

Name: _____

Date: _____

CF Action Plan

Your FEV1 today= _____ L _____ % Predicted

Personal Best _____ L _____ % Predicted; Date: _____

Airway Clearance:

- **This is the most important thing you can do to keep your lungs healthy!**
- Do your airway clearance at least 2 times each day. If you have more cough than usual, increase this to 3-4 times each day!
- Your personal plan includes:
 - ✓ EXERCISE: at least 30 minutes of vigorous exercise 5 days per week
 - ✓ CHEST PT, ACAPELLA, PEP, FLUTTER, HUFFING, VEST (_____ minutes, _____ times per day)

Medications:

Your personalized medication plan includes (checked medications):

- Enzymes: _____
- Vitamins: _____
- Albuterol 2 puffs before airway clearance
- Zithromax: _____ every MWF
- TOBI 300mg nebulized twice a day every other month (use after airway clearance)
- Hypertonic Saline 7% nebulized twice a day (use before airway clearance)
- Pulmozyme 2.5 mg nebulized every day (use before airway clearance)
- Actigall _____ mg twice a day
- _____
- _____
- _____

Organisms:

Your last sputum culture grew: _____

Medication changes made today include:

Please call our office 5-7 days after your visit if you wish to know today's culture results.

Nutrition:

- **Your nutrition is extremely important in keeping your lungs healthy!**
- Choose food high in calories, fat, protein.
- Eat plenty of high-calcium foods.
- Eat foods high in salt/sodium and use the salt shaker.
- If prescribed, take your enzymes at every meal and snack.

Stopping the spread of germs:

- Avoid contact with sick people.
- Wash your hands often.
- Stay at least 3 feet away from people with CF.
- Get a flu shot every fall.
- Disinfect your nebulizer as instructed!!
- Use hand sanitizer provided in clinic.

Today's weight: _____ pounds

Goal weight: _____ pounds

Today's BMI %: _____; Goal is 50% or higher

Upcoming Tests:

- Yearly Labs Due: _____ (blood count, sugar, kidney and liver function)
- Chest X-ray Due: _____
- OGTT Due: _____
- DEXA scan (Bone Density): _____
- Audiology (Hearing Test): _____

Your personalized nutrition plan includes:

Important Contact Information:

Office hours: M-F 8:00-5:00- (352)273-8380; After hours please call (352) 265-0111 or toll free at (888) 4UF-SHANDS and ask for the pediatric pulmonologist on call