

! MY ASTHMA TRIGGERS

Taking my asthma medicine each day will help reduce my reaction to these triggers. Avoiding them where possible will also help.

! MY ASTHMA REVIEW

I should have at least one routine asthma review every year.

I will bring:

- My action plan to see if it needs updating
- My inhaler and spacer to check I'm using them in the best way
- Any questions about my asthma and how to cope with it.

Next asthma review date:

___ / ___ / ___

GP/asthma nurse contact

Name: _____
Phone number: _____

Out-of-hours contact number

(ask your GP surgery who to call when they are closed)

Name: _____
Phone number: _____

Get more advice & support from Asthma UK:

📞 Speak to a specialist asthma nurse about managing your asthma on: **0800 121 62 44**

📄 Get news, advice and download information packs at: **www.asthma.org.uk**



© 2014 Asthma UK registered charity number in England and Wales 802364 and in Scotland SC039322

HP2641114: First published 2004; last updated 2014; last reviewed 2014; next review 2016

*Adams et al; Factors associated with hospital admissions and repeat emergency department visits for adults with asthma; Thorax 2000;55:566-573

Use it, don't lose it!

Your action plan is a personal guide to help you stay on top of your asthma. Once you have created one with your GP or asthma nurse, it can help you stay as well as possible.

People who use their action plans are four times less likely to end up in hospital because of their asthma.

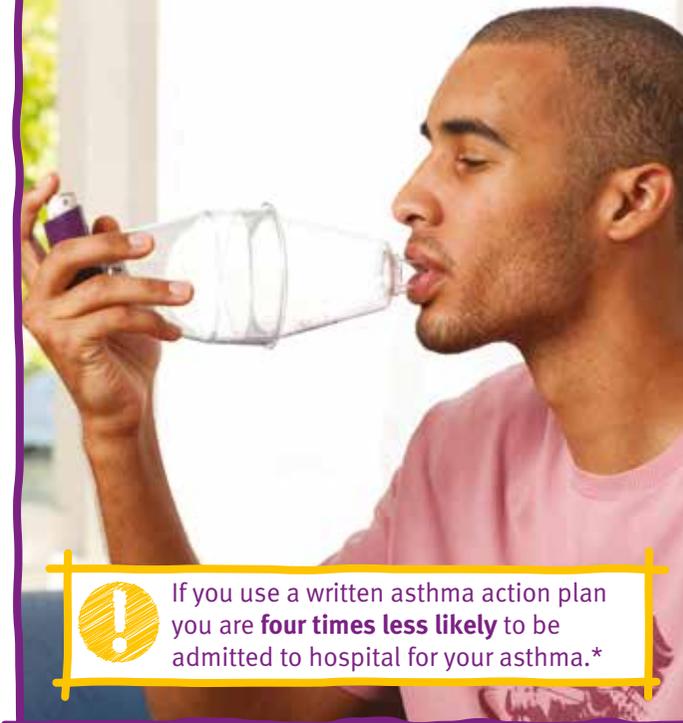
Your action plan will only work at its best to help keep you healthy if you:

- 1 Put it somewhere easy for you and your family to find** – you could try your fridge door, the back of your front door, or your bedside table.
- 2 Check in with it regularly** – put a note on your calendar, or a reminder on your mobile to read it through once a month. How are you getting along with your day-to-day asthma medication? Are you having any asthma symptoms? Are you clear about what to do?
- 3 Keep an extra copy yourself** – so you've got a handy back-up. You could have one at work, in your handbag or in your car glove compartment.
- 4 Give a copy to a key family member or friend** – ask them to read it and talk to them about your usual asthma symptoms so they can help you notice if you start to have them, and know what to do in an emergency.
- 5 Take it to every healthcare appointment – including A&E/consultant.** Ask your GP or asthma nurse to update it if any of their advice for you changes. Ask them for tips if you're finding it hard to take your medicines as prescribed.

THE STEP-BY-STEP GUIDE THAT HELPS YOU STAY ON TOP OF YOUR ASTHMA

Your asthma action plan

FILL THIS IN WITH YOUR GP OR ASTHMA NURSE



If you use a written asthma action plan you are **four times less likely** to be admitted to hospital for your asthma.*

Name and date:



with you every breath of the way



This is what I need to do to stay on top of my asthma:

My personal best peak flow is:

My **preventer** inhaler (insert name/colour):

I need to take my preventer inhaler every day even when I feel well

I take puff(s) in the morning and puff(s) at night.

My **reliever** inhaler (insert name/colour):

I take my reliever inhaler only if I need to

I take puff(s) of my reliever inhaler if any of these things happen:

- I'm wheezing
- My chest feels tight
- I'm finding it hard to breathe
- I'm coughing.

Other medicines I take for my asthma every day:

With this daily routine I should expect/aim to have **no symptoms**. If I haven't had any symptoms or needed my reliever inhaler for at least 12 weeks, ask my GP or asthma nurse to review my medicines in case they can reduce the dose.



People with allergies need to be extra careful as attacks can be more severe.



My asthma is getting worse if I notice any of these:

- My symptoms are coming back (wheeze, tightness in my chest, feeling breathless, cough)
- I am waking up at night
- My symptoms are interfering with my usual day-to-day activities (eg at work, exercising)
- I am using my reliever inhaler times a week or more
- My peak flow drops to below

This is what I can do straight away to get on top of my asthma:

1 If I haven't been using my preventer inhaler, start using it regularly again or:

Increase my preventer inhaler dose to puffs times a day until my symptoms have gone and my peak flow is back to normal

Take my reliever inhaler as needed (up to puffs every four hours)

If I don't improve within 48 hours make an urgent appointment to see my GP or asthma nurse.

2 If I have been given prednisolone tablets (steroid tablets) to keep at home:

Take mg of prednisolone tablets (which is x 5mg) **immediately** and again every morning for days or until I am fully better.

URGENT! Call my GP or asthma nurse today and let them know I have started taking steroids and make an **appointment to be seen within 24 hours**.

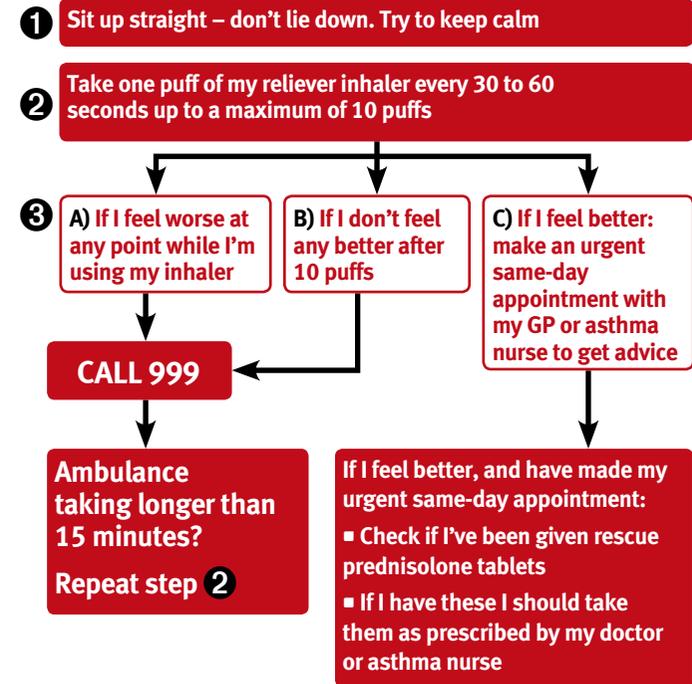


I'm having an asthma attack if any of these happen:

- My reliever inhaler is not helping or I need it more than every hours
- I find it difficult to walk or talk
- I find it difficult to breathe
- I'm wheezing a lot or I have a very tight chest or I'm coughing a lot
- My peak flow is below



THIS IS AN EMERGENCY TAKE ACTION NOW



IMPORTANT! This asthma attack information is not designed for people who use the Symbicort® SMART regime OR Fostair® MART regime. If you use one of these speak to your GP or asthma nurse to get the correct asthma attack information.