Illinois Department of Public Health

Asthma Action Plan

Weight	Date of Birth	Peak Flow
	Phone	
		Asthma Severity
The GREEN ZONE means take the following medicine(s) every day. Controller Medicine(s) Dose		
Spacer Used		
3000A	State Annual Control of the Control	es before sports, exercise or any
Reliever Medicine(s)		Dose
If beginning cold sympto	oms, call your doctor before s	starting oral steroids.
REEN ZONE after one hour	; follow RED ZONE instruc	ctions. If you are in the YELLOW
NOW! Take these medic	ines until you talk with your	doctor. If your symptoms do not get
Reliever Medicine(s)		Dose
t		
	The GREEN ZONE me Controller Medicine(s) Spacer Used Take the following med other strenuous activity The YILLOW ZONE is every day and add the forgetting worse. Reliever Medicine(s) If beginning cold symptom to see the control of	The GREEN ZONE means take the following medic Controller Medicine(s) Spacer Used Take the following medicine if needed 10-20 minut other strenuous activity. The YELLOW AONE means keep taking your GRE every day and add the following medicine(s) to help k getting worse. Reliever Medicine(s) If beginning cold symptoms, call your doctor before severy 20 minutes for up to one hour or use nebulizer of the EEEN ZONE after one hour, follow RED ZONE instructed by the provider. If your breathing symptoms get worse the RED ZONE means start taking your RED ZONE NOW! Take these medicines until you talk with your better and you can't reach your doctor, go to a hospite 911 immediately. Reliever Medicine(s)

For more information on asthma, please visit the National Heart, Lung and Blood Institute at www.nhlbi.nih.gov, the U.S. Centers for Disease Control and Prevention at www.cdc.gov or the U.S. Environmental Protection Agency at www.epa.gov.

If you would like more information on Illinois' asthma program, please contact the Illinois Department of Public Health at 217-782-3300.