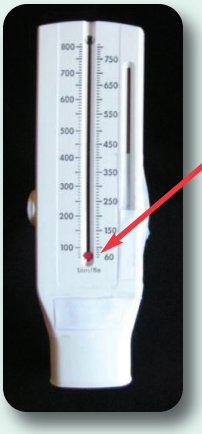
Using a Peak Flow Meter

A peak flow meter is a small hand held device used to measure how fast air moves out of your lungs when you breathe out hard and fast.

There are many different kinds of peak flow meters but they all work the same way. Using your peak flow meter twice a day helps you monitor your asthma.



Follow these instructions:

1. When you start, slide the marker on your Peak Flow Meter all the way down to the bottom.
2. Stand up straight. Do not have any food or gum in your mouth.
3. Take a deep breath and place the mouthpiece of the Peak Flow Meter into your mouth past your teeth and close your lips tightly around the mouthpiece.
4. Keep your tongue away from the mouthpiece and blow out as hard and as fast as possible – as if you are blowing out a candle across the room.
5. Check the number where the marker stopped and write the number on page 2.
6. Slide the marker all the way down and blow hard again. Write the second number on the chart on page 2. Slide the marker all the way down and blow into it a third time. Write the number on the chart.
7. Circle the highest number from the three numbers you wrote down. Record the date and the time.
8. Do this each time you use your Peak Flow Meter in the morning and the evening. Take the chart with you on your next visit to your health care provider.

Peak Flow Meter Chart - Week 1

MORNING

Morning	Example	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7
Date	May 15							
Time	7:00 am							
1st number	360							
2nd number	380							
3rd number	370							

Circle the highest number

Peak Flow Meter Chart - Week 1

EVENING

Evening	Example	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7
Date	May 15							
Time	7:00 pm							
1st number	360							
2nd number	380							
3rd number	370							

Circle the highest number

Peak Flow Meter Chart - Week 2

MORNING

Morning	Day 8	Day 9	Day 10	Day 11	Day 12	Day 13	Day 14
Date							
Time							
1st number							
2nd number							
3rd number							

Circle the highest number

Peak Flow Meter Chart - Week 2

EVENING

Evening	Day 8	Day 9	Day 10	Day 11	Day 12	Day 13	Day 14
Date							
Time							
1st number							
2nd number							
3rd number							

Circle the highest number

The Pediatric/Adult Asthma Coalition of New Jersey, sponsored by the American Lung Association in New Jersey, and this publication are supported by a grant from the New Jersey Department of Health and Senior Services (NJDHSS), with funds provided by the U.S. Centers for Disease Control and Prevention (USCDCP) under Cooperative Agreement 5U59EH000206-3. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the NJDHSS or the USCDCP. Although this document has been funded wholly or in part by the United States Environmental Protection Agency under Agreement XA97250908-2 to the American Lung Association in New Jersey, it has not gone through the Agency's publications review process and therefore, may not necessarily reflect the views of the Agency and no official endorsement should be inferred. Information in this publication is not intended to diagnose health problems or take the place of medical advice. For asthma or any medical condition, seek medical advice from your child's or your health care professional.

The Pediatric/Adult Asthma Coalition of New Jersey

"Your Pathway to Asthma Control"

PACNJ approved Plan available at www.pacnj.org

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