

Asthma Diary Name _____ Current Meds: _____

Record your personal best peak flow. Then enter your green, yellow, and red zone number in the spaces below.

Peak flows

My **personal best** is _____ liters per second
(personal best is the highest peak flow achieved over 2-3 weeks when your asthma is under good control)

My **green zone (normal)** is _____ liters per second (80%-100% of personal best)
(Calculate this by multiplying your personal best by **.8**; any number at or above the result is in your green zone.)

My **yellow zone** is _____ liters per second (50%-79% of personal best)
(Calculate this by multiplying your personal best by **.5** and **.8**; your yellow zone will fall between those two numbers.)

My **red zone** is _____ liters per second (less than 50% of personal best)
(Calculate this by multiplying your personal best by **.5**; your red zone will fall below this number.)

Date	AM/PM Peak Expiratory Flows			Symptoms (coughing, wheezing, shortness of breath, chest tightness)	Possible trigger(s) (exercise, emotions, environment)	Medications (which ones used, when and results)	If Red zone, did you miss school or work? Visit hospital or doctor?
	Green	Yellow	Red				