

My COPD Action and Management Plan

You and your healthcare provider should fill in this plan together. Bring a copy to each appointment so you can discuss your plan and update it as needed.

GENERAL INFORMATION

Name	Telephone
Emergency contact	Telephone
Family doctor or nurse practitioner	Telephone

GENERAL LUNG HEALTH *Appropriate exercise and a balanced diet can help prevent COPD flareups*

Exercise plan Yes No Walking Other _____ mins/day _____ days/week

Diet plan Yes No Goal weight: _____ lbs kgs

Pulmonary rehabilitation Yes No Date last attended: _____

VACCINATIONS *Staying up to date on your recommended vaccinations can help prevent COPD flareups*

Vaccine	Date received	Next vaccine due
Influenza vaccine (flu shot)		
COVID-19 booster		
Pneumonia (pneumococcal) vaccine		
Respiratory syncytial virus (RSV) vaccine		

MEDICATIONS FOR COPD

Purpose of medication	Name of medication	How much to take	When to take it

OXYGEN

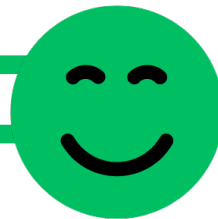
Resting:	Increased activity:	Sleeping:
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My COPD Action and Management Plan

This section of your COPD Action and Management Plan is a personalized worksheet that lists the steps to take to manage your COPD depending on how you feel. It helps you to know how and when to take your medicines, when to call your healthcare provider and when to get emergency care.

Note that the list of symptoms in each coloured zone is not complete. You may experience other symptoms. In the “Actions” column, your healthcare provider will recommend actions for you to take. Your healthcare provider may write down other actions in addition to those listed here.

GREEN zone: I am doing well today.

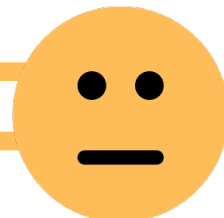


- I can maintain my usual exercise or activity level.
- I am coughing no more than usual.
- I have the usual amount of phlegm/mucus.
- I am sleeping well.
- My appetite is good.

ACTIONS

- Take daily medicines
- Use oxygen as prescribed
- Continue to exercise regularly and follow my diet plan
- Avoid the use of tobacco products and other inhaled irritants (smoke, dust)

YELLOW zone: I am having a bad day or a COPD flareup.



- I am more breathless than usual.
- I have less energy than usual for daily activities.
- I have more phlegm/mucus and/or it's thicker than usual.
- I am using my quick-relief (“rescue”) inhaler more often.
- My ankles are more swollen than usual.
- I am coughing more than usual.
- I feel as if I have a “chest cold”.
- I am not sleeping well, my symptoms keep waking me up.
- My appetite is not good.
- My medicine is not helping.

ACTIONS

- Continue daily medication
- Use my quick relief inhaler every _____ hours
- Start an oral corticosteroid (specify name, dose, and duration)

- Start an antibiotic (specify name, dose, and duration)

- Use oxygen as prescribed
- Get plenty of rest
- Use pursed-lip breathing
- Avoid second-hand smoke, e-cigarette aerosol, and other inhaled irritants
- Call my provider immediately if symptoms do not improve
- Other actions I need to take:

RED zone: I need urgent medical care



- I have severe shortness of breath even at rest.
- I'm not able to do any activity because of my breathing.
- I'm not able to sleep because of my breathing.
- I have a fever or shaking/chills.
- I feel confused or very drowsy.
- I am having chest pains.
- I am coughing up blood.

ACTIONS

- Call 911 or seek medical care immediately
- While getting help, I immediately need to do the following:

