

# Pediatric Asthma Action Plan (1-15 years)

Name: \_\_\_\_\_

Date: \_\_\_\_\_  
Review your action plan with your healthcare provider at every visit.

Healthcare provider/phone: \_\_\_\_\_

**Always remain on your Go: Maintain Therapy medication, even if you are having no symptoms of asthma.**

<b>Go: Maintain Therapy</b>	<b>Caution: Step Up Therapy</b>	<b>Stop: Get Help Now</b>																																			
<p><b>Description</b> You/your child has <b>all</b> of the following:</p> <p>Use of reliever puffer <b>no more than</b> 3 times a week*</p> <p>Daytime symptoms (cough, wheeze or breathing problems) <b>no more than</b> 3 times a week*</p> <p>Ability to do physical activity (playing, running) or sports without difficulty</p> <p>No nighttime asthma symptoms</p> <p>Not missing regular activities or school</p> <p>No symptoms of a cold</p> <p><b>*1 time a week if 1 to 5 years old</b></p> <div style="text-align: right; margin-top: 10px;"></div> <p>Other: <input style="width:100%; height: 20px;" type="text"/></p>	<p><b>Description</b> You/your child has <b>any</b> of the following:</p> <p>Use of reliever puffer <b>more than</b> 3 times a week*</p> <p>Daytime symptoms (cough, wheeze or breathing problems) <b>more than</b> 3 times a week*</p> <p>Difficulty with physical activity (playing, running) or sports</p> <p>Asthma symptoms 1 or more nights a week</p> <p>Missing regular activities or school</p> <p>Symptoms of a cold</p> <p><b>*1 time a week if 1 to 5 years old</b></p> <div style="text-align: right; margin-top: 10px;"></div> <p>Other: <input style="width:100%; height: 20px;" type="text"/></p>	<p><b>Description</b> You/your child has <b>any</b> of the following:</p> <p>Reliever puffer lasts <b>less than</b> 3 hours</p> <p>“Pulling in” of skin in the neck/between or below ribs</p> <p>Feeling very short of breath</p> <p>Difficulty talking</p> <p>Continuous wheeze or cough</p> <div style="text-align: right; margin-top: 10px;"></div> <p>Other: <input style="width:100%; height: 20px;" type="text"/></p>																																			
<p><b>Instructions:</b></p> <table border="1" style="width:100%; border-collapse: collapse; margin-top: 5px;"> <thead> <tr> <th style="width:20%;">Medication</th> <th style="width:15%;">Puffer colour</th> <th style="width:10%;">Dose</th> <th style="width:10%;">Puffs</th> <th style="width:10%;">Times a day</th> </tr> </thead> <tbody> <tr style="background-color: #f2f2f2;"> <td colspan="5"><i>Controller</i></td> </tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr style="background-color: #f2f2f2;"> <td colspan="5"><i>Reliever</i></td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td style="text-align: center;">every 4 hours as needed</td> </tr> </tbody> </table> <p><input type="checkbox"/> Use reliever before exercise</p> <p>Other: <input style="width:100%; height: 20px;" type="text"/></p>	Medication	Puffer colour	Dose	Puffs	Times a day	<i>Controller</i>																				<i>Reliever</i>									every 4 hours as needed	<p><b>Instructions:</b></p> <p><input type="checkbox"/> Take _____ reliever _____ puffs every _____ (colour) 4 hours as needed, and:</p> <p><input type="checkbox"/> Continue to take your <b>Go: Maintain Therapy</b> medication</p> <p><input type="checkbox"/> If no improvement in your symptoms in 2-3 days, contact your healthcare provider</p> <p>Other: <input style="width:100%; height: 20px;" type="text"/></p>	<p><b>Instructions:</b></p> <p><b>Take _____ (colour) reliever 4-6 puffs every 15-20 minutes and</b></p> <p><b>Call 911 or go directly to the emergency department</b></p> <p>Asthma symptoms can get worse quickly</p> <p>Asthma can be a life-threatening illness - do not wait!</p> <p>Bring this asthma action plan with you to the emergency department</p> <p>Stay calm</p> <p>Other: <input style="width:100%; height: 20px;" type="text"/></p>
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# Pediatric Asthma Action Plan (1-15 years) - The goal of asthma treatment is to live a healthy, active life

This Asthma Action Plan outlines steps for you/your child to self-manage asthma when you/your child start(s) having more symptoms. Your healthcare provider might also change you/your child's usual asthma treatment according to the level of asthma control over time. Review all symptoms and this plan regularly with the healthcare provider.

## Asthma Triggers



**Colds** are the most common trigger - wash hands often



**Smoking** or being in a house or a car where someone smokes



**Fumes, chemicals and strong scents**

Check the Air Quality Health Index before you leave home ([www.airqualityontario.com](http://www.airqualityontario.com))

**Allergies may be triggering you/your child's asthma. Follow the instructions below if you/your child are allergic to any of these (have allergy skin testing if you are unsure):**



**Pets with fur or feathers** - If you have pets, wash them regularly and keep them out of bedrooms



**Pollen and Grass** - Try to stay inside on high pollen days and avoid freshly cut grass



**Dust and dust mites** - Wash bedsheets in hot water and vacuum with a HEPA filter or central vacuum regularly; consider mattress and pillow covers



**Mould** - Keep bathroom and basement dry, clean visible mould, avoid decomposing leaves in the fall

## Simple ways to take care of you/your child's asthma:

- ✓ Avoid triggers
- ✓ Know your medication and how and when to take it  
Take controller medications regularly
- ✓ Follow your action plan
- ✓ After any emergency room visit, schedule a follow-up appointment with your healthcare provider in the next 2 weeks
- ✓ Always have your reliever medication with you
- ✓ Use appropriate spacer (holding chamber) with metered dose inhaler

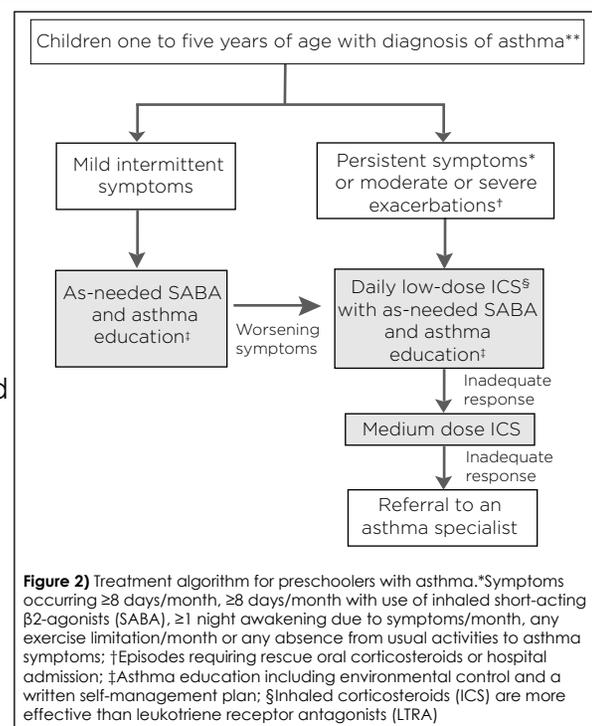


## For Healthcare Providers

At every visit, re-assess adherence to therapy, inhaler technique, asthma control criteria and environmental control.

For children 1-5 years, refer to the figure provided and the 2015 Diagnosis and Management of Asthma in Preschoolers position statement\*\* to determine treatment and medication doses required to maintain ongoing asthma control. For children 6 years and over, refer to the CTS 2012 Asthma guideline update†.

An exacerbation requiring rescue systemic corticosteroids or hospitalization is an indication of suboptimal control and should prompt reassessment.



This asthma action plan was adapted from Gupta S., et al. Respiration 2012; 84(5):406-15. Pictograms in the asthma action plan were adapted from Tulloch J., et al. Can Respir J. 2012 Jan-Feb;19(1):26-31. Instructions were designed to align with: \*\*Ducharme FM, Dell SD, Radhakrishnan D, et al. Diagnosis and management of asthma in preschoolers: A Canadian Thoracic Society and Canadian Paediatric Society position paper. Can Respir J 2015; 22(3):135-143 and †Lougheed MD, Lemiere C, Ducharme F, et al. Canadian Thoracic Society 2012 guideline update: Diagnosis and management of asthma in preschoolers, children and adults. Can Respir J 2012; Vol 19(2), 127-64.

For information on how this action plan was developed, or to download a copy of this action plan and/or for associated resources, please visit [olapep.ca/resources](http://olapep.ca/resources)