Asthma Diary

(✓ = Symptoms)

Name:	
Month:	

	Sunday		Monday		Tuesday		Wednesday		Thursday		Friday		Saturday	
	Day	Night	Day	Night	Day	Night	Day	Night	Day	Night	Day	Night	Day	Night
Cough														
Wheeze														
Breathing Problems														
Peak Flow														

	Sunday		Monday		Tuesday		Wednesday		Thursday		Friday		Saturday	
	Day	Night	Day	Night	Day	Night	Day	Night	Day	Night	Day	Night	Day	Night
Cough														
Wheeze														
Breathing Problems														
Peak Flow														

	Sunday		Monday		Tuesday		Wednesday		Thursday		Friday		Saturday	
	Day	Night	Day	Night	Day	Night	Day	Night	Day	Night	Day	Night	Day	Night
Cough														
Wheeze														
Breathing Problems														
Peak Flow														

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	Day	Night	Day	Night	Day	Night	Day	Night	Day	Night	Day	Night	Day	Night
Cough														
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