Take the Asthma Control Test™ and Know Your Asthma Score

1. In the past 4 weeks, how much of the time did your asthma keep you from getting as much done at work, school or at home?

   - All of the time
   - Most of the time
   - Some of the time

2. During the past 4 weeks, how often have you had shortness of breath?

   - More than once a day
   - Once a day
   - 3 to 6 times a week

3. During the past 4 weeks, how did your asthma symptoms (wheezing, coughing, shortness of breath, chest tightness or pain) wake you up at night or earlier than usual in the morning?

   - 4 or more nights a week
   - 2 or 3 nights a week
   - Once a week

4. During the past 4 weeks, how often have you used your rescue inhaler or nebulizer medication (such as albuterol)?

   - 3 or more times per day
   - 1 or 2 times per day
   - 2 or 3 times per week

5. How would you rate your asthma control during the past 4 weeks?

   - Not controlled at all
   - Poorly controlled
   - Somewhat controlled