

Assessing Asthma Severity Classification

Determine level of severity according to patient's age & most serious risk or impairment feature (circle answers).

Risk: how many times in the last 12 months did your child take a steroid medicine like Prednisolone, Prednisone, Dexamethasone, Solumedrol?

Impairment: in the last three months—not counting this illness: how many days a week did your child have asthma symptoms (cough, wheeze, SOB); how many times in a month did they wake up at night with symptoms; how many times a week did they use their rescue medicine (albuterol) not including pre-exercise; how much did their asthma interfere with their normal activities, able to go to school, play, etc.?

Age	Risk		Impai	Level of Severity	Preferred Treatment		
	Exacerbations Requiring Steroids	Daytime Symptoms	Night-time Awakenings	Use of Albuterol for Symptom Relief	Interference with Normal Activity		
"0-4 Years"	O-1 in the last year OR > 2 in the last 6 months; OR > 4 wheezing episodes in the last year AND risk factors for asthma	< 2 days/wk	0	<2 days/wk.	None	Intermittent	Albuterol as Needed
		>2 days/wk not daily	1-2x/ month	>2 days/wk but not daily	Minor limitation	Mild Persistent	Low Dose Inhaled Steroids
		Daily	3-4x/ month	Daily	Some limitation	Moderate persistent	Medium Dose Inhaled Steroids
		Throughout the day	>1x/wk	Several x/day	Extremely limited	Severe persistent	
"5-11 Years"	0-1 in the last year	<2 days/wk	<2x/month	<2days/wk	None	Intermittent	Albuterol as Needed
	>2 in the last year	>2 days/wk not daily	3-4x/ month	>2days/wk but not daily	Minor limitation	Mild Persistent	Low Dose Inhaled Steroids
		Daily	>1x/wk not nightly	Daily	Some limitation	Moderate Persistent	Medium Dose Inhaled Steroids
		Throughout the day	Often 7x/wk.	Several x/day	Extremely limited	Severe Persistent	Medium Dose Inhaled Steroids OR Medium Dose Inhaled Steroids + LABA*
"12 Years to Adult"	0-1 in the last year	<2 days/wk	< 2x/ month	< 2 days/wk	None	Intermittent	SABA** as Needed
	>2 in the last year	>2 days/wk not daily	3-4x/ month	>2 days/wk but not daily nor > 1x/day	Minor limitation	Mild Persistent	Low Dose ICS***
		Daily	>1x/wk not nightly	Daily	Some limitation	Moderate Persistent	Medium Dose ICS*** OR Low Dose ICS + LABA*
		Throughout the day	Often 7x/wk.	Several x/day	Extremely limited	Severe Persistent	Medium Dose ICS*** + LABA OR High Dose ICS + LABA*

*LABA- Long-Acting Beta Agonist | SABA- Short-Acting Beta Agonist** | ICS- Inhaled Corticosteroid



Assessing Asthma Control

The chart below is intended to be used for patients on an Inhaled Steroid Controller and adherent to that controller 5 to 7 days in a week. Answer five questions about your asthma and use the appropriate age range to determine if your asthma is well controlled (circle answers).

First, Determine: Medication Adherence – how many days in the past month has your child missed taking their controller medication (e.g. Flovent, Asmanex, QVAR, Symbicort), if missed more than two days per week on average – use severity assessment chart instead. Use Inhaled corticosteroid (ICS) Dosing Chart to determine previously diagnosed asthma severity based on prescribed controller medication dose. Determine level of CONTROL according to patient's age & most serious risk or impairment feature.

Next. Assess Risk:

How many times in the last 12 months did your child take a steroid medicine like Prednisolone, Prednisone, Dexamethasone, Solumedrol?

Impairment: In the last month not counting this illness record, determine: how many days a week did your child have asthma symptoms (cough, wheeze, SOB), how many times in a month did they wake up at night with symptoms, how many times a week did they use their rescue medicine (albuterol) not including pre-exercise, and how much did their asthma interfere with their normal activities – able to go to school, play, etc.?

Age Group	Risk		lmpai	Level of control	Recommended Treatment		
	Exacerbations Requiring Steroids	Daytime Symptoms	Night-time Awakenings	Use of Albuterol for Symptom Relief	Interference with Normal Activity		Use Stepwise Chart on back
0-4 Years	0-1 in the last year	<2 days/ week	<1x/month	<2 days/week	None	Well Controlled	Maintain current treatment
	> 2 in the last year	>2 days/ week	>1x/ month	>2 days/week	Some limitation	Not Well Controlled	Step up by 1 step & Consult Pulmonary
		Throughout the day	>1x/week	Several x/day	Extremely limited	Very Poorly Controlled	Step up by 1-2 steps & Consult Pulmonary
5-11 Years	0-1 in the last year	<2 days/ week not >1x/day	<1x/month	<2 days/week	None	Well Controlled	Maintain current treatment
	> 2 in the last year	>2 days/ week or multiple times on <2 days/week	> 2x/month	>2 days/week not daily	Some limitation	Not Well Controlled	Step up by 1 step & Consult Pulmonary
		Throughout the day	>2x/week	Several x/day	Extremely limited	Very Poorly Controlled	Step up by 1–2 steps & Consult Pulmonary
12 Years to Adult	0-1 in the last year	< 2 days/week	< 2x/month	<2 days/week	None	Well Controlled	Maintain current treatment
	> 2 in the last year	>2 days/week	1-3x/week	>2days/week	Some limitation	Not Well Controlled	Step up by 1 step & Consult Pulmonary
		Throughout the day	>4x week	Several x/day	Extremely limited	Very poorly controlled	Step up by 1–2 steps & Consult Pulmonary