### ASTHMA Action Plan

**Doing Well**
- Breathing easy
- No coughing
- Exercising easily

**Take controller medicines every day**

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<th>Name</th>
<th>Amount</th>
<th>How often</th>
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Stay away from your asthma triggers

**Caution**
- Coughing
- Wheezing
- Waking up at night from asthma
- Chest feels tight
- Short of breath
- Less active

**Immediately take quick relief medicine**

- Take Albuterol _______ puffs every _______ hours.
- Call provider if not improving in _______ days.

**If albuterol is used and you are NOT better within 20 minutes:**

- Increase Albuterol _______ puffs every _______ hours
- Add:
- Call:

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**Emergency**
- Breathing hard and fast
- Can't walk or talk
- Albuterol is not helping
- Very short of breath
- Non-stop coughing

**MEDICAL ALERT! Get help!**

**Immediately take quick relief medicine**

- Take Albuterol _______ puffs every _______ minutes

Call **911** or go the emergency room

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Remember to get your medication refilled before you run out.

Call the HPSM healthline for more info at 650-616-2165.

Provider name: ___________________________ Provider phone number: ___________________________

Next appointment with your provider: _______________________________________________________________