

Name:

Date:

Asthma Control Test™

Please note: Any data captured in this form will not be passed on to any third party. It will only be used by your healthcare professional

There are 4.1 million people in the UK with asthma.¹

By taking control of their asthma, most people's day-to-day lives should be free from disruption such as troubled sleep or not being able to exercise.

Why take the Asthma Control Test™?

The Asthma Control Test is one way to quickly assess your asthma control, giving you a simple score out of 25.

Your healthcare professional may ask you additional questions during a consultation.

Are you in control of your asthma? Or is your asthma in control of you? Here's how to find out

Step 1: Read each question below carefully, circle your score and write it in the box.

Step 2: Add up each of your five scores to get your total Asthma Control Test™ score.

Step 3: Use the score guide to learn how well you are controlling your asthma.

Q1	During the past 4 weeks , how often did your asthma prevent you from getting as much done at work, school or home?	Score:
	<input type="radio"/> All of the time 1 <input type="radio"/> Most of the time 2 <input type="radio"/> Some of the time 3 <input checked="" type="radio"/> A little of the time 4 <input type="radio"/> None of the time 5	
Q2	During the past 4 weeks , how often have you had shortness of breath?	Score:
	<input type="radio"/> More than once a day 1 <input type="radio"/> Once a day 2 <input type="radio"/> 3-6 times a week 3 <input type="radio"/> 1-2 times a week 4 <input type="radio"/> Not at all 5	
Q3	During the past 4 weeks , how often did your asthma symptoms (wheezing, coughing, chest tightness, shortness of breath) wake you up at night or earlier than usual in the morning?	Score:
	<input type="radio"/> 4 or more times a week 1 <input type="radio"/> 2-3 nights a week 2 <input type="radio"/> Once a week 3 <input type="radio"/> Once or twice 4 <input type="radio"/> Not at all 5	
Q4	During the past 4 weeks , how often have you used your reliever inhaler (usually blue)?	Score:
	<input type="radio"/> 3 or more times a day 1 <input type="radio"/> 1-2 times a day 2 <input type="radio"/> 2-3 times a week 3 <input type="radio"/> Once a week or less 4 <input type="radio"/> Not at all 5	
Q5	How would you rate your asthma control during the past 4 weeks ?	Score:
	<input type="radio"/> Not controlled 1 <input type="radio"/> Poorly controlled 2 <input type="radio"/> Somewhat controlled 3 <input type="radio"/> Well controlled 4 <input type="radio"/> Completely controlled 5	
Total Score		

What does your score mean?

Score: 25–WELL DONE

- Your asthma appears to have been **UNDER CONTROL** over the last 4 weeks.
- However, if you are experiencing any problems with your asthma, you should see your doctor or nurse.

Score: 20 to 24–ON TARGET

- Your asthma appears to have been **REASONABLY WELL CONTROLLED** during the past 4 weeks.
- However, if you are experiencing symptoms your doctor or nurse may be able to help you.

Score: less than 20–OFF TARGET

- Your asthma may **NOT HAVE BEEN CONTROLLED** during the past 4 weeks.
- Your doctor or nurse can recommend an asthma action plan to help improve your asthma control.