

Asthma Zones	Peak flow or Symptoms	Treatment
Green Zone	Peak flow reading $\geq 80\%$ of personal best OR asthma symptoms are absent and no limitation of activities	No extra medications recommended. The participant was instructed to continue daily controller asthma medications.
Yellow Zone	Peak flow reading 51-79% of the participant's personal best OR mild-moderate coughing, wheezing, shortness of breath or other symptoms that interfere with the ability to perform his/her usual activities. Symptoms are not severe, but the participant may have to stop his/her activities to rest.	The participant received instructions on name/dose/frequency of rescue medication and prompted to re-check peak flow and/or symptoms 20 minutes after rescue medication dose. If the participant recorded ≥ 2 consecutive readings in the Yellow Zone in ≤ 48 hours, the participant was instructed to contact his/her healthcare provider.**
Red Zone	Peak flow reading $\leq 50\%$ of participant's personal best OR asthma symptoms are severe, and the participant is unable to perform his/her usual activities. Symptoms of abdominal breathing, inability to complete sentences, and extreme fatigue may be present.	The participant received instructions on name/dose/frequency of rescue medication. The participant was instructed to seek emergency medical attention immediately if symptoms worsen or fail to improve with treatment. The participant was prompted to re-check peak flow and/or symptoms 20 minutes after rescue medication dose. If the participant initially improved but subsequently entered another (consecutive) Red Zone reading, the participant was instructed to contact his/her healthcare provider. If the participant entered severe symptoms such as "lips turning blue," "trouble talking" or "throat tight," the application screen immediately and automatically navigated to a shortcut link prompting the participant to "Call 911/EMS" for emergency assistance.**

**** At enrollment, all participants were instructed that the AAP was not a substitute for emergency or routine medical care and they were instructed to keep regularly scheduled medical appointments and to seek urgent medical attention in case of emergency. Research staff and the parent/caregiver received email notification if the participant entered data that triggered an alert to notify/call the doctor, seek emergency medical care or "call 911." These notification measures were for added patient safety to ensure that appropriate medical care was sought.**