

REGION: CANADA		
ICS Monotherapy		
Medications	Green Zone	Change in Yellow Zone (all changes are for 7-14 days)
Flovent HFA (Fluticasone propionate) <i>(or generic equivalents)</i>	125 mcg 1 puff bid 125 mcg 2 puffs bid 250 mcg 1 puff bid 250 mcg 2 puffs bid	Increase to 4 puffs bid Increase to 4 puffs qid Increase to 4 puffs bid Increase to 4 puffs bid
Flovent Diskus (Fluticasone propionate) <i>(or generic equivalents)</i>	100 mcg 1 puff bid 250 mcg 1 puff bid 500 mcg 1 puff bid	Increase to 4 puffs bid Increase to 4 puffs bid Increase to 2 puffs bid
Arnuity Ellipta (Fluticasone furoate)	100 mcg 1 puff daily 200 mcg 1 puff daily	Option 1: Increase to 4 puffs daily (off-label) ⁽¹⁾ Option 2: Prednisone 30-50 mg daily ⁽²⁾ Option 1: Increase to 4 puffs daily (off-label) ⁽¹⁾ Option 2: Prednisone 30-50 mg daily ⁽²⁾
Pulmicort Turbuhaler (Budesonide)	100 mcg 1 puff bid 200 mcg 1 puff bid 400 mcg 1 puff bid	Increase to 4 puffs bid Increase to 4 puffs bid Increase to 3 puffs bid
QVAR MDI (Beclomethasone)	50 mcg 1 puff bid 100 mcg 1 puff bid 100 mcg 2 puffs bid	Increase to 4 puffs bid Increase to 4 puffs bid Prednisone 30-50 mg daily ⁽²⁾
Alvesco MDI (Ciclesonide)	100 mcg 1 puff daily 200 mcg 1 puff daily 200 mcg 2 puffs daily	Increase to 4 puffs daily Increase to 4 puffs daily Increase to 4 puffs bid
Asmanex Twisthaler (Mometasone)	200 mcg 1 puff daily 400 mcg 1 puff daily	Increase to 4 puffs daily Option 1: Increase to 4 puffs daily (off-label) ⁽¹⁾ Option 2: Prednisone 30-50 mg daily ⁽²⁾
ICS/LABA Combination Therapy		
Medications	Green Zone	Change in Yellow Zone (all changes are for 7-14 days)
Advair Diskus (Fluticasone propionate/Salmeterol)	100/50 mcg 1 puff bid 250/50 mcg 1 puff bid 500/50 mcg 1 puff bid	Add Flovent Diskus 100 mcg 3 puffs bid Add Flovent Diskus 250 mcg 3 puffs bid Add Flovent Diskus 500 mcg 1 puffs bid
Advair HFA (Fluticasone propionate/Salmeterol)	125/25 mcg 2 puff bid 250/25 mcg 2 puffs bid	Add Flovent HFA 250 mcg 3 puffs bid Add Flovent HFA 250 mcg 2 puffs bid
Symbicort Turbuhaler (Budesonide/Formoterol) with a non ICS-containing reliever (e.g. Salbutamol)	100/6 mcg 1 puff bid 200/6 mcg 1 puff bid 200/6 mcg 2 puffs bid	Increase to 4 puffs bid Increase to 4 puffs bid Add Pulmicort Turbuhaler 400 mcg 2 puffs bid
Symbicort Turbuhaler (Budesonide/Formoterol) used as maintenance and reliever therapy (MART) <i>(updated since 2017 table)</i>	200/6 mcg 1 puff bid + as needed 200/6 mcg 2 puff bid + as needed	Option 1: Increase as needed to a maximum of 8 puffs per day Option 2: Increase to 4 puffs bid (no further “as needed” puffs permitted) Option 1: Increase as needed to a maximum of 8 puffs per day Option 2: Prednisone 30-50 mg daily ⁽²⁾
Symbicort Turbuhaler (Budesonide/Formoterol) used as needed only (no maintenance inhaler) <i>(updated since 2017 table)</i>	200/6 mcg 1 puff as needed	Increase Symbicort as needed to a maximum of 8 puffs per day
Zenhale MDI (Mometasone Furoate/Formoterol)	100/5 mcg 2 puffs bid 200/5 mcg 2 puffs bid	Option 1: Change to Zenhale MDI 200/5 mcg 4 puffs bid (off-label) ⁽¹⁾ Option 2: Prednisone 30-50 mg daily ⁽²⁾ Prednisone 30-50 mg daily ⁽²⁾
Breo Ellipta (Fluticasone furoate/Vilanterol) <i>(updated since 2017 table)</i>	100/25 mcg 1 puff daily 200/25 mcg 1 puff daily	Option 1: add Arnuity Ellipta 100 mcg 3 puffs daily (off-label) ⁽¹⁾ Option 2: Prednisone 30-50 mg daily ⁽²⁾ Option 1: add Arnuity Ellipta 200 mcg 3 puffs daily (off-label) ⁽¹⁾ Option 2: Prednisone 30-50 mg daily ⁽²⁾
Wixela Inhub (Fluticasone propionate/Salmeterol) <i>(new since 2017 table)</i>	100/50 mcg 1 puff bid 250/50 mcg 1 puff bid 500/50 mcg 1 puff bid	Add Flovent Diskus 100 mcg 3 puffs bid Add Flovent Diskus 250 mcg 3 puffs bid Add Flovent Diskus 500 mcg 1 puff bid
Atecura Breezhaler (Indacaterol/Mometasone) <i>(new since 2017 table)</i>	150/80 mcg 1 puff daily 150/160 mcg 1 puff daily 150/320 mcg 1 puff daily	Option 1: Increase to 4 puffs daily (off-label) ⁽¹⁾ Option 2: Prednisone 30-50 mg daily ⁽²⁾ Option 1: Increase to 4 puffs daily (off-label) ⁽¹⁾ Option 2: Prednisone 30-50 mg daily ⁽²⁾ Prednisone 30-50 mg daily ⁽²⁾
ICS/LABA/LAMA Combination Therapy		
Medications	Green Zone	Change in Yellow Zone (all changes are for 7-14 days)
Trelegy Ellipta (Fluticasone furoate/Umeclidinium/Vilanterol) <i>(new since 2017 table)</i>	100/62.5/25 mcg 1 puff daily 200/62.5/25 mcg 1 puff daily	Option 1: add Arnuity Ellipta 100 mcg 3 puffs daily (off-label) ⁽¹⁾ Option 2: prednisone 30-50mg daily for 5-7 days ⁽²⁾ Option 1: add Arnuity Ellipta 200 mcg 3 puffs daily (off-label) ⁽¹⁾ Option 2: prednisone 30-50mg daily for 5-7 days ⁽²⁾
Enerzair Breezhaler (Indacaterol/Glycopyrronium/Mometasone) <i>(new since 2017 table)</i>	150/50/160 mcg 1 puff daily	Prednisone 30-50 mg daily ⁽²⁾
Special Considerations		
In patients with a history of sudden and severe exacerbations, and/or presenting with PEF or FEV1 ≤ personal best/predicted		Prednisone 30-50 mg daily for 5-7 days as first line therapy ⁽²⁾
If patient fails to improve clinically within 2-3 days of increase in inhaled medication, and/or has a rapid clinical deterioration, and/or has a peak expiratory flow or FEV1 that falls to ≤60% of their personal best value		Prednisone 30-50 mg daily for 5-7 days as rescue (second line) therapy ⁽²⁾

Footnotes:

1. This dose exceeds product monograph total daily dose limits intended for chronic daily use. A short-term dose increase beyond these limits has not been specifically studied, but the evidence for asthma action plans supports its potential to reduce the need for oral corticosteroid. Given the known risks of oral corticosteroid use, we favour this approach (expert opinion). However, the decision to pursue this approach should be based on individual patient and clinician comfort, and critically, clinicians must ensure that patients return to their usual maintenance dose after 7-14 days.

2. Ask patients to contact the health care provider to consider a prednisone prescription and/or provide a standing prescription for prednisone/prednisolone 30-50 mg daily for 5-7 days. Ensure that patients are appropriately counseled about the risks of short-term prednisone use.

Reference: Kouri A, Jackson L, Kaplan A, Gupta S. Practical and evidence-based guidance for yellow zone medication escalation in adult asthma action plans: A clinical respiratory review. CJRCCSM. 2026
Creative Commons Licence: BY-NC