

Remember...

Some inhalers must be used with a spacer.
Check with your GP, asthma nurse or pharmacist

Always keep your rescue inhaler and your spacer with you. You might need them if your asthma gets worse

Make sure you have an asthma review within 48 hours after an attack

Vaping in children and young people is dangerous and can cause permanent lung damage

My Asthma Triggers

List the things that make your asthma worse:

Pollen	Vaping
Dust	Environmental pollution
Animal fur	Other fumes/ sprays
Weather	Respiratory infections (cold/flu)
Exercise	Medicines
Mould/damp	Stress/emotions
Fumes	Food *
Tobacco smoke	
House dust mite	

* Always refer to your Allergy Plan as well

Any Other Triggers:

REMEMBER

Good asthma control means having **NO** or **FEW** symptoms

If you have any symptoms you should speak to your doctor or asthma specialist as soon as possible



As Needed AIR Asthma Plan

Ages 12 - 18

Name:
Date:

Produced by
London Babies, Children and Young People's Team

Extra Advice from my Asthma Professional:

Contact Details

GP:

Asthma Specialist/Team:

Additional Resources:

[Asthma and Lung UK
Asthma Toolkit](#)



[Check you're using
your inhaler properly:](#)



Every day: I have few or no symptoms

An as-required AIR treatment plan is for people who have few or no symptoms. This means you do not need a regular medicine to keep your asthma under control. Instead you use your inhaler only if you have symptoms. The inhaler helps the symptoms and at the same time treats the asthma. It is therefore OK to have occasional symptoms as long as they go away when you use your inhaler.

I only use one inhaler for my asthma

It is called:

and its colour is:

My best peakflow measure is: l/min

Other asthma medicines I take every day:

I carry my AIR inhaler with me every day and I take rescue puff(s) if I wheeze, cough, my chest hurts, or it's hard to breathe

My asthma is well controlled if

- I have few or no asthma symptoms during the day, and none at night **and**
- I can do everything I normally do (e.g. working, being active, socialising) **and**
- My peak flow score stays at or around **and**
- I only need to use my AIR inhaler occasionally as discussed with my GP or nurse

My asthma is not controlled if...

I am experiencing asthma symptoms more than normal **or**

If my asthma is stopping me doing sport or other activity **or**

I'm waking up at night because of my asthma **or**

My peakflow measure falls below 80%:

l/min

So I need to...

Take puff/s of my inhaler.

After 2 minutes if I still have symptoms, repeat this, one puff at a time, until my symptoms improve. I can take up to puffs.

My symptoms should be gone. If they come back I can repeat this process.

I will arrange to see my GP today or tomorrow if...

I need to use
my inhaler
regularly **or**

I'm having
more frequent
symptoms

I will go to the red section if...

My asthma symptoms are not improving with the rescue puffs **or**

My symptoms come back quickly **or**

My symptoms have come back but I have taken my maximum daily puffs (puff/s).

I'm having an asthma attack and need urgent attention and...

I will see a doctor
urgently
(emergency
department or GP
if available) if...

My symptoms have come back but I have taken my maximum daily puffs **or**

My symptoms come back quickly **or**

My peakflow measure falls below 60%:

l/min

I will call 999
and tell them
I'm having an
asthma attack
if... 

If my symptoms aren't completely better after puffs in a row **or**

My symptoms are getting worse.

If I still have symptoms, I can continue to take additional puffs as required.

I also need to...

Sit up - don't lie down. Try to keep calm.

If the ambulance has not arrived after 10 minutes, **contact 999 again immediately**, and take additional puffs every 2 minutes if I still have symptoms.

If I don't have my AIR inhaler with me and need to use the emergency blue reliever inhaler, take one dose every 30–60 seconds up to a maximum of 10 puffs.