

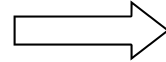
Migraine Action Plan

This plan needs to be reviewed with my provider:

_____ (insert date)

The purpose of a migraine action plan is to help you prevent and manage migraine attacks. This plan should be reviewed with your physician or healthcare provider on a regular basis or at least once a year.

Key Steps to my Migraine Action Plan:



- Take my medicine for preventing a migraine
- Know which medicines I use for a migraine attack
- Refill medicines I use for a migraine attack
- Make sure the medicine has not expired
- Carry the medicines I use for a migraine attack wherever I go and/or make sure the school nurse has my medicine
- Tell my healthcare provider if I am pregnant or want to get pregnant
- Tell my healthcare provider if my medicine for preventing a migraine isn't working. Remember: It may take 2-3 months to know if a medicine to prevent migraines will work
- Identify and reduce my migraine triggers
- Find ways to reduce stress

Medicines to Prevent Migraines

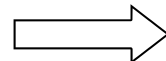
Medicine name	How much to take	When to take it

Should you take medicine to prevent a migraine?

Consider daily medicine to prevent a migraine if you:

- Have two or more attacks per month that produce disability lasting three or more days per month
- Are unable to take medicines for attacks or they did not work
- Are using medicines for attacks more than two times per week
- Have an uncommon migraine condition (ask your healthcare provider)

At the first sign of migraine symptoms, I should:

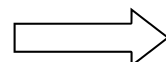


- Take my early symptom medicine
- Other: _____

Medicines for Migraine Attacks

Medicine name	How much to take
Early Symptoms (NSAIDs)	
Migraine Attack (Triptan or migraine specific medicine)	

If I have a migraine attack, I should:



- Take my migraine attack medicine
- Other: _____

If the first treatment of migraine attack medicine doesn't work in _____ hours, I should:

- Repeat my dose of migraine attack medicine
- Other: _____

I should call my healthcare provider if:

- I have an aura that lasts over 1 hour
- I have a debilitating headache that lasts over 72 hours
- I have more than 15 migraines in a month
- I have a change in my migraine - a new aura, new symptoms such as dizziness, weakness or numbness, or new location of pain
- My headaches occur after physical exercise, sexual activity, coughing, or sneezing
- Other: _____

My healthcare provider's name and telephone number is:
