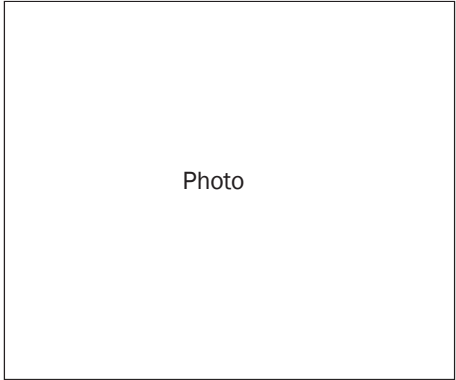


# Asthma Action Plan

**For use with a Puffer**

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

Date of birth: \_\_\_\_\_



Child can self administer medication if well enough.

Child needs to pre-medicate prior to exercise

Confirmed triggers:

Family/emergency contact name(s):

Work Ph: \_\_\_\_\_

Home Ph: \_\_\_\_\_

Mobile Ph: \_\_\_\_\_

Plan prepared by Dr or NP:

I hereby authorise medications specified on this plan to be administered according to the plan.

Signed:

Date: \_\_\_\_\_

Date of next review: \_\_\_\_\_



- Remove cap from puffer and shake well
- Tilt the chin upward to open the airways, breath out away from puffer
- Place mouthpiece, between the teeth, and create a seal with lips
- Press once firmly on puffer while breathing in slowly and deeply
- Slip puffer out of mouth
- Hold breath for 5 seconds or as long as comfortable

## MILD TO MODERATE SIGNS

- Minor difficulty breathing
- May have a cough
- May have a wheeze

## ACTION FOR MILD TO MODERATE ASTHMA FLARE UP

- 1** Sit the person upright.
  - Stay with person and be calm and reassuring
- 2** Give .....separate puffs of Airomir, Asmol or Ventolin
  - Shake puffer before each puff
  - Get the person to hold their breath for about 5 seconds or as long as comfortably possible
- 3** Wait 4 minutes.
  - If there is no improvement, repeat step 2

**If there is still no improvement follow the Asthma First Aid Plan for severe / life-threatening asthma attacks below**

**Mild to moderate symptoms do not always present before severe or life-threatening symptoms**

## SEVERE SIGNS

- Cannot speak a full sentence
- Sitting hunched forward
- Tugging in of skin over chest or throat
- May have a cough or wheeze
- Obvious difficulty breathing
- Lethargic
- Sore tummy (young children)

## LIFE-THREATENING SIGNS

- Unable to speak or 1-2 words
- Collapsed / Exhausted
- Gasping for breath
- May no longer have a cough or wheeze
- Drowsy/ Confused / Unconscious
- Skin discolouration (blue lips)

## ACTION FOR SEVERE / LIFE-THREATENING ASTHMA ATTACK

- 1 Sit the person upright. Be calm and reassuring. Do not leave them alone.**
- 2 Phone ambulance: Triple Zero (000).**
- 3 Give ..... separate puffs of Airomir, Asmol or Ventolin**
  - Shake puffer before each puff
  - Get the person to hold their breath for about 5 seconds or as long as comfortably possible
- 4 Wait 4 minutes.**
- 5 Keep giving 4 puffs every 4 minutes until emergency assistance arrives.**

**Commence CPR at any time if person is unresponsive and not breathing normally.**  
Blue reliever medication is unlikely to harm, even if the person does not have asthma.

### IF UNCERTAIN WHETHER IT IS ANAPHYLAXIS OR ASTHMA

- Give adrenaline autoinjector FIRST, then asthma reliever.
- If someone with known food or insect allergy suddenly develops severe asthma like symptoms, give adrenaline autoinjector FIRST, then asthma reliever.

Anaphylaxis: Y  N  Type of autoinjector: \_\_\_\_\_