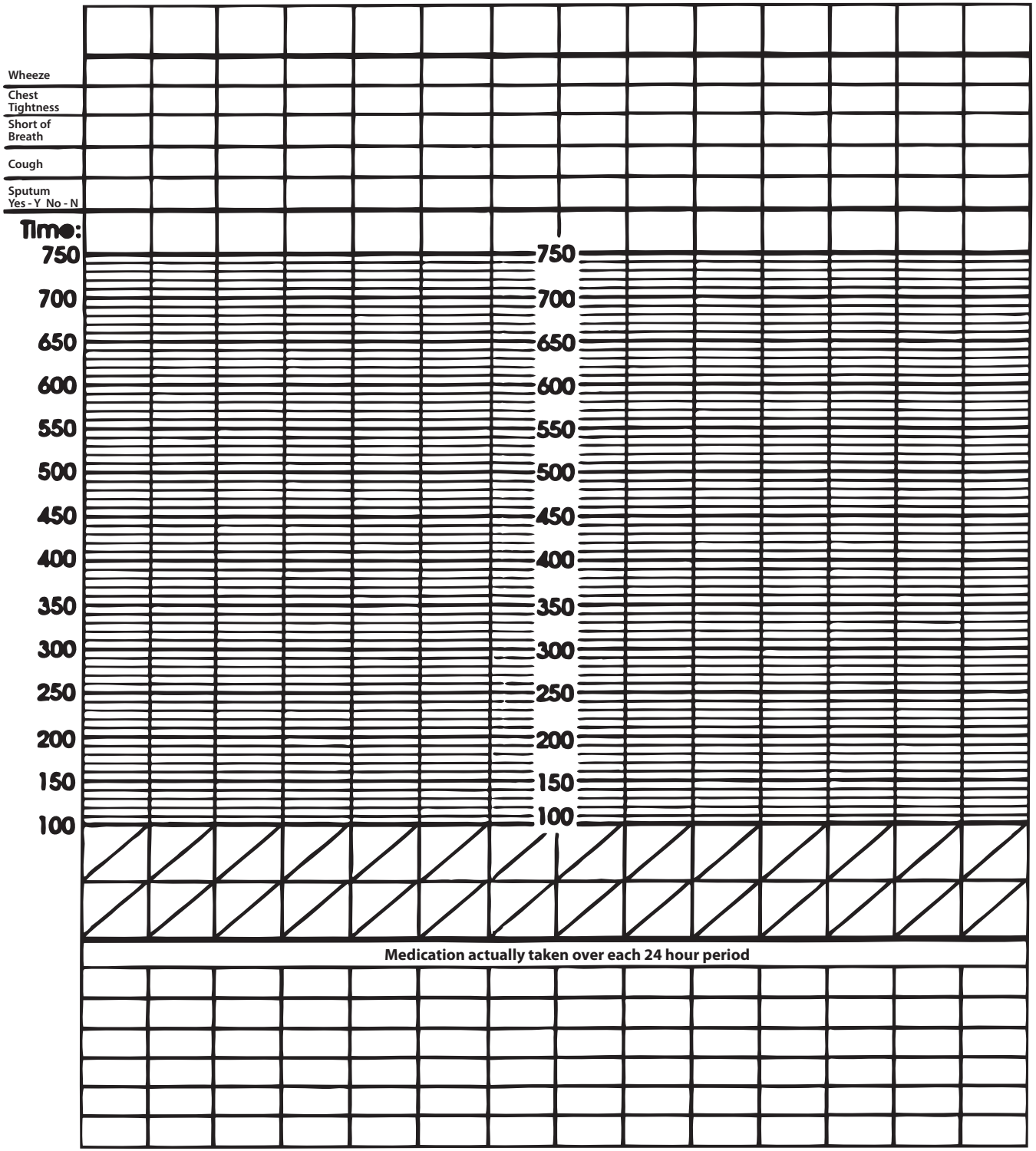

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FIRH

Firestone Institute for Respiratory Health

Asthma Diary

- symptoms
- peak flow rates
- medications

Name: _____

Doctor: _____

St. Joseph's Healthcare Hamilton

McMaster University

Month Year Day

Record Symptom Severity as Follows
0 None
1 Mild
2 Moderate
3 Severe
4 Disturbing Sleep

Wheeze
Chest Tightness
Short of Breath
Cough
Sputum Y-Yes N- No

Time:

Peak Flow Graph Instructions

1. Record best of 3 maximum blows
2. Read meter to nearest 10
3. If Ventolin needed
   - measure and record best of 3 blows
   - take ventolin and wait 15 minutes
   - measure and record again

● after
○ before
Ventolin

750 700 650 600 550 500 450 400 350 300 250 200 150 100

Peak Flow Meter Readings:

before / after

Medication	Dose	Medication actually taken over each 24 hour period