

ADULT ASTHMA ACTION PLAN

Name: _____

Date: _____

CIRCLE MY TRIGGERS



SMOKE



COLDS



ANIMALS



POLLENS



MOLD



DUST



STRONG SMELLS



WEATHER CHANGES



STRONG EMOTIONS



OTHER: _____

This asthma action plan show me **how and when** to increase the dose of my asthma medications.

GREEN ZONE: My breathing symptoms are controlled.

- I only need my reliever inhaler twice a week at most.
- I do not have asthma symptoms at night.
- I am able to go to work or to school.
- I am able to exercise normally.
- If I think my breathing symptoms are usually not controlled – for example, if I need to use my reliever inhaler more than twice per week – I will talk to my healthcare provider. It could be a sign that my asthma medications need to be adjusted.

What else can I do to help out my asthma?

- I can stay up to date on my vaccinations.
- I can make sure I take my controller medication(s) every day.
- I can identify and avoid things that seem to trigger my asthma.
- I can exercise regularly to keep my lungs strong.
- If I am a smoker, I can quit smoking to protect my lungs from damage.
- I can ask my pharmacist to double check that my inhaler technique is perfect.

I will avoid my asthma triggers.

I will use my **controller medication(s)** every day:

see back of page for typical dosing

I will use a spacer with my inhaler.

I will use my **rescue inhaler** when I am short of breath or experiencing cough, wheeze, or chest tightness.

see back of page for typical dosing

I will use a spacer with my inhaler.

YELLOW ZONE: Preventative action is needed

- I need my reliever inhaler more than usual, or
- I have caught a cold, or
- I am exposed to something that tends to trigger my asthma, like forest fire smoke.

Take action as follows:

see back of page for yellow zone guidance

I will use my rescue inhaler as needed.

ORANGE ZONE:

I must urgently see a health care provider if:

- I need my reliever inhaler more than once every 4 hours, or
- After 2 weeks I don't feel like my normal self, or
- I start to have difficulty sleeping because of my asthma, or
- After several days in the Yellow Zone my symptoms are worse instead of better.

RED ZONE:

I must urgently call 9-1-1 for an ambulance if:

- My reliever inhaler doesn't help, or
- I am too breathless to speak, or
- I am constantly short of breath.

This means I am having an asthma attack. I will take puffs from my reliever inhaler until help arrives.

Healthcare Provider Signature _____ Patient Signature _____

Healthcare providers: share this plan with the entire healthcare team (e.g. family physician, community pharmacy, etc.)
Asthma Action Plans for specific inhalers are freely available at rxfiles.ca/tools.

HOW TO COMPLETE THE YELLOW ZONE OF AN ASTHMA ACTION PLAN

The Yellow Zone of an asthma action plan typically involves stepping up controller therapy. The **Yellow Zone Guidance** below is based on evidence, practicality, cost, maximum labelled doses, available strengths, available dosage forms, and expert opinion.¹⁻⁴

CONTROLLER	STRENGTH	GREEN ZONE DOSE	YELLOW ZONE GUIDANCE ^{1,2}
Inhaled Corticosteroids (ICS)			
Beclomethasone QVAR	50, 100mcg	1 puff BID	Increase to 4 puffs BID x 7-14 days
		2 puffs BID	†, § Add prednisone 30-50mg x 5-7 days
Budesonide PULMICORT	100, 200mcg	1 puff BID	Increase to 4 puffs BID x 7-14 days
	400mcg	1 puff BID 2 puffs BID	Increase to 3 puffs BID x 7-14 days ‡, †, § Add prednisone 30-50mg x 5-7 days
Ciclesonide ALVESCO	100, 200mcg	1 puff daily	Increase to 4 puffs daily x 7-14 days
Fluticasone propionate FLOVENT HFA, g	50, 125, 250mcg	1 puff BID	Increase to 4 puffs BID x 7-14 days
		2 puffs BID	†, § Add prednisone 30-50mg x 5-7 days
Fluticasone propionate FLOVENT DISKUS	100, 250mcg	1 puff BID	Increase to 4 puffs BID x 7-14 days
	500mcg	1 puff BID	Increase to 2 puffs BID x 7-14 days
Fluticasone propionate AERMONY	55, 113mcg	1 puff BID	Off-label: Increase to 4 puffs BID x 7-14 days
	232mcg	1 puff BID	‡, † Add prednisone 30-50mg x 5-7 days
Fluticasone furoate ARNUITY	100, 200mcg	1 puff daily	‡, † Add prednisone 30-50mg x 5-7 days
Mometasone ASMANEX	200mcg	1 puff HS	Increase to 4 puffs HS x 7-14 days
	400mcg	1 puff HS	Off-label: Increase to 4 puffs HS x 7-14 days
ICS-LABA Combinations (Inhaled Corticosteroid + Long-Acting Beta Agonist)			
Budesonide + Formoterol SYMBICORT	100/6, 200/6mcg	1 puff BID	Increase to 4 puffs BID x 7-14 days
Mometasone + Formoterol ZENHALE	100/5, 200/5mcg	2 puffs BID	‡, †, § Add prednisone 30-50mg x 5-7 days
Fluticasone propionate + Salmeterol ADVAIR HFA	125/25mcg	2 puffs BID	Add FLOVENT HFA 250mcg 3 puffs BID x 7-14 days
	250/25mcg	2 puffs BID	‡, †, § Add prednisone 30-50mg x 5-7 days
Fluticasone propionate + Salmeterol ADVAIR DISKUS, g	100/50mcg	1 puff BID	Add FLOVENT DISKUS 100mcg 3 puffs BID x 7-14 days
	250/50mcg	1 puff BID	Add FLOVENT DISKUS 250mcg 3 puffs BID x 7-14 days
	500/50mcg	1 puff BID	‡ Add prednisone 30-50mg x 5-7 days
Fluticasone furoate + Vilanterol BREO	100/25, 200/25mcg	1 puff daily	‡, † Add prednisone 30-50mg x 5-7 days
Mometasone + Indacaterol ATECTURA	150/80, 150/160, 150/320mcg	1 puff daily	‡, † Add prednisone 30-50mg x 5-7 days

Prednisone recommended due to: ‡ quadruple dose ICS exceeds labelled max; † high cost of quadruple dose ICS; § impracticality of 16 puffs per day

Prednisone Considerations

- Prednisone has cost advantages. Adding prednisone is usually less expensive than stepping up the ICS dose. In general, stepping up the ICS dose for 1 week costs the equivalent of 1 month of usual ICS therapy.
- When to initiate prednisone rescue therapy? If stepping up the ICS dose does not lead to improvement after 2-3 days, initiate prednisone as rescue therapy (30-50mg x 5-7 days).
- If history of sudden or severe exacerbations, prednisone 30-50mg x 5-7 days is first line (rather than an ICS dose increase).
- When to reassess controllers? Frequent need for prednisone (e.g. several times per year) should prompt an escalation in scheduled "Green Zone" therapy.
- Alternative corticosteroids to prednisone? Instead of prednisone, dexamethasone 12-16mg x 2 days may be considered.⁵

Reliever Considerations

- Patients can use their reliever as needed up to the labelled max.
- Patients in the Yellow Zone who do not take a controller can rely only on their reliever, but should be encouraged to start regular controller therapy.²

RELIEVER	MAX DOSE
Salbutamol MDI 100mcg (VENTOLIN HFA, g)	8 puffs / day
Salbutamol Diskus 200mcg (VENTOLIN DISKUS)	4 puffs / day
Terbutaline Turbuhaler 500mcg (BRICANYL)	6 puffs / day
Budesonide-Formoterol Turbuhaler 200/6mcg (SYMBICORT)	8 puffs / day