



Asthma Action Plan



For School or Child Care

Name: _____ Date of Birth: _____

Parent/Guardian Name: _____ Phone: _____

Parent/Guardian Name: _____ Phone: _____

Emergency Contact (1):	_____	_____	_____
	Name	Relationship	Phone

Emergency Contact (2):	_____	_____	_____
	Name	Relationship	Phone

Physician Name: _____ Phone: _____

Other Physician: _____ Phone: _____

Asthma Triggers - Identified items which may cause asthma attacks (circle all that apply):

- | | | | |
|------------|--------------|----------------------------|--------------------|
| dust mites | strong odors | tobacco smoke | colds/infections |
| mold | mice/rats | exercise | temperature change |
| pets | pollen | chalk dust | excitement |
| cockroach | dust | smoke (other than tobacco) | pesticides |

food (specify): _____

other (specify): _____

Activities - that have caused asthma attacks in the past (circle all that apply):

- | | |
|---------------------------------|-------------------------------------|
| art projects with dust or fumes | playing outdoors on cold/windy days |
| sitting on carpeting | playing in freshly cut grass |
| pet care | gardening |
| wood/kerosene heated rooms | running hard |

other (specify): _____

Peak Flow Monitoring

Personal best peak flow reading: _____

Reading to give quick-relief medication: _____

Reading to get medical help: _____

Typical Signs and Symptoms - of asthma attacks (circle all that apply):

persistent cough	flaring nostrils/panting	dark circles under eyes
wheezing	breathing faster	gray or blue lips/fingernails
shortness of breath	grunting	sucking in chest/neck
restlessness	fatigue	trouble talking/walking

Reminders:

1. Notify parents immediately if emergency medication is required.
 2. Seek emergency medical care if:
 - there are no improvements 15-20 minutes after initial treatment with medication and family can not be reached
 - after receiving treatment for asthma symptoms, the child has
 - chest / neck pulled in with breathing
 - gray or blue lips / fingernails
 - trouble talking / walking
 - hunched over
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