

ASTHMA ACTION PLAN — SIGNS (For Children Under Age 5)

Do not guess. Call the doctor if you have any question about this plan.

Name: _____

Date: _____

GREEN Z O N E	<p>GREEN ZONE: No cough, wheeze, breathing faster or sucking in of the chest skin.</p> <ul style="list-style-type: none"> • Fully active. • Medicine (med) to be taken every day: <ul style="list-style-type: none"> <input type="checkbox"/> Inhaled steroid _____ . _____ puffs _____ times a day using a holding chamber with mask. OR _____ ampules _____ times a day by mist machine. <input type="checkbox"/> Other _____ . 	<p>Action Plan based on total score of all 4 signs:</p> <p>Cough:</p> <p>None0 Less than 1 per minute 1 1 - 4 per minute.....2 More than 4 per minute3</p> <p>Wheeze:</p> <p>None0 End of exhale 1 Throughout exhale.....3 Inhale and exhale5</p>
YELLOW Z O N E	<p>HIGH YELLOW ZONE: Total asthma sign score 1 to 4. Measure this before giving quick relief medicine.</p> <ul style="list-style-type: none"> • Avoid triggers. No hard exercise. • Meds to be taken: <ul style="list-style-type: none"> <input type="checkbox"/> Double inhaled steroid dose. Keep giving until signs score is in the Green Zone for seven days. <input type="checkbox"/> Other _____ . <input type="checkbox"/> Quick relief med: _____ . Give _____ times in 24 hours.* Keep giving until score is _____ for 2 days. <p><small>*Start the Low Yellow Zone plan if you need to give quick relief med six times in a day.</small></p>	<p>Sucking in the chest skin:</p> <p>None0 Can hardly see..... 1 Easy to see3 Severe5</p> <p>Breathing faster:</p> <p>None*0 A little 1 Some.....2 A lot.....3</p> <p><small>*Use 25 breaths per minute until you learn your child's normal rate.</small></p>
LOW YELLOW Z O N E	<p>LOW YELLOW ZONE: Total asthma sign score 5 to 8.</p> <ul style="list-style-type: none"> • Give quick relief med _____ puffs using a holding chamber with mask OR one ampule by mist machine. • Check your child's total signs score again after 10 minutes. If it reaches the High Yellow Zone, follow that plan. Check the signs score every 1 to 2 hours. If the score stays in the Low Yellow Zone, or falls back into it in less than 4 hours, add: <ul style="list-style-type: none"> <input type="checkbox"/> Oral steroid _____ mg, _____ cc right away. Give once daily until sign score, when off quick relief med, is _____ for at least 24 hours. <input type="checkbox"/> Please call the office before starting oral steroid. <p>Your child should improve within two days and reach the green zone within five days. See your doctor if your child's progress is slower.</p>	
RED Z O N E	<p>RED ZONE: Total asthma sign score 9 or more.</p> <ul style="list-style-type: none"> • Give quick relief med _____ puffs using a holding chamber with mask, OR give one ampule by mist machine. • Give oral steroid _____ mg, _____ cc right away. • Check your child's total asthma signs score again in 10 minutes. If your child reaches the Low Yellow Zone, follow that plan. Check signs scores every 1 to 2 hours. If your child is still in the Red Zone, or falls back into it in less than 4 hours, visit your doctor OR GO TO THE E.R. RIGHT AWAY. 	

Doctor

Parent