#### **MY ASTHMA TRIGGERS**

Taking my asthma medicine each day will help reduce my reaction to these triggers. Avoiding triggers 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
- All my inhalers and spacers 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:	
Next asthma	review	date:	

Contact number for GP/specialist asthma nurse:
Organisation Telephone Number

Out-of-hours contact number:	

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

**Get more advice & support from Asthma UK:** Speak to a specialist asthma nurse about managing your asthma on: **0300 222 5800** 

Get news, advice and download information packs at: <a href="www.asthma.org.uk">www.asthma.org.uk</a>



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\*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've 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 and advice 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

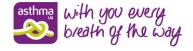
# FILL THIS IN WITH YOUR GP OR ASTHMA NURSE

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

#### **Full Name**

**Date of Birth** 

Date: Long date letter merged





My personal best peak flow is:
My preventer inhaler (name / colour)  I need to take my preventer inhaler every day even when feel well.  I take puff(s) in the morning and puff(s) night.
My reliever inhaler (name / colour)

things happen:I'm wheezing

I take

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

I take my reliever inhaler only if I need to.

• I'm coughing

Other medicines I take for my asthma every day:

puff(s) of my reliever inhaler if any of these

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.



for

# 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-today activities (e.g. at work, exercise)
- I am using my reliever inhaler 3 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.	naven't been using my preventer inhaler, start using egularly 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			

**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.** 

days or until I am fully better.

x 5mg) immediately and again every morning

**Full Name Date of Birth** 



- My reliever inhaler is not helping or I need it more than every 4 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!**

- 1. Sit up straight don't lie down. Try to keep calm
- 2. Take one puff of my reliever inhaler every 30 to 60 seconds up to a maximum of 10 puffs
- 3. CALL 999 if:
  - a. I feel worse at any point while I'm using my inhaler
  - b. I don't feel any better after 10 puffs

If the ambulance takes more than 15 minutes, repeat Step 2

- 4. If I feel better: make an urgent same-day appointment with my GP or asthma nurse to get advice.

  Then:
  - Check if I've been given rescue prednisolone tablets
  - If I have these I should take them as prescribed by my doctor or asthma nurse

**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.