

Asthma Action Plan

Name:
Date of birth:
Photo
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

For use with a Puffer

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 Giveseparate 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

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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:	