# **Asthma Action Plan**



12	DCFS ID
X D	Medicaid ID

Doctor:	<u> </u>
Phone for doctor or clinic:	
Phone for taxi or friend:	
EMERGENCY: 911	

Name <sub>.</sub>	
DCFS ID#	
/ledicaid ID#	

Always take this medicine plan with you to the doctor, clinic, or emergency room.

	1.	Gre	en	Go	

- Breathing is good
- No cough or wheeze
- Can work and play



Peak Flow Number To

Use	oreventive	medicine.
Medi	icine	Но

ow much to take When to take it

20 minutes before sports, use this medicine:

### 2. Yellow - Caution



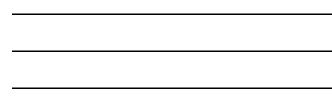
√heeze





Peak Flow Number To

#### Take quick-relief medicine to keep an asthma attack from getting bad. Medicine How much to take When to take it



## 3. Red - Stop - Danger

- Medicine is not helping
- Breathing is hard and fast
- Nose opens wide
- Can't walk
- Ribs show
- Can't talk well



### Get help from a doctor now!

Take these medicines until you talk with the doctor.

If you cannot reach your doctor go to the emergency room.

Medicine How much to take When to take it

W/II	
Peak Flow Number	
To	