



The Force for Health®
PREPARED PATIENT PROGRAM

PREPARED PATIENT

Asthma

Your complete learning module — eight components from newly-diagnosed to a clinically Prepared Patient Ambassador. Everything to know and do, in one place.

8-Component Condition Module

WHAT'S INSIDE — THE 8 COMPONENTS

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| 1 Core Basics | 2 Self-Reflection |
| 3 Force Field Fact Sheet | 4 Prepared Patient Course |
| 5 Materials & Tools | 6 Skills Lab |
| 7 Exam · Ambassador | 8 Disease Advocate |



SCAN TO OPEN THE
LIVE JOURNEY

1 Core Basics

Welcome — why becoming a Prepared Patient matters

Welcome. You're in the right place. This module turns Asthma from something that happens *to* you into something you help manage — step by step, at your own pace. You don't need to become a doctor. You need to become the most prepared person in the room about *your* health.

WHY THIS MATTERS — FOR YOU AND THE PEOPLE AROUND YOU

As a Patient

Know your numbers, spot your red flags, and act fast when it counts. Prepared patients have better days and fewer emergencies.

As an Ambassador

Speak up in your own care as an equal partner — ask the right questions and help shape your plan.

As a Caregiver

Support someone you love with confidence — know what to watch for and what to do.

ASTHMA — A NATIONAL OVERVIEW

Asthma is a lung disease. Two things happen. First, the airways stay a little swollen inside — even when you feel fine. Second, the airways can suddenly tighten.

That is when you cough, wheeze, feel tight in the chest, or get short of breath. About 25 million Americans have asthma — about 1 in 12 adults and 1 in 11 kids.

The good news: asthma is one of the most controllable diseases there is. The goal is zero symptoms, no rescue-inhaler use, no ER visits, and full activity.

PRE-KNOWLEDGE CHECK — RATE WHAT YOU KNOW RIGHT NOW (1–5)

Be honest — there's no wrong answer. You'll rate these again at Step 7 and see how far you've come.

What Asthma actually is

○ ○ ○ ○ ○

My key numbers & targets

○ ○ ○ ○ ○

My red flags — and what to do

○ ○ ○ ○ ○

My medicines & how to take them

○ ○ ○ ○ ○

How to speak up with my care team

○ ○ ○ ○ ○

1 = new to me · 5 = I could teach it



1

Core Basics

Welcome — why becoming a Prepared Patient matters

★ My Prepared Patient Pledge

I pledge to learn about my Asthma, to know my numbers and my red flags, to speak up in my own care, and to take one small step at a time — for myself and for the people who count on me.

SIGNED

DATE

Additional Notes

☐ I've completed Step 1 · Welcome & Overview for Asthma



2 Self-Reflection

Eight soft questions to find your honest starting point

No test, no wrong answers — an honest self-reflection to find your starting point with Asthma. This is an engagement screener, not a clinical assessment. Mark your answers, then carry them into the Fact Sheet.

Q1 Have you ever been told by a clinician that you have asthma — or had a doctor mention it could be asthma?

Asthma is often dismissed as "just allergies" or "out of shape." Naming what you've actually been told is the first step.

CHOOSE ONE

- ☐ Yes — I have a clear asthma diagnosis
- ☐ Once or twice, but I'm not sure it stuck
- ☐ No, but I get wheezy or short of breath sometimes
- ☐ No — I don't have asthma
- ☐ I'm not sure

Q2 Has anyone in your family been diagnosed with asthma, severe allergies, or eczema?

Asthma, allergies, and eczema cluster in families — knowing the pattern matters.

CHOOSE ONE

- ☐ Yes
- ☐ No
- ☐ I don't know
- ☐ Some, but I'm not sure who

Q3 Have you ever heard about, or thought about, any of these in connection with asthma? (check all that feel familiar)

This is just a familiarity check, not a behavior audit. Pick whatever rings a bell.

CHECK ALL THAT APPLY

- ☐ Asthma Action Plan (the green / yellow / red zones)
- ☐ Inhalers — rescue (blue) versus controller (every day)
- ☐ Spacer or holding chamber for an inhaler
- ☐ Peak flow meter
- ☐ Triggers (smoke, cold air, exercise, dust mites, pets, mold)
- ☐ An ER visit or admission for breathing trouble
- ☐ None of these — this is all new to me



2 Self-Reflection

Eight soft questions to find your honest starting point

Q4 Do you feel confident that you understand asthma — what it is, what it does to the lungs, and what helps?

"Somewhat" is a totally fair answer. Most people start there.

CHOOSE ONE

- ☐ Very confident — I know the basics well
- ☐ Somewhat — I know some, want to know more
- ☐ Not really — I'd like to learn more
- ☐ This is new to me

Q5 Do you feel confident you know how to live the highest-quality life possible despite (or to prevent) asthma — for yourself or for someone you love?

Quality of life is the goal — running, sleeping, school, work, sports — not just "managing flares."

CHOOSE ONE

- ☐ Yes
- ☐ I'm getting there
- ☐ Not yet — I want to learn how
- ☐ Not applicable to me right now

Q6 Are you ready to become an informed and respected part of your care team — where your observations, communications, and actions are the most important part of your care?

This is the heart of the Prepared Patient idea.

CHOOSE ONE

- ☐ Yes — I'm ready
- ☐ Almost — I want to learn more first
- ☐ I'd like to but I'm not sure how
- ☐ I hadn't thought of it that way before



2 Self-Reflection

Eight soft questions to find your honest starting point

Q7 Do you have at least one person — family, friend, school nurse, or care team — you can turn to about asthma?

For kids especially, a trained adult outside the home matters.

CHOOSE ONE

- ☐ Yes — I have someone
- ☐ Maybe — I'm not sure who
- ☐ Not yet — but I'd like to find someone
- ☐ I prefer to figure it out myself first

Q8 What brought you to this Prepared Patient program today?

Your answer is private and helps us speak to you better.

CHOOSE ONE

- ☐ I have asthma
- ☐ My child has asthma
- ☐ Someone else I love has asthma
- ☐ I might have it — sometimes I'm short of breath
- ☐ I'm a student, professional, or educator
- ☐ I'm just curious

What these answers tell me about where I'm starting



2 Self-Reflection

Eight soft questions to find your honest starting point

Additional Notes

☐ I've completed Step 2 · Self-Reflection for Asthma



3 Force Field Fact Sheet

Primer · Foundations

This is the heart of the resource: the complete Asthma Force Field, organized in knowledge tiers. Each card gives the essentials, then **Concepts** (what to know), **Skills** (what you can do), **Actions** (this week), and your **Plan** (share & sustain).



What Is Asthma?

PRIMER · TIER 0

Asthma is a lung disease. Two things happen. First, the airways stay a little swollen inside — even when you feel fine. Second, the airways can suddenly tighten.

That is when you cough, wheeze, feel tight in the chest, or get short of breath. About 25 million Americans have asthma — about 1 in 12 adults and 1 in 11 kids.

The good news: asthma is one of the most controllable diseases there is. The goal is zero symptoms, no rescue-inhaler use, no ER visits, and full activity.

CONCEPTS · LEARN IT

- Asthma has two parts: swelling inside the airways, and sudden tightening
- The swelling is always there; the tightening comes and goes
- About 25 million Americans have asthma (1 in 12 adults, 1 in 11 kids)
- Well-controlled asthma means no symptoms and a full, active life

ACTIONS · THIS WEEK

- Write down your last few asthma symptoms
- Bring this page to your next visit

SKILLS · LIVE IT

- Say what asthma is in your own words
- Know that 'feeling fine' does not mean the swelling is gone

PLAN · SHARE IT

- Explain asthma to one family member
- Share the goal: zero symptoms, full activity



3 Force Field Fact Sheet

Primer · Foundations



360 Human Anatomy: Airway, T2 Inflammation, Smooth Muscle

PRIMER · ANATOMY

Air travels from your windpipe down into smaller and smaller tubes in your lungs. In asthma, the muscle around these tubes can squeeze them tight. The lining inside also gets swollen and makes extra mucus.

In many people this swelling is a type called 'T2.' It brings in special blood cells and raises a marker called IgE. This matters because newer 'biologic' shots (like omalizumab, mepolizumab, benralizumab, dupilumab, and tezepelumab) target this exact kind of swelling.

Knowing your type helps your team pick the right medicine.

CONCEPTS · LEARN IT

- Air moves through branching tubes; asthma narrows them
- The muscle around the tubes can squeeze tight
- The lining swells and makes extra mucus
- 'T2' swelling can be treated with biologic shots

ACTIONS · THIS WEEK

- Look at a simple airway picture with your team
- Ask which medicine fits your asthma type

SKILLS · LIVE IT

- Picture how your airways narrow during a flare
- Ask your team if you have the 'T2' type

PLAN · SHARE IT

- Show a family member how airways narrow
- Bring your type to each visit



Who Gets It? — Phenotypes

PRIMER

Asthma is not the same for everyone. There are different 'types.' Some people have allergy-driven asthma, often starting in childhood, with high allergy markers.

Some get it as adults. Some have asthma set off by exercise, cold air, or a job (like bakers or cleaners). A few have asthma plus nasal polyps and a bad reaction to aspirin.

Kids are the biggest group — about 1 in 11 — and colds are their top trigger. Your type helps your team choose the best treatment for you.

CONCEPTS · LEARN IT

- Asthma comes in several types
- Allergy type often starts in childhood
- Some asthma is set off by exercise, cold air, or work
- Your type guides the best treatment

ACTIONS · THIS WEEK

- List your top triggers
- Tell your team about work or exercise triggers

SKILLS · LIVE IT

- Name your asthma type
- Notice what sets off your asthma

PLAN · SHARE IT

- Help others see asthma is not one-size-fits-all



3 Force Field Fact Sheet

Primer · Foundations



The Numbers — PEF, FEV1, ACT, FeNO, Eos

PRIMER

A few numbers tell you if your asthma is under control. Peak flow (PEF) is how fast you can blow air out — a small \$20 home meter measures it. Track it for two weeks to find your 'personal best.' Then use zones:

green is 80% or more (good), yellow is 50–79% (caution), red is under 50% (danger — act now). FEV1 is a lung test done at the clinic. The ACT is a simple 5-question score;

20 or higher means good control. Ask your team which numbers are yours to watch.

CONCEPTS · LEARN IT

- Peak flow (PEF) shows how fast you blow air out
- Green 80%+ / Yellow 50–79% / Red under 50%
- ACT score of 20 or more means good control
- FEV1 is a clinic lung test

ACTIONS · THIS WEEK

- Buy or ask for a peak flow meter
- Do your ACT this month and write the score

SKILLS · LIVE IT

- Find your personal-best peak flow
- Score your ACT once a month

PLAN · SHARE IT

- Teach a family member your green/yellow/red zones



3 Force Field Fact Sheet

Tier 1 · Learn It · Aware



Recognize Symptoms + Triggers

LEARN IT · TIER 1 AWARE

Know your warning signs. Common asthma symptoms are cough (often worse at night or with exercise), wheeze (a whistling sound), chest tightness, and shortness of breath.

Symptoms come and go, and they are often worse at night or early morning. They get set off by specific things called triggers. The most common triggers are colds and other viruses, allergens (like dust mites, pets, mold, pollen, cockroaches), smoke, cold air, exercise, and strong smells.

Learn your own triggers so you can avoid them.

CONCEPTS · LEARN IT

- Main symptoms: cough, wheeze, chest tightness, short of breath
- Often worse at night or early morning
- Colds are the #1 trigger
- Other triggers: allergens, smoke, cold air, exercise

ACTIONS · THIS WEEK

- Write your top 3 triggers
- Make a plan to avoid one trigger this week

SKILLS · LIVE IT

- List your own triggers
- Notice when symptoms happen most

PLAN · SHARE IT

- Share your triggers with family and school/work



Diagnostic Workup + Wellness

LEARN IT · TIER 1 AWARE

Asthma is diagnosed by your story plus a breathing test. The main test is spirometry — you blow into a machine before and after a puff of medicine. If your airflow improves a lot with the medicine, that points to asthma.

Other helpful tests: allergy testing (skin or blood) to find your triggers, and blood tests to find your type. Also important for wellness: yearly flu and COVID shots, pneumonia and RSV shots when advised, enough vitamin D, and an inhaler-technique check at every visit — because most people use inhalers wrong.

Everyone should have a written Asthma Action Plan.

CONCEPTS · LEARN IT

- Spirometry (a breathing test) is the main way to diagnose asthma
- Allergy and blood tests help find your type
- Vaccines matter: flu, COVID, and others when advised
- Most people use inhalers wrong — get checked

ACTIONS · THIS WEEK

- Book overdue spirometry
- Get your flu and COVID shots
- Ask for a written Action Plan

SKILLS · LIVE IT

- Ask for a breathing test if you have not had one
- Have your inhaler technique checked

PLAN · SHARE IT

- Remind others to get an inhaler-technique check



3 Force Field Fact Sheet

Tier 1 · Learn It · Aware



Know My Numbers

LEARN IT · TIER 1 AWARE

These are the personal numbers worth knowing and writing down. Your peak flow personal best (found over two weeks) and your green/yellow/red zones. Your ACT score each month.

Whether you take a controller inhaler every day and a rescue inhaler for symptoms. Keeping a simple 'numbers card' helps you and your team see how you are doing over time.

The two biggest things that keep asthma controlled are taking your controller every day and using good inhaler technique.

CONCEPTS · LEARN IT

- Track your peak-flow personal best and zones
- Track your ACT score monthly
- Know your controller (daily) and rescue (as needed) inhalers
- A numbers card shows your trend over time

ACTIONS · THIS WEEK

- Start a numbers card this week
- Set a daily reminder for your controller inhaler

SKILLS · LIVE IT

- Fill in your numbers card
- State your peak-flow personal best

PLAN · SHARE IT

- Show your numbers card at each visit



Lifestyle Force Field — Trigger Control + Adherence

LEARN IT · TIER 1 AWARE

Daily habits build a 'force field' around your lungs. The two most important: take your controller inhaler every day (even when you feel fine), and use it the right way with a spacer.

Beyond that: know and avoid your triggers, keep your home smoke-free, reduce dust and mold, stay active (activity is good for asthma), get enough sleep, and manage stress.

If you take a lot of oral steroids for asthma, those can affect your bones, blood sugar, and eyes over time — so good control with the right medicines protects the rest of your body too.

CONCEPTS · LEARN IT

- Take your controller inhaler every day
- Use a spacer and the right technique
- Avoid triggers; keep home smoke-free
- Stay active, sleep well, manage stress

ACTIONS · THIS WEEK

- Use your controller every day this week
- Add a spacer if you do not use one

SKILLS · LIVE IT

- Show correct inhaler-with-spacer technique
- Set up your home to lower triggers

PLAN · SHARE IT

- Share one habit that helps your asthma



3 Force Field Fact Sheet

Tier 2 · Live It · Active



Medications + Inhaler Technique

LIVE IT · TIER 2 ACTIVE

There are two main kinds of asthma inhalers. A controller (like an inhaled steroid) calms the swelling and is taken every day. A rescue inhaler opens the airways fast during symptoms.

Many people now use a combined 'SMART' plan — ask your team if it fits you. Using more than one rescue inhaler a month, or needing it more than twice a week, means your asthma is not controlled — tell your team.

For harder asthma, biologic shots can help. The most important skill is correct inhaler technique with a spacer — most people make a mistake, and fixing it works better than adding medicine.

CONCEPTS · LEARN IT

- Controller inhaler = daily, calms swelling
- Rescue inhaler = fast relief for symptoms
- Needing rescue more than 2x/week = not controlled
- Correct technique with a spacer matters most

ACTIONS · THIS WEEK

- Get an inhaler-technique check
- Count your rescue-inhaler use this month

SKILLS · LIVE IT

- Show your inhaler technique with a spacer
- Know your controller from your rescue inhaler

PLAN · SHARE IT

- Teach one person the difference between controller and rescue



Care Team Members

LIVE IT · TIER 2 ACTIVE

Asthma care is a team. Your main doctor (family medicine or internal medicine) handles most asthma. A lung doctor (pulmonologist) or allergy doctor helps with harder or allergy-driven asthma, and decides about biologics.

A pharmacist is great for checking inhaler technique and cost. For kids, a pediatric lung or allergy doctor helps. A school nurse keeps the Action Plan on file.

Know who is on your team and who to call for what.

CONCEPTS · LEARN IT

- Your main doctor handles most asthma
- Lung/allergy doctors help with harder asthma and biologics
- Pharmacists check technique and cost
- School nurses keep the Action Plan

ACTIONS · THIS WEEK

- Write your care-team call list
- Ask your pharmacist for a technique check

SKILLS · LIVE IT

- List your care-team members and phone numbers
- Know who to call for what

PLAN · SHARE IT

- Share your care-team list with family



3 Force Field Fact Sheet

Tier 2 · Live It · Active



Telemedicine & Tech

LIVE IT · TIER 2 ACTIVE · TECH

Technology can make asthma care easier. Video visits work well for check-ins, medicine changes, and follow-ups. A home peak-flow meter (about \$20, or \$50 with Bluetooth) tracks your breathing.

Smart inhalers and phone apps can track your doses and technique, and remind you. Air-quality apps warn you on high-pollution days, and pollen apps help in allergy season.

Ask your team which tools fit you.

CONCEPTS · LEARN IT

- Video visits work well for asthma follow-ups
- Home peak-flow meters are cheap and useful
- Smart inhalers and apps track doses and remind you
- Air-quality and pollen apps help you avoid triggers

ACTIONS · THIS WEEK

- Try one tracking app this month
- Check the air-quality forecast before outdoor plans

SKILLS · LIVE IT

- Use a peak-flow meter at home
- Set app reminders for your controller

PLAN · SHARE IT

- Show a family member a helpful app



Insurance, Treatment Cost & Help

LIVE IT · TIER 2 ACTIVE

Cost should not stop you from breathing well. Inhalers can be pricey, but there are ways to save. Ask about generic inhalers, manufacturer copay cards, and patient-assistance programs.

Your pharmacist can often find a cheaper option that works the same. If cost is keeping you from taking your controller every day, tell your team — skipping doses to save money usually costs more later in ER visits.

CONCEPTS · LEARN IT

- Inhalers can be costly, but help exists
- Ask about generics and copay cards
- Patient-assistance programs can lower cost
- Skipping doses to save money backfires

ACTIONS · THIS WEEK

- Ask about assistance programs this month
- Tell your team if cost is a barrier

SKILLS · LIVE IT

- Ask your pharmacist for a cheaper option
- Look up a copay card for your inhaler

PLAN · SHARE IT

- Share a cost-saving tip with someone who needs it



3 Force Field Fact Sheet

Tier 3 · Share It · Certified



Equity, Access & Cultural Competence

SHARE IT · TIER 3 CERTIFIED

Everyone deserves good asthma care. But asthma hits some groups harder — often because of where they live, housing with more triggers, less access to doctors, or air pollution.

Care works best when it fits your language, culture, and daily life. You have the right to ask for an interpreter, to have your beliefs respected, and to get clear explanations.

If something about your care does not fit your life, speak up — a good team will work with you.

CONCEPTS · LEARN IT

- Asthma affects some communities more than others
- Housing and air pollution play a big role
- Care should fit your language and culture
- You can ask for an interpreter and clear answers

ACTIONS · THIS WEEK

- Name one barrier and tell your team
- Ask for materials in your language

SKILLS · LIVE IT

- Ask for care that fits your life
- Request an interpreter if you need one

PLAN · SHARE IT

- Speak up for fair care in your community



Talk to Kids, Partner, School, Employer

SHARE IT · TIER 3 CERTIFIED

Being a Prepared Patient means talking clearly with the people around you. Teach your family your Action Plan and where your inhalers are. Tell your child's school or your workplace what your triggers are and what to do in a flare.

Give your school nurse or coach a copy of your Action Plan. The more the people around you know, the safer and calmer everyone is during a flare.

CONCEPTS · LEARN IT

- Share your Action Plan with family
- Tell school or work your triggers and plan
- Give the school nurse or coach a copy
- Prepared people around you keep you safer

ACTIONS · THIS WEEK

- Give your Action Plan to school or work
- Practice what to say in a flare

SKILLS · LIVE IT

- Explain your Action Plan to one person
- Show family where your inhalers are

PLAN · SHARE IT

- Help others make their own plan



3 Force Field Fact Sheet

Tier 3 · Share It · Certified



Mentor & Share Insights

SHARE IT · TIER 3 CERTIFIED

Once you know your asthma, you can help others. Share what worked for you with someone newly diagnosed. Be a calm, honest voice — the tips, the mistakes, the small wins.

Mentoring helps others and makes your own knowledge stronger. This is the start of becoming a Disease Advocate.

CONCEPTS · LEARN IT

- Share what worked with newly-diagnosed people
- Be honest about tips and mistakes
- Mentoring strengthens your own knowledge
- This begins the Advocate role

ACTIONS · THIS WEEK

- Reach out to one person who could use support
- Join a patient group

SKILLS · LIVE IT

- Tell your asthma story simply
- Offer one helpful tip to someone new

PLAN · SHARE IT

- Become a mentor for newly-diagnosed patients



Join the ROI Study (PHIT)

SHARE IT · TIER 3 CERTIFIED · STUDY

You can help prove that being a Prepared Patient works. The PHIT study measures the value of this program — fewer ER visits, better control, and lower costs.

By taking part, you add your experience to the data that helps bring this program to more people. Ask your team how to join and what it involves.

CONCEPTS · LEARN IT

- The PHIT study measures the program's value
- It looks at ER visits, control, and cost
- Your experience adds to the data
- Taking part helps expand the program

ACTIONS · THIS WEEK

- Ask about joining the PHIT study
- Share your outcomes if you join

SKILLS · LIVE IT

- Understand what joining the study means
- Ask your team how to take part

PLAN · SHARE IT

- Encourage others to take part and be counted



3 Force Field Fact Sheet

Tier 3 · Share It · Certified

Additional Notes

☐ I've read the full Asthma Fact Sheet · Step 3



4 Prepared Patient Course

The complete course — three levels, applied to your life

The course takes you through the Fact Sheet in three levels — from newly-diagnosed to prepared — then shows how every part applies to you and the people around you.

Level 1 · Aware

Know the basics — what Asthma is, your numbers, your meds.

Level 2 · Active

Manage & do — self-monitor, act on red flags, work your plan.

Level 3 · Certified

Advocate & share — teach it, bring your team in, help others.

The Numbers — PEF, FEV1, ACT, FeNO, Eos

A few numbers tell you if your asthma is under control. Peak flow (PEF) is how fast you can blow air out — a small \$20 home meter measures it. Track it for two weeks to find your 'personal best.' Then use zones:

green is 80% or more (good), yellow is 50–79% (caution), red is under 50% (danger — act now). FEV1 is a lung test done at the clinic. The ACT is a simple 5-question score;

20 or higher means good control. Ask your team which numbers are yours to watch.

- Peak flow (PEF) shows how fast you blow air out
- Green 80%+ / Yellow 50–79% / Red under 50%
- ACT score of 20 or more means good control
- FEV1 is a clinic lung test

THE FULL COURSE — HOW EACH PART APPLIES TO YOUR LIFE

Every part of the Asthma Force Field lands differently depending on who you are. Here is the complete course — what each concept means for **you**, your **family**, the **workplace**, and **students** learning it.

What Is Asthma?

FOR YOU · THE PATIENT

Asthma is very manageable. Do not accept feeling bad as normal. A good plan can get you to zero symptoms.

EMPLOYERS & WORKPLACE

Asthma is common and manageable. Small supports — like time for visits — keep workers healthy and present.

FAMILY & CAREGIVERS

Your loved one's asthma should be almost invisible day to day. If it is not, the plan needs a change.

STUDENTS & LEARNERS

Learn the two parts of asthma: constant airway swelling plus sudden narrowing. About 25M Americans; goal is full control.



4 Prepared Patient Course

The complete course — three levels, applied to your life

360 Human Anatomy: Airway, T2 Inflammation, Smooth Muscle

FOR YOU · THE PATIENT

Knowing how your airways work helps you see why your inhaler and your triggers matter.

EMPLOYERS & WORKPLACE

You do not need the science. Just know a flare is real and can come on fast.

FAMILY & CAREGIVERS

A simple airway picture helps the whole family understand a flare.

STUDENTS & LEARNERS

Learn the airway path and T2 swelling (IgE, eosinophils).
Biologics target this: anti-IgE, anti-IL-5, anti-IL-4R, anti-TSLP.

Who Gets It? — Phenotypes

FOR YOU · THE PATIENT

Your asthma is your own. The right type means the right treatment — do not settle for generic care.

EMPLOYERS & WORKPLACE

Work can trigger asthma (dust, fumes, cleaning chemicals).
Fixing the exposure helps.

FAMILY & CAREGIVERS

If a parent had asthma, kids are more likely to have it.
Allergies and eczema often run with it.

STUDENTS & LEARNERS

Know the phenotypes: allergic, adult-onset, exercise, occupational, aspirin-related, and pediatric (colds are the top trigger).

The Numbers — PEF, FEV1, ACT, FeNO, Eos

FOR YOU · THE PATIENT

Your numbers tell you if you are controlled. The ACT score alone, done monthly, often unlocks a medicine step-up.

EMPLOYERS & WORKPLACE

You do not need the numbers. Just allow time for check-ups and for managing triggers.

FAMILY & CAREGIVERS

Help track. The peak-flow and ACT routine is the simplest way to help. If ACT stays under 20, tell the team.

STUDENTS & LEARNERS

Memorize: PEF zones (80/50%), FEV1/FVC under 0.7, reversibility criteria, ACT 20+, FeNO and eosinophil thresholds.

Recognize Symptoms + Triggers

FOR YOU · THE PATIENT

Learning your triggers is powerful. Avoiding even one or two can mean far fewer flares.

EMPLOYERS & WORKPLACE

Some triggers are at work (dust, fumes, cold). Reducing them keeps people well.

FAMILY & CAREGIVERS

Help spot triggers at home — pets, smoke, dust, mold. Small changes protect your loved one.

STUDENTS & LEARNERS

Learn symptom patterns (nighttime, exercise) and the trigger list (viral, allergen, smoke, cold air, exercise).



4 Prepared Patient Course

The complete course — three levels, applied to your life

Diagnostic Workup + Wellness

FOR YOU · THE PATIENT

A breathing test confirms asthma. And an inhaler-technique check is quick — most people fix a mistake and feel better.

EMPLOYERS & WORKPLACE

Support time for check-ups, shots, and appointments.

FAMILY & CAREGIVERS

Make sure a child has a written Action Plan on file at school.

STUDENTS & LEARNERS

Know: spirometry (pre/post bronchodilator) is the gold standard; allergy testing; vaccines; inhaler-technique checks.

Know My Numbers

FOR YOU · THE PATIENT

Taking your controller daily and using good technique are the biggest levers. A numbers card keeps you on track.

EMPLOYERS & WORKPLACE

You do not need the numbers. Just allow time for care.

FAMILY & CAREGIVERS

Help keep the numbers card. The peak-flow and ACT routine is the simplest way to help.

STUDENTS & LEARNERS

Track PEF personal best, zones, ACT monthly, and controller-versus-rescue use.

Lifestyle Force Field — Trigger Control + Adherence

FOR YOU · THE PATIENT

Daily controller use and correct technique are the biggest levers. Small home changes add up.

EMPLOYERS & WORKPLACE

Support a healthy, low-trigger workspace.

FAMILY & CAREGIVERS

Help with the daily routine and a smoke-free, low-dust home.

STUDENTS & LEARNERS

Adherence plus correct inhaler technique are the biggest levers. Chronic oral steroids raise other health risks.

Medications + Inhaler Technique

FOR YOU · THE PATIENT

If you use your rescue inhaler often, your asthma is not controlled — and that is fixable. Get a technique check.

EMPLOYERS & WORKPLACE

Allow a person to keep a rescue inhaler handy at work.

FAMILY & CAREGIVERS

Learn which inhaler is which. Help watch for over-use of the rescue inhaler.

STUDENTS & LEARNERS

Know controller vs rescue, SMART therapy, the 'more than 2x/week = uncontrolled' rule, and biologics for severe asthma.



4 Prepared Patient Course

The complete course — three levels, applied to your life

Care Team Members

FOR YOU · THE PATIENT

Know your team and who handles what. Ask for a referral if your asthma is not controlled.

EMPLOYERS & WORKPLACE

Support time for appointments with the care team.

FAMILY & CAREGIVERS

Keep the care-team list handy. Make sure the school nurse has the Action Plan.

STUDENTS & LEARNERS

Know each role: primary care, pulmonology, allergy, pharmacy, pediatrics, and the school nurse.

Telemedicine & Tech

FOR YOU · THE PATIENT

Simple tools — a meter, an app, air-quality alerts — make staying in control easier.

EMPLOYERS & WORKPLACE

Allow video visits when possible — they save time.

FAMILY & CAREGIVERS

Help set up reminders and check air-quality on bad days.

STUDENTS & LEARNERS

Know the tools: telehealth, peak-flow meters, smart inhalers, adherence apps, air-quality and pollen apps.

Insurance, Treatment Cost & Help

FOR YOU · THE PATIENT

If cost is a problem, say so. There are copay cards, generics, and programs that can help.

EMPLOYERS & WORKPLACE

Good insurance and coverage keep employees healthy and at work.

FAMILY & CAREGIVERS

Help look up assistance programs and copay cards.

STUDENTS & LEARNERS

Know the cost tools: generics, copay cards, patient-assistance programs, and pharmacist substitutions.

Equity, Access & Cultural Competence

FOR YOU · THE PATIENT

Good care fits your life. Ask for what you need — language, respect, clear answers.

EMPLOYERS & WORKPLACE

Fair access and healthy workspaces help everyone.

FAMILY & CAREGIVERS

Help remove barriers — transportation, language, housing triggers.

STUDENTS & LEARNERS

Know the drivers of asthma disparities: housing, air quality, access, and the need for culturally-fit care.



4 Prepared Patient Course

The complete course — three levels, applied to your life

Talk to Kids, Partner, School, Employer

FOR YOU · THE PATIENT

The people around you can help — if they know your plan. Teach it in your own words.

EMPLOYERS & WORKPLACE

Know an employee's basic plan and support quick access to their inhaler.

FAMILY & CAREGIVERS

Learn the Action Plan and where the inhalers are. Practice the flare steps together.

STUDENTS & LEARNERS

Practice teaching the Action Plan to family, school, and work — teach-back proves you know it.

Mentor & Share Insights

FOR YOU · THE PATIENT

Helping someone else is a gift — and it makes you even more prepared.

EMPLOYERS & WORKPLACE

Peer supporters build a healthier, kinder workplace.

FAMILY & CAREGIVERS

Encourage your loved one to share their story and help others.

STUDENTS & LEARNERS

Teaching others is the strongest way to lock in what you have learned.

Join the ROI Study (PHIT)

FOR YOU · THE PATIENT

Joining the study helps prove this works — and helps more people get it.

EMPLOYERS & WORKPLACE

Programs that show results are worth supporting.

FAMILY & CAREGIVERS

Support your loved one if they choose to take part.

STUDENTS & LEARNERS

Know how outcome studies (ROI/PHIT) build the case for patient-education programs.

QUIZ YOURSELF — CAN YOU ANSWER THESE WITHOUT NOTES?

- ☐ What is Asthma, in one plain sentence?
- ☐ What are my target numbers, and my personal baseline?
- ☐ What are my red flags — the signs that mean “call now”?
- ☐ What do I do first if those red flags happen?
- ☐ What is each of my medicines for?



4 Prepared Patient Course

The complete course — three levels, applied to your life

The one thing about Asthma I most want to remember

 Additional Notes

☐ I've completed Step 4 · Prepared Patient Course for Asthma



5 Materials & Tools

Your home kit — the tools that keep you prepared

Being prepared between visits takes a few simple tools. Set these up for Asthma, and check them off as you go.

YOUR KIT

- ☐ **Health Passport** — meds, numbers, allergies & contacts on one page.
- ☐ **Your meters / devices** — whatever you use to track Asthma at home.
- ☐ **Your action plan** — green / yellow / red: what to do at each level.
- ☐ **Reminders** — a pillbox or phone alarm for medicines and refills.
- ☐ **A tracker** — one number or habit to watch over time.

THIS WEEK'S ACTIONS FOR ASTHMA

- ☐ Write down your last few asthma symptoms
- ☐ Bring this page to your next visit
- ☐ Look at a simple airway picture with your team
- ☐ Ask which medicine fits your asthma type
- ☐ List your top triggers
- ☐ Tell your team about work or exercise triggers
- ☐ Buy or ask for a peak flow meter
- ☐ Do your ACT this month and write the score
- ☐ Write your top 3 triggers
- ☐ Make a plan to avoid one trigger this week
- ☐ Book overdue spirometry
- ☐ Get your flu and COVID shots

The one number or habit I'll keep an eye on



5 Materials & Tools

Your home kit — the tools that keep you prepared

Additional Notes

☐ I've completed Step 5 · Materials & Tools for Asthma



Skills Lab is where you **show** an educator (or a trusted person) the hands-on parts of managing Asthma, in your own words. Practise and demonstrate these:

SKILLS TO DEMONSTRATE

- ☐ Say what asthma is in your own words
- ☐ Know that 'feeling fine' does not mean the swelling is gone
- ☐ Picture how your airways narrow during a flare
- ☐ Ask your team if you have the 'T2' type
- ☐ Name your asthma type
- ☐ Notice what sets off your asthma
- ☐ Find your personal-best peak flow
- ☐ Score your ACT once a month
- ☐ List your own triggers
- ☐ Notice when symptoms happen most
- ☐ Ask for a breathing test if you have not had one
- ☐ Have your inhaler technique checked
- ☐ Fill in your numbers card
- ☐ State your peak-flow personal best

TEACH IT BACK

The fastest way to know you've got it: explain Asthma in your own words — what it is, your main signs, what helps, and your red flags — with no notes.

My red flags for Asthma — the signs that mean “call now”



6

Skills Lab

Show you can do it — hands-on teach-back

Additional Notes

☐ I've completed Step 6 · Skills Lab for Asthma





THE FORCE FOR HEALTH® · PREPARED PATIENT

Prepared Patient Ambassador

This certifies that

has completed the Prepared Patient module for **Asthma** — knowing their condition, their numbers, their red flags, and how to speak up in their own care.

SKILLS-LAB EDUCATOR SIGN-OFF

DATE

Workbook completion certificate. The clinical Prepared Patient Ambassador credential is confirmed by your Skills-Lab educator or the certification exam.



SCAN TO VERIFY &
COMPLETE
CERTIFICATION

8 Disease Advocate

Optional — beyond yourself: help those who come after you



This optional step is a gift you give the next person. Turn what you learned about Asthma outward.

WAYS TO ADVOCATE & SHARE

- ☐ Explain asthma to one family member
- ☐ Share the goal: zero symptoms, full activity
- ☐ Show a family member how airways narrow
- ☐ Bring your type to each visit
- ☐ Help others see asthma is not one-size-fits-all
- ☐ Teach a family member your green/yellow/red zones
- ☐ Share your triggers with family and school/work
- ☐ Remind others to get an inhaler-technique check
- ☐ Show your numbers card at each visit
- ☐ Share one habit that helps your asthma
- ☐ Share your story and what helped you most.
- ☐ Complete a row of Advocate Bingo.
- ☐ Support someone newly diagnosed with Asthma.

My feedback on this program (Coach Lucy & Dr. Rob read these)



8 Disease Advocate

Optional — beyond yourself: help those who come after you

Additional Notes

☐ I've completed Step 8 · Disease Advocate for Asthma

