

Managing my Chronic Obstructive Pulmonary Disease (COPD) at Home



Green Zone – I am having a GOOD day!

- Breathe easily and have energy
- Cough a little / clear or white mucus
- Can do my usual activities
- Hear “rattling” in chest or mild wheezing and it goes away with a good cough
- Have all medications and I know how to use them

Actions to continue:

- Your symptoms are under control
- Continue your usual activities
- Take your breathing medicine every day
- Stay inside if the weather is very cold, hot, humid or polluted
- Call your care manager if you have trouble paying for or getting medications or supplies
- Keep all physician appointments

Care Manager Number: _____

Yellow Zone – I am having a BAD day!

- More short of breath than usual
- Wheezing more than usual
- Mucus is yellow, green, or brown. It is thick, sticky and hard to cough up
- Fever (100.4° or higher)
- Need to sleep with extra pillows
- More tired
- Not able to finish normal activities

Actions to take:

- Use rescue inhaler or nebulizer
- Use pursed lip breathing
- Limit activity
- Drink fluids
- Use a flutter valve (acapella) if you have one
- Call your care manager
- If symptoms continue or get worse **DO NOT WAIT** and hope they get better
- **Call Your Doctor**

Physician Number: _____

Red Zone – I am having a VERY BAD day!

- Breathing and coughing is A LOT worse
- Feel dizzy or faint
- Feel scared about not being able to breathe
- Family sees you are very drowsy, sleepy, or confused
- Have chest pain

Actions to take:

- Call your doctor immediately!
- Call a family member or friend **NOW**
- If you cannot reach your doctor
 - Get to the nearest Emergency Room
- **Call 911 if necessary!!**

My breathing medications:

Name	Dose	When I take It	Special Instructions

If your symptoms are worse (Yellow Zone) you need to call your doctor. Tell the office staff you are a COPD patient and your action plan says you need to call and make an appointment as soon as possible. Tell them **ALL** your symptoms and include this additional information:

Date of last COPD exacerbation (flare up) or respiratory infection _____

Date of last hospitalization for COPD or respiratory infection _____

Are you on oxygen at home? Yes _____ No _____

Please ask your primary care doctor or pulmonologist to complete this section:

Date of last Spirometry _____

% predicted FEV1 _____

Ask your doctor if you may be a candidate for the pulmonary rehab program at Meritus Medical Center. Pulmonary rehab is a monitored exercise and education program recommended for some individuals who have been diagnosed with chronic obstructive pulmonary disease (COPD). The pulmonary rehab staff can be reached at 301-790-8345.
