

## About your child's asthma action plan

### The goals of asthma treatment are:

- Symptom free day and night
- An unrestricted lifestyle
- As few asthma attacks as possible
- Miss as little school as possible
- Be able to get the best possible peak flow

### Green Zone – All clear to go

Your child's asthma is under control and this is where you want to be most of the time. If your child is in this zone all the time it may be possible for your doctor or asthma nurse to reduce the medicines.

### Amber Zone – Caution

Your child's asthma is not under control and the medication may need to be changed. Make a note of your child's symptoms and peak flows if appropriate so that the doctor or asthma nurse can assess your child properly.

### Red Zone – Red Alert

If your child is in this zone follow the Red Zone Action and inform your doctor or asthma nurse, as the regular treatment may also need adjusting.

### My child's asthma triggers:

## Other Advice

Make sure your child:

- Sees their practice nurse or GP twice a year even when their asthma is well controlled
- Takes this plan to each visit so it can be updated
- Takes their symptom or peak flow diary to each visit.
- Take a photo of this plan and keep it on your mobile.

## Useful Websites

[www.asthma.org.uk](http://www.asthma.org.uk)

[www.mylungsmylife.org](http://www.mylungsmylife.org)

If you are having any problems with your child's asthma control please make an appointment to see/contact (✓)

Practice Nurse

GP

Asthma Nurse Specialist

On  .....

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# ASTHMA

## Action plan for:

**This plan is for children and young people with asthma. It shows how to recognise when your child's asthma is getting worse and what to do to improve it.**

GP phone number

**NHS24 contact number: 111**

**Date:** .....

**Predicted peak flow:** .....

**Best ever peak flow:** .....

## Green Zone Go

Your child's asthma is under control when:

- There is NO cough, wheeze or chest tightness
- Can play games and sport normally
- No sleep disturbance
- Can do normal activities.

Peak flows are greater than 80%.

### Green Zone Action – Take medicines as normal

Continue with the usual asthma medicines:

#### 1. Preventer (insert name & colour)

.....  
Strength.....

Take.....puffs (doses)

When.....

**(Continue to take this medication even when well)**

#### 2. Reliever (Blue) (insert name)

.....  
Take.....puffs (doses) as needed for cough, wheeze or chest tightness and if necessary take.....puffs (doses) 10 to 15 minutes before sport or activity

#### 3. Other Medicines

.....  
.....  
.....

**Remember to use a spacer if advised to do so**

## Amber Zone Caution

Your child's asthma is getting worse if he or she:

- Is waking at night with asthma symptoms
- Has cough, wheeze and/or tight chest
- Needs to use the reliever inhaler regularly – once a day or more than usual
- Has a cold.

Peak flow recordings are between

50%  and 80%

### Amber Zone Action

**Start using or increase your child's reliever (blue) inhaler 4 puffs, 4 times a day for 4 days.**

The **normal dose** of preventer inhaler should be continued alongside the regular use of the reliever inhaler. Increasing the preventer inhaler is not recommended.

**If there is no improvement after 2 – 3 days make an appointment to see your doctor or asthma nurse.**

If your child has a peak flow diary, start filling in morning and evening peak flows, the symptoms they get each day and how often the reliever inhaler is needed. Take the diary with you if a visit to the doctor or asthma nurse is necessary. It may be helpful to use your mobile phone to record the symptoms your child is having.

## Red Zone Red Alert

- Breathing is a real effort (e.g. chest, tummy or neck muscles pulling in with each breath)
- Too breathless to speak a full sentence, eat or drink
- The reliever (blue) is not helping or not lasting 2 to 3 hours.

Peak flow is below 50%.

Take 1 puff (dose) of reliever every minute for 10 minutes using a spacer.

If there is no improvement or if the reliever does not last 3 to 4 hours seek urgent medical advice from your GP or A&E.

**Call 999 if your child is very pale or has blue lips, is losing consciousness or gasping for breath, or if you are concerned.**

### Action

While waiting you can

- Continue giving one puff (dose) of the reliever inhaler every minute until help arrives, using the spacer device
- If your child has steroid tablets give them as directed
- Try to keep calm and reassure your child
- Sit your child upright to help them breathe, loosen tight clothing and do not put your arm around them.

If the emergency dose of the reliever inhaler is needed more than TWICE in any 24 hour period seek medical advice. **Giving repeated emergency doses of reliever without medical review is NOT safe.**