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10787 NALL AVE. • SUITE 200 • OVERLAND PARK, KANSAS 66211 • (913) 491-3300 • FAX (913) 491-0904

ASTHMA CONTROL TEST

NAME _____ (DOB) _____ DATE _____

The American Lung Association recommends that everyone 12 years of age and older with asthma take the Asthma Control Test. Write the number of each answer on the right and then add up each score for your total.

In the past **4 weeks**, how much of the time did your **asthma** keep you from getting as much done at work, school or at home?

- | | | |
|-----------------------|---|-------------|
| All of the time? | 1 | |
| Most of the time? | 2 | |
| Some of the time? | 3 | |
| A little of the time? | 4 | |
| None of the time? | 5 | Score _____ |

During the past **4 weeks**, how often have you had shortness of breath?

- | | | |
|-----------------------|---|-------------|
| More than once a day? | 1 | |
| Once a day? | 2 | |
| 3 to 6 times a week? | 3 | |
| Once or twice a week? | 4 | |
| Not at all? | 5 | Score _____ |

During the past **4 weeks**, how often did your **asthma** symptoms (wheezing, coughing, shortness of breath, chest tightness or pain) wake you up at night or earlier than usual in the morning?

- | | | |
|--------------------------|---|-------------|
| 4 or more nights a week? | 1 | |
| 2 or 3 nights a week? | 2 | |
| Once a week? | 3 | |
| Once or twice? | 4 | |
| Not at all? | 5 | Score _____ |

During the past **4 weeks**, how often have you used your rescue inhaler or nebulizer medication (such as albuterol)?

- | | | |
|--------------------------|---|-------------|
| 3 or more times per day? | 1 | |
| 1 or 2 times per day? | 2 | |
| 2 or 3 times per week? | 3 | |
| Once a week or less? | 4 | |
| Not at all? | 5 | Score _____ |

How would you rate your **asthma** control during the **past 4 weeks**?

- | | | |
|------------------------|---|-------------|
| Not controlled at all? | 1 | |
| Poorly controlled? | 2 | |
| Somewhat controlled? | 3 | |
| Well controlled? | 4 | |
| Completely controlled? | 5 | Score _____ |

Total Score _____

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ASTHMA CONTROL TEST

19 OR LESS

If you scored 19 or less, it may be an indication that your asthma is not under control.

20 OR MORE

If you scored 20 or more, your asthma seems to be well controlled.

Asthma is unpredictable. Your asthma symptoms may seem mild or nonexistent, but they can flare up at any time. Take the Asthma Control Test periodically no matter how good you feel. When your asthma is controlled, you should expect to be MORE active and have FEWER symptoms.