Asthma Action Plan for Children

When Well
- No wheeze, cough or chest tightness
- Can play and exercise without wheeze, cough or chest tightness
- Need reliever puffer less than 3 times a week (not including before exercise)
- Not waking at night due to asthma

What should I do?

Preventer/Combined Medication:
- …………………….. puffs/tablets
- ………. times a day everyday

Reliever:
- …………………….. puffs when needed

When Unwell
- Starting to get a tight cough, wheeze or chest tightness
- Increased asthma with a cold
- Waking at night with asthma

What should I do?

Give …………………………… (reliever)
- Up to 3 - 4 hourly as needed:
  - 2 – 6 puffs via spacer (under 6 years old)
  - 2 – 12 puffs via spacer (6 years or older)

If on daily preventer medication, continue same dose as usual, OR follow your doctors’ advice.

Severe
- Needing reliever every 3 hours or more often for one or more of the following:
  - Wheeze
  - Chest tightness
  - Sucking in around tummy, ribs or neck with breathing

What should I do?

Keep giving …………………………… puffs (reliever) as needed.

Start Oral Steroid if prescribed:
- …………………………… mg (……ml)

And see a doctor or come into hospital AS SOON AS POSSIBLE

Danger Signs
- Needing reliever more than every ½ hour, OR
- Blue lips, OR
- Difficulty speaking or feeding due to breathlessness OR
- Frightened OR
- Exhausted

What should I do?

CALL AN AMBULANCE on 000
While waiting stay calm and give:

………………………… (reliever)
- 4 puffs every 4 minutes

USE A SPACER IF AVAILABLE

Dr name: ………………………………………… Ph:…………………………
Signature:…………………………………………Date compiled………………...
Patient Name: ………………………………………………………………….…
Next Dr’s Appointment:……………………………………………………

Take your plan when you next visit a doctor


For information about this resource contact Health Networks Branch on (08) 9222 0200 or healthpolicy@health.wa.gov.au or visit www.healthnetworks.health.wa.gov.au
EXTRA MEDICINE TO TAKE AFTER GOING HOME:

Date: ...........................................................

☐ Prednisolone/ Redipred: ............mg (................ml) once a day for........ days with food

☐ Reliever: .............................................. ...... puffs ......... times a day for ........... days

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☐ Other: ...........................................................................................................................................

☐ Take 2 puffs of reliever medication before sport

FOLLOW-UP (please tick which)

☐ GP follow up in ...................... days/weeks

☐ Outpatient Clinic .............. weeks

(this will be posted to you a month before)

☐ Asthma Nurse .............. weeks

☐ Consultant rooms .............. weeks

PMH Asthma Nurse  Tel: 9340 8713

RETURN to hospital or see a doctor as soon as possible if your child:

- Starts working harder to breath, sucking in around the neck, tummy, or ribs with breathing OR
- Starts needing their reliever puffer more than every 3 hours

Call an AMBULANCE if your child has any one of the following:

- Needs their reliever puffer more than every ½ hour OR
- Is blue at the lips OR

While waiting for the ambulance give your child their reliever puffer 4 puffs every 4 minutes. Use a spacer if available

- Has difficult speaking or feeding due to breathlessness OR
- Is frightened or exhausted

IS YOUR CHILD’S ASThma UNDER CONTROL?

Does your child have any of the following symptoms when they seem well?

- NIGHT TIME or EARLY MORNING wheeze, chest tightness or cough?
- Wheeze, chest tightness or cough with EXERCISE?
- Using their RELIEVER 3 times a week, or more to relieve asthma symptoms (not including before sport)?
- MISSING SCHOOL because of their asthma?

Answer yes, to any one of these? Then your child should see their family doctor to look at ways to get their asthma under better control.