Core Asthma Education Messages*

- Asthma can be **controlled**. You and your asthma doctor or nurse can work together to manage your child’s asthma.

- Asthma is a **chronic disease**. When your child’s asthma symptoms cause breathing problems while exercising, laughing or doing normal activities, this is called persistent asthma.

- Know your child’s asthma triggers and to try to remove those triggers from their environment.

- Learn to recognize **early signs and symptoms** of asthma flares.

- Asthma **flares** may occur when asthmatics are exposed to infectious or environmental triggers.

- There are two types of medicines: **controller** and **quick relief**.

- Asthma medicines come in different forms. Make sure that you know how to use your child’s medicines and asthma devices.

- Anyone with **persistent asthma** should be managed with a **controller medicine** used everyday to control the inflammation (swelling, mucous production and narrowing) in your child’s lungs.

- Here are three signs that indicate that your child’s asthma is not controlled:
  - He/She uses a **quick-relief medicine** (such as albuterol) more than **twice a week**
  - He/She awakes at night with asthma symptoms such as **coughing, wheezing or chest tightness** more than **twice a month**
  - He/She refills the **quick-relief medicine** more than **twice a year**

- Every child with persistent asthma should have an **asthma management plan**.
  - The green zone is used for daily control when no symptoms are present.
  - The yellow zone is used when the child begins to have asthma symptoms that persist for more than 1 day.
  - The red zone is used when the child cannot talk and in severe respiratory distress.

- The **recovery plan** gives instruction on management of an asthma flare.
  - Should be used on discharge from the hospital, emergency room or outpatient setting

- Children who have been hospitalized for asthma should see their primary care provider within **3-5 days** after discharge.

- Children who have been seen in the emergency room for an acute asthma flare, should be seen by their primary care provider within **3-5 days** after discharge.

- Children with persistent asthma should be followed regularly for asthma by their primary care practitioner or asthma specialist at least three times each year.

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