MAPLE PLAN FOR CONTROLLING ASTHMA

MOST IMPORTANT
Most people with asthma do not get sick enough to need emergency care. The fact that you had to go to the emergency department usually means:
- You’re around triggers that are causing your symptoms.
- You’re not taking medications properly.
- You have not been prescribed the right medications.

ASTHMA IS A RECURRING DISEASE CAUSING YOUR AIRWAYS TO SWELL
Your asthma is out of control if any of the following is true:
- You have daily symptoms that include chest tightness, wheezing, cough or shortness of breath.
- You are taking an albuterol (like Xopenex HFA®, ProAir®, Proventil® and Ventolin®) rescue inhaler more than twice weekly (except for exercise).
- You wake up with asthma symptoms more than twice monthly.
- Your asthma is interfering with school, work or play.

PLAN TO CONTROL YOUR ASTHMA
To maintain control of your asthma, take long-term medications called “controllers.” Controllers are inhaled steroids or pills that must be taken regularly. These medicines will not stop a flare-up once it happens. During flare-ups, you will also need to take a quick-relief albuterol, like Xopenex HFA®, ProAir®, Proventil® and Ventolin®.

Quick-relief medications will help ease your breathing for a few hours. They do not control your underlying asthma. If you need quick-relief medication more than twice a week, your asthma may not be under control.

For control of severe symptoms, you may be prescribed a steroid pill or syrup to use for a few days or weeks. Continue using your controller medication as prescribed by your doctor.
LEARN ABOUT TRIGGERS AND HOW TO USE YOUR INHALER

Common Triggers
- Cigarette smoke and other smoke (wood stoves, fireplaces, bonfires)
- Viral infections (colds, flu, chest infections)
- Allergens (dust mites, animals), pollen (trees, grass, weeds) and mold
- Exercise
- Temperature changes

Using an Inhaler
- Take off cap and shake inhaler.
- Insert the inhaler into a spacer or chamber.
- Breathe out all the way.
- Insert the spacer or chamber in your mouth, or put it up to your mouth if using a mask.

Breathe Slowly
- Once your lungs are empty, press down once on the inhaler.
- Breathe in slowly through spacer or chamber. Count to five while inhaling.

Hold your Breath
- Once your lungs are full, hold your breath for ten seconds, if possible.
- Breathe out after holding your breath; prepare to take the next puff of medication.
- If under age 6 or unable to hold breath for six seconds, use a mask attachment and keep on your face for six breaths.
- Always use a spacer or chamber with your inhaler.

If you don’t have a prescribed spacer and chamber, the following may be used:
- Plastic water bottle (500 cc) | Cut hole in bottom to put in the inhaler mouthpiece
- Toilet paper tube | Put inhaler into one end, hold other end over mouth
- Styrofoam cup | Cut hole in bottom to put in the inhaler mouthpiece

EMERGENCY CARE MAY BE NEEDED
- Trouble talking
- Labored breathing
- You’ve been using quick relief medication more than every four hours