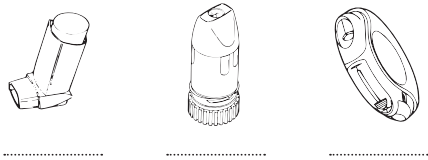
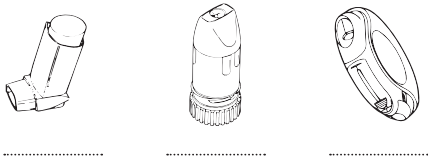


## Types of inhalers used for asthma

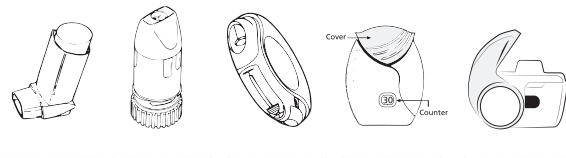
### Short acting bronchodilators (relievers)



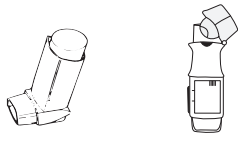
### Inhalers containing steroids (preventers)



### Combination inhalers (preventers)



### Additional therapies



### Inhaler technique reviewed.....

### Triggers (please tick) ☒

- ☐ Dust/House dust mite .....
- ☐ Animals/pets .....
- ☐ Food .....
- ☐ Hayfever (tree/grass) .....
- ☐ Perfume or chemical sprays.....
- ☐ Occupational triggers.....
- ☐ Other .....
- ☐ No asthma triggers identified.....

## Advice from hospital/clinic

- Ensure you book an appointment with GP/Practice Nurse within 1 week of hospital discharge
- Discharged from hospital/clinic with a Peak Flow meter **Yes / No**
- Follow up appointment at GHH with Nurse/Doctor/telephone review post discharge

## Smoking History

- Smoker **Yes / Never / Ex**
- Readiness to quit **Yes / No**
- Quit information advice provided ☐
- Patient declined information ☐

If you require this information in another format, such as a different language, large print, braille or audio version please ask a member of staff or email [patientexperience@uhb.nhs.uk](mailto:patientexperience@uhb.nhs.uk).

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**University Hospitals Birmingham**  
NHS Foundation Trust



# Asthma Action Plan

**Patient name:**

**NHS number:**

**Hospital number:**

**Respiratory Consultant:**

**Date plan issued:**

**Building healthier lives**

**UHB is a no smoking Trust**

## How do I feel?

### Good control

- I can complete my usual activities
- I have no symptoms during the day
- My asthma symptoms do not disturb my sleep

### Worsening Asthma

- Getting a cold – my symptoms include coughing wheezing, chest tightness and shortness of breath
- I am waking up at night
- I can do some but not all of my usual activities
- I need to use my reliever inhaler

### Severe Asthma (Asthma Attack)

- My reliever inhaler is not working
- I find it difficult to breathe
- I find it difficult to walk or talk
- I am waking up at night with a cough, wheezing, shortness of breath and chest tightness

## What is my peak flow reading?

My personal/predicted best peak flow is

.....

My peak flow is between 90–100% of my best reading.

It is .....

My peak flow is between 60–90% of my best reading.

It is .....

My peak flow is below 60% of my best reading.

It is .....

## What to do?

### Preventer inhaler

Name/colour

Take preventer every day even when feeling well

Take  puff(s) in the morning

Take  puff(s) at night

### Increase reliever inhaler

Name/colour

and take regularly

- Continue to monitor peak flow
- Continue with preventer inhaler
- If no improvement, contact GP for an appointment
- If you have rescue steroids (Prednisolone) you should take 40mg once daily after food for 5–7 days

### THIS IS AN EMERGENCY – TAKE ACTION NOW

Do not ignore worsening symptoms of asthma.

1. Sit up straight. Try to keep calm.
2. Take one puff of your reliever inhaler every 30–60 seconds, up to a maximum of 10 puffs. Use your inhaler through a spacer device.

If you don't feel better after 10 puffs then call 999. If the ambulance takes longer than 15 minutes repeat step 2 above.

Even if you begin to feel better you should make an urgent same day appointment with your GP or practice nurse for advice