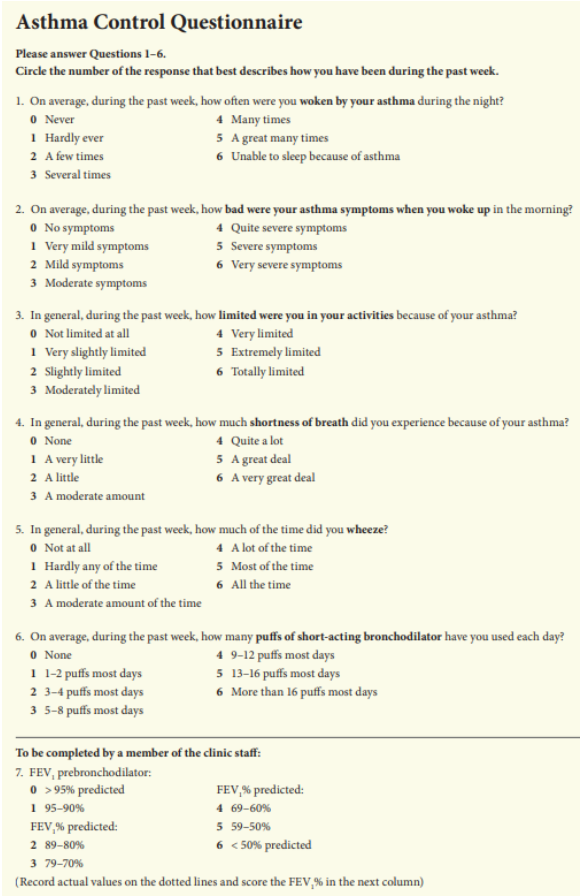
There is no single gold standard for measuring asthma control, but it can be assessed using a combination of patient-reported symptoms and objective measures of lung function.

Patient-reported symptoms: These include questionnaires like the **Asthma Control Test (ACT)** or **Asthma Control Questionnaire (ACQ)** which ask patients about their symptoms, medication usage, and activity limitations. It may be beneficial to have patients record how many exacerbations they have had since their last appointment.



Asthma Control Questionnaire

Please answer Questions 1–6.
Circle the number of the response that best describes how you have been during the past week.

1. On average, during the past week, how often were you **woken by your asthma** during the night?
   - **0** Never
   - **1** Hardly ever
   - **2** A few times
   - **3** Several times
   - **4** Many times
   - **5** A great many times
   - **6** Unable to sleep because of asthma

2. On average, during the past week, how **bad were your asthma symptoms when you woke up** in the morning?
   - **0** No symptoms
   - **1** Very mild symptoms
   - **2** Mild symptoms
   - **3** Moderate symptoms
   - **4** Quite severe symptoms
   - **5** Severe symptoms
   - **6** Very severe symptoms

3. In general, during the past week, how **limited were you in your activities** because of your asthma?
   - **0** Not limited at all
   - **1** Very slightly limited
   - **2** Slightly limited
   - **3** Moderately limited
   - **4** Very limited
   - **5** Extremely limited
   - **6** Totally limited

4. In general, during the past week, how much **shortness of breath** did you experience because of your asthma?
   - **0** None
   - **1** A very little
   - **2** A little
   - **3** A moderate amount
   - **4** Quite a lot
   - **5** A great deal
   - **6** A very great deal

5. In general, during the past week, how much of the time did you **wheeze**?
   - **0** Not at all
   - **1** Hardly any of the time
   - **2** A little of the time
   - **3** A moderate amount of the time
   - **4** A lot of the time
   - **5** Most of the time
   - **6** All the time

6. On average, during the past week, how many **puffs of short-acting bronchodilator** have you used each day?
   - **0** None
   - **1** 1–2 puffs most days
   - **2** 3–4 puffs most days
   - **3** 5–8 puffs most days
   - **4** 9–12 puffs most days
   - **5** 13–16 puffs most days
   - **6** More than 16 puffs most days

To be completed by a member of the clinic staff:

7. FEV_1 prebronchodilator:
   - **0** > 95% predicted
   - **1** 95–90%

   FEV_1% predicted:
   - **2** 89–80%
   - **3** 79–70%
   - **4** 69–60%
   - **5** 59–50%
   - **6** < 50% predicted

(Record actual values on the dotted lines and score the FEV_1% in the next column)

Objective measures of lung function: **Spirometry**, which measures the amount of air a person can forcefully exhale, is used to assess airway obstruction and lung function.

FEV1 >70% of predicted is mild FEV1 60-69% of predicted is moderate FEV1 50-59% of predicted is moderately severe FEV1 35-49% of predicted is severe FEV1<35% of predicted is very severe

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