestyle.

Name:

Your best/predicted peak flow:

Your **preventer** inhaler (name/colour):
.....

take every day, even when feeling well
..... puffs, times a day.

Your **reliever** inhaler (name/colour):
.....

..... puffs, when you have symptoms.

Other medication:
.....

Remember – inhaler technique:
Long, slow inhalation – ‘press’ inhalers
Fast from the start – dry powder inhalers.

The Ipswich Hospital 
NHS Trust


**Ipswich and East Suffolk
Clinical Commissioning Group**

Asthma Action Plan

Information for patients

DPS ref. 00313-15(RP)

Issue 3: March 2015 Review date: February 2018
© The Ipswich Hospital NHS Trust, 2011-2015. All rights reserved. Not to be reproduced in whole, or in part, without the permission of the copyright owner.

YELLOW ZONE

Your asthma is getting worse.

Symptoms:

- You are having trouble sleeping because of your asthma.
- You need to use your reliever inhaler more than once a day.

Peak flows are:

Less than 75% of your best:

ACTION TO TAKE

- Increase your preventer inhaler:
Name:
Colour:
to puffs times a day.
 - See your doctor or nurse if your symptoms do not improve in days.
-
- If you're on Fostair® or Symbicort®, as flexible dosing (known as MART or SMART) increase your inhaler to a maximum of eight puffs in total in 24 hours.

ORANGE ZONE

Your asthma is much more severe.

Symptoms:

- You have symptoms most of the time.
- You are struggling to do your usual activities.
- You need to take your reliever inhaler every four hours or more often.

Peak flows are:

Less than 50% of your best:

ACTION TO TAKE

- Take more puffs of your preventer inhaler, as in the YELLOW ZONE.
- If you have been prescribed steroid tablets, take 5 mg prednisolone tablets immediately and every morning for days or until your peak flow has been higher than for two days.
- See your doctor within 24–36 hours of starting the steroid tablets.

RED ZONE

Seek emergency help.

Symptoms:

- Your reliever inhaler is not helping.
- You are too breathless to speak.
- Your symptoms get worse with wheeze, tight chest, cough, breathlessness.

Peak flows are:

Less than 33% of your best:

ACTION TO TAKE

- Take your reliever inhaler:
.....
immediately.
- If there is no improvement during the attack, take one puff of your reliever inhaler every minute for 5 minutes, or until your symptoms improve, via a spacer.
- If you have been prescribed steroid tablets, take 5 mg prednisolone tablets immediately and every morning for days or until your peak flow has been higher than for two days.
- If you are not improving after 5 minutes, or if in doubt, call 999 or a doctor immediately.

Maximum dose for your reliever inhaler: puffs, times a day.

