

Is your asthma out of control?

What should you expect from good asthma care?

Tips for working with your health care provider

TIPS

“RULES OF TWO™”
can help you decide.

- Do you have asthma symptoms or use your quick-relief inhaler more than **TWO** times per week?
- Do you wake up at night with asthma symptoms more than **TWO** times per month?
- Do you refill your quick-relief inhaler more than **TWO** times per year?
- Do you measure your peak flow at **less than two times 10 (20%) from baseline** with asthma symptoms?

If you answer **“YES”** to any of these questions, your asthma may not be in good control!

Contact your health care provider to review your treatment plan.

The Rules of Two™ is a registered trademark of the Baylor Health Care System.

To...

- have** an Asthma Action Plan
- have** few, if any, asthma symptoms, such as wheezing, coughing, shortness of breath or chest tightness
- have** few, if any, awakenings during the night caused by asthma symptoms
- have** no need to take time off from school or work due to asthma
- have** no limits on your fully participating in physical activities
- have** no emergency department visits
- have** no hospital stays
- have** few or no side effects from asthma medicines
- have** a partnership with your health care provider on meeting your goals for good asthma care



- Take a list of questions to ask your provider.
- Ask the doctor to please tell you exactly what to do.
- If you are confused, ask the doctor to repeat the information or write it down for you.
- State what you expect at each visit—tell your doctor or asthma counselor what you want from the visit.
- Make an Asthma Action Plan with your health care provider and follow it.
- Don't agree to do something that you do not plan to do. Ask if another option is available. Unless your doctor is told that a treatment plan is hard for you, he or she will not know to make changes.
- Be sure to keep your doctor's appointments, even if you are feeling fine. If you can't make an appointment, contact your doctor in advance to set up another time.

Asthma Resources

**Allergy & Asthma Network
Mothers of Asthmatics, Inc.**
1-800-878-4403
www.aanma.org

**American Academy of Allergy, Asthma,
& Immunology**
1-800-822-2762
www.aaaai.org

**American Lung Association of the
District of Columbia**
1-800-LUNG-USA (1-800-586-4872)
National website: www.lungusa.org
DC website: www.aladc.org

Asthma & Allergy Foundation of America
1-800-7-ASTHMA (1-800-727-8462)
National website: www.aafa.org
Maryland-DC Chapter: www.aafa-md.org

DC Control Asthma Now (DC CAN)
Asthma Control Program
District of Columbia Department of Health
1-202-442-8113
www.doh.dc.gov

DC Quitline®
1-800-QUIT-NOW (TTY: 1-800-332-8615)
http://1800quitnow.cancer.gov

**Mid-Atlantic Center for Children's Health
and the Environment**
1-866-MACCHE-1 (1-866-622-2431)
www.health-e-kids.org

**National Heart, Lung, and Blood Institute
Health Information Center**
1-301-592-8573
TTY: 1-240-629-3255
www.nhlbi.nih.gov

**National Jewish Medical
& Research Center**
1-800-222-LUNG (1-800-222-5864)
www.njc.org



What is asthma?

Asthma is a chronic (long-term) disease that inflames and narrows the airways and makes it hard to breathe. When these sensitive airways are exposed to asthma triggers, it can cause an asthma attack. A person having a severe asthma attack can die and should seek emergency treatment. Common asthma triggers include cigarette smoke, incense, pollen, animal dander, dust mites, cockroaches, mold, and getting a cold or the flu.

Most people with asthma experience one or more of the following symptoms:

Coughing. Coughing from asthma is often worse at night or early morning, making it hard to sleep. Sometimes coughing is your only symptom. Sometimes coughing brings up mucus, or phlegm.

Wheezing. Wheezing is a whistling or squeaky sound when you breathe.

Chest tightness. This can feel like something is squeezing or sitting on your chest.

Shortness of breath. Some people say they can't catch their breath, or they feel breathless or out of breath. You may feel like you can't get enough air out of your lungs.

With good asthma care, however, most people with asthma can expect to have few, if any, symptoms. Treatment for most people with asthma includes taking medicine every day for a long time to reduce the chronic inflammation that leads to asthma symptoms.

Adapted with permission from the Asthma Initiative of Michigan and the Baylor Health Care System.
Photographs courtesy of Monaghan Medical Corporation.

The information provided in this brochure and at www.dcasthma.org is not intended to diagnose health problems or to take the place of medical advice. For asthma or any medical condition, individuals should seek medical advice from their health care professional.



A Guide to Good Asthma Care

Asthma Action Plan	
Name: _____	Date of Birth: _____
Health Care Provider: _____	Provider's Phone: _____
Parent/Responsible Person: _____	Parent's Phone: _____
Emergency Contact: _____	Emergency Contact: _____
Asthma Triggers: _____	Asthma Triggers Identified (Circle the ones that cause your asthma attack): <input type="checkbox"/> Cold <input type="checkbox"/> Smoke (tobacco, incense) <input type="checkbox"/> Pollen <input type="checkbox"/> Dust <input type="checkbox"/> Animals <input type="checkbox"/> Perfume <input type="checkbox"/> Mold <input type="checkbox"/> Medication <input type="checkbox"/> Pregnancy (including) <input type="checkbox"/> Stress <input type="checkbox"/> Exercise <input type="checkbox"/> Sudden heat, cold, humidity, changes in weather <input type="checkbox"/> Other: _____
Asthma Control: _____	Level of Last PE: _____
Green Zone: Go! — Take these CONTROL (PREVENTION) Medicines EVERY Day	
You have ALL of these: <input type="checkbox"/> No cough or wheeze <input type="checkbox"/> No night or early morning cough <input type="checkbox"/> No waking up at work and/or school <input type="checkbox"/> No trouble with exercise <input type="checkbox"/> No trouble with asthma symptoms	
You have NONE of these: <input type="checkbox"/> No cough or wheeze <input type="checkbox"/> No night or early morning cough <input type="checkbox"/> No waking up at work and/or school <input type="checkbox"/> No trouble with exercise <input type="checkbox"/> No trouble with asthma symptoms	
Yellow Zone: Caution! — Continue CONTROL Medicines and ADD RESCUE Medicines	
You have ANY of these: <input type="checkbox"/> Cough or wheeze <input type="checkbox"/> Night or early morning cough <input type="checkbox"/> Waking up at work and/or school <input type="checkbox"/> Trouble with exercise <input type="checkbox"/> Trouble with asthma symptoms	
You have NONE of these: <input type="checkbox"/> No cough or wheeze <input type="checkbox"/> No night or early morning cough <input type="checkbox"/> No waking up at work and/or school <input type="checkbox"/> No trouble with exercise <input type="checkbox"/> No trouble with asthma symptoms	
Red Zone: EMERGENCY! — Continue CONTROL & RESCUE Medicines and GET HELP!	
You have ANY of these: <input type="checkbox"/> Cough or wheeze <input type="checkbox"/> Night or early morning cough <input type="checkbox"/> Waking up at work and/or school <input type="checkbox"/> Trouble with exercise <input type="checkbox"/> Trouble with asthma symptoms	
You have NONE of these: <input type="checkbox"/> No cough or wheeze <input type="checkbox"/> No night or early morning cough <input type="checkbox"/> No waking up at work and/or school <input type="checkbox"/> No trouble with exercise <input type="checkbox"/> No trouble with asthma symptoms	

For more information, visit www.dcasthma.org.
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