

## St Mary's Surgery Asthma Control Test

Name.....

Date of Birth.....

Please complete the Asthma Control Test (ACT) below if you are aged 18 or over\*, which will give you a snapshot of how well your asthma has been controlled over the last four weeks, giving you a simple score out of 16. If you have a score of 13 or more, there is no need to attend the inhaler clinic- just simply return your completed ACT questionnaire to the Asthma secretary at St Mary's Surgery, 37 St Mary's Street, Ely CB7 4HF so that your records can be updated. However, if your score is 12 or below, please make an appointment in Inhaler clinic and bring your review questionnaire with you so the respiratory nurse can see it. **Children & young people under the age of 18 must be seen in inhaler clinic at least once a year.**

How to complete the **Asthma Control Test**

**Step 1:** Read each question carefully and circle your score

**Step 2:** Add up each of the 4 circled scores to get your ACT score

**Step 3:** Use the score guide below to learn how well you are controlling your asthma & what to do next

**Q1. In the past 4 weeks, have you had difficulty sleeping or woken earlier than usual because of your asthma symptoms (wheezing, coughing, chest tightness, shortness of breath)?**

Every night **1**; Frequently (2-3times per week) **2**; Weekly **3**; Never **4**

**Q2. In the past 4 weeks, have you had your usual asthma symptoms during the day (wheezing, coughing, chest tightness, shortness of breath)?**

Most or every day **1**; Once or twice a week **2**; Once or twice a month **3**; Never **4**

**Q3. In the past 4 weeks, has your asthma interfered with your usual activities eg housework, work, etc?**

Most or every day **1**; Once or twice a week **2**; Once or twice a month **3**; Never **4**

**Q4. In the past 4 weeks, has your asthma interfered with walking or exercising (chest tightness, shortness of breath, wheezing, coughing)?**

Every/most times **1**; Once or twice a week **2**; Once or twice a month **3**; Never **4**

**Total score.....**

### **Score 13 or more**

Your asthma appears to have been under control over the past 4 weeks  
However, if you are experiencing any asthma problems, you should make an appointment in Inhaler clinic.

### **Score 12 or less**

Your asthma may not have been controlled over the past 4 weeks & you should make an appointment in Inhaler clinic.

### **Finally**

**What triggers your asthma symptoms?** .....

**Do you use a spacer device to take your inhaler(s)?** Yes/No

**How many times a week do you use your reliever inhaler?** .....

**Are you a smoker?** Yes\*/Vape/Ex-smoker(I gave up in.....)/Passive smoker/ Never smoked (delete)

**Do you have an up-to-date asthma management plan?** Written..... Verbal.....