

ANNUAL ASTHMA REVIEW WORKSHEET



ASTHMA AUSTRALIA

NAME:

DATE: / /

An **Asthma Review** is a chance to talk with your doctor, nurse, or health worker about your asthma. You can share information with them, ask questions and together plan for you to best manage your asthma to breathe better. Think about what you are hoping to achieve in your asthma review. **This worksheet will help you get ready.**

HINT: Ask for a double appointment time for your Asthma Review

MY NOTES



BEFORE YOUR APPOINTMENT

Check if you need to have a **lung function test**, and if so, how to prepare
Take all your inhalers, spacers and any nasal sprays with you



GOALS FOR THIS APPOINTMENT

- Get a new **Asthma Action Plan** (or renew previous one)
- Get any new prescriptions I need for the stages on my Asthma Action Plan
- Have my **inhaler technique** checked in person (with spacer if using a puffer)
- Check if my treatment is up to date against the latest Australian Asthma Handbook guidelines
 - Is my preventer dose correct?
 - Am I managing my comorbidities according to evidence?
- Ask about best-practice hay fever or allergy treatment
- Ask about more affordable treatment options
- Ask about help to **quit smoking**
- Ask about.....

GP/NURSE NOTES

Spirometry due every 1-2 years for most people with asthma.

Everyone with asthma needs an Asthma Action Plan.

Latest guidelines are available at astmahandbook.org.au

Referral to a respiratory specialist is encouraged if a patient has flare-ups whilst using ICS-LABA.

Monoclonal antibody therapy can be initiated by a specialist and may reduce the rate of severe flare-ups requiring oral steroids.

Wait lists can be long so early referral is best.



MY RECENT ASTHMA

In the last year:

I have needed oral steroids times

Oral steroids include prednisone, prednisolone and dexamethasone

In the last year:

In the last year I have been to the emergency department or admitted to hospital

times for asthma

Potentially toxic threshold is 1000mg, or approx. four lifetime courses.

Visit our [website](#) to read more about oral steroid stewardship.



SCAN ME

MY NOTES

GP/NURSE NOTES

In the past 4 weeks:

I had daytime asthma symptoms more than 2 days a week
I had some trouble with daily activities or exercise due to my asthma
I had some symptoms during the night or when I woke up
I needed my reliever more than 2 days a week

 None of these

You have good control over your asthma symptoms right now

 Any of these

Your asthma symptoms are not under control right now

**Have you had any recent asthma attacks or unusual symptoms?
How do your other conditions affect your breathing?**

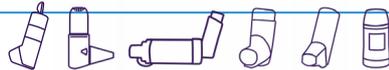
Asthma control score: ___



MY CURRENT ASTHMA MEDICINES

My reliever is:

name



I take puffs/inhalations,

I have used up relievers in the past 12 months

My preventer is:

name



I take puffs/inhalations,

I am open to trying a new preventer or new style of inhaler

I am worried about the cost of my medicine

I am worried about side effects

My other asthma medicines

e.g. biologics, specialised severe asthma medicines:

Three or more short acting reliever canisters per year is associated with increased risk of asthma flare-ups.

Twelve or more short acting relievers per year is associated with increased risk of asthma death.

Would patient benefit from an anti-inflammatory reliever treatment plan with ICS-formoterol?

Consider cost and ability to use the style of inhaler.

Is preventer eligible for a 60-day prescription?



MY SMOKING

I smoke / vape times a day

This includes cigarettes, cigars, pipes, bong, and e-cigarettes etc.

I am exposed to other people's smoke / vaping Yes No

Offer referral to Quitline for multi-session support and pharmacotherapy if clinically appropriate.

MY NOTES

GP/NURSE NOTES



MY OTHER CONDITIONS AND TREATABLE TRAITS

Reflux or heartburn

Hay fever or allergic rhinitis

Sinus issues

Allergies:

Excess mucus

Higher body weight

Activity limitation

Vocal cord issues

Chronic breathlessness or frequently sigh or yawn

Snoring, sleep apnoea

Anxiety

Low mood or depression

Other chronic conditions:

Consider impact on asthma and best treatment or multidisciplinary care options.

Advise if at risk of thunderstorm asthma. asthma.org.au/thunderstorm

Review risk for side-effects of oral steroids. Check BP, glucose, cholesterol and bone density.

These traits or conditions can have an impact on your asthma, but they can be managed individually. Talk to your doctor about treatment options.



MY NEXT REVIEW

Book my next review in weeks / months

- Asthma symptom control should be monitored frequently.
- In general asthma should be reviewed:
 - **within 3-12 weeks after changing a treatment and**
 - **every 3-12 months depending on how stable your asthma is**
 - **within 1 week after an asthma flare-up**

Book next appointment in advance.



MY QUESTIONS AND NOTES

For more information about asthma, call Asthma Australia on **1800 ASTHMA (1800 278 462)** or email us at asthmasupport@asthma.org.au

Do you want more support with your asthma self-management, with a free, long consult with an Asthma Educator?

People with asthma can self-refer by booking a call here: asthma.org.au/book-a-call

Health professionals can refer a patient here: asthma.org.au/refer

