

GENEVA COMMUNITY UNIT SCHOOL DISTRICT #304
DEPARTMENT OF NURSING
ASTHMA MANAGEMENT PLAN

CHILD NAME: _____ Grade: _____
School Year: _____
Effective date of plan: _____

According to your child's health records, he/she has been diagnosed with asthma. To allow us to better care for your child, please provide us with the following information and return it to your school nurse's office.

I. CHILD'S HISTORY

Age of diagnosis: _____

Frequency of attacks: _____

Asthma triggers:

Exercise induced	YES	NO
Illness	YES	NO
Cold weather	YES	NO
Allergies	YES	NO
Pollutants	YES	NO
Emotions	YES	NO
Other _____		

Signs and symptoms present when having an attack:

History of hospitalization? YES NO

II. MEDICAL MANAGEMENT

HOME MANAGEMENT/MAINTENANCE AND EMERGENCY DRUGS:

	Name of Medication	Dosage	Times Taken
1.	_____		
2.	_____		
3.	_____		

Additional Treatments: _____

III. SCHOOL MANAGEMENT

MEDICATIONS

Are **RESCUE** medications needed at school? YES NO

If **yes**, complete a Medication Authorization Form, and return it with the prescribed medication to the nurse's office.

Rescue Medication	Dosage	Times Taken
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Is the child able to self-administer his/her inhaler?	YES	NO
Will your child self-carry a rescue inhaler?	YES	NO

If **yes**, complete the Medication Authorization Form giving consent regarding self-carrying of an inhaler.

* It is highly recommended that every child self-carrying an inhaler **keep a second inhaler in the school nurse's office.**

PEAK FLOWS

Do you track **peak flows** for your child? YES NO
Will you provide the school with a **peak flow meter**? YES NO

Other concerns:

IV. EMERGENCY INFORMATION

It is HIGHLY Recommended that children with asthma follow an Asthma Action Plan. Please discuss this with your physician. A template of this plan is attached to this form.

Does your child have an Asthma Action Plan? YES NO
Will you provide the school with a copy of the plan? YES NO

Emergency Protocol:

- Child will be assessed
- Administration of medications as ordered
- Parent or emergency contact will be called if the above mentioned treatment is not effective
- 911 will be called in a severe emergency
- The child's doctor will be called if parent or emergency contact cannot be reached

EMERGENCY CONTACT INFORMATION:

Name	Relationship to Child	Phone Numbers
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Physician Name _____ Phone Number _____

The asthma management plan may be shared with school staff to support your child's safety in school. Parents are encouraged to discuss their child's medical needs with the transportation department as well as sponsors/coaches working with your child before or after school hours.

Parent Signature _____ Date _____

Asthma Action Plan

For: _____ Doctor: _____ Date: _____
 Doctor's Phone Number _____ Hospital/Emergency Department Phone Number _____

GREEN ZONE

Doing Well

- No cough, wheeze, chest tightness, or shortness of breath during the day or night
- Can do usual activities

And, if a peak flow meter is used,

Peak flow: more than _____
 (80 percent or more of my best peak flow)

My best peak flow is: _____

Before exercise

2 or 4 puffs

5 minutes before exercise

Take these long-term control medicines each day (include an anti-inflammatory).

Medicine

How much to take

When to take it

YELLOW ZONE

Asthma Is Getting Worse

- Cough, wheeze, chest tightness, or shortness of breath, or
- Waking at night due to asthma, or
- Can do some, but not all, usual activities

-Or-

Peak flow: _____ to _____
 (50 to 79 percent of my best peak flow)



Add: quick-relief medicine—and keep taking your GREEN ZONE medicine.

_____ 2 or 4 puffs, every 20 minutes for up to 1 hour
(short-acting beta₂-agonist)



If your symptoms (and peak flow, if used) return to GREEN ZONE after 1 hour of above treatment:

- Continue monitoring to be sure you stay in the green zone.

-Or-

If your symptoms (and peak flow, if used) do not return to GREEN ZONE after 1 hour of above treatment:

- Take: _____ 2 or 4 puffs or Nebulizer
(short-acting beta₂-agonist)
- Add: _____ mg per day For _____ (3–10) days
(oral steroid)
- Call the doctor before/ within _____ hours after taking the oral steroid.

RED ZONE

Medical Alert!

- Very short of breath, or
- Quick-relief medicines have not helped, or
- Cannot do usual activities, or
- Symptoms are same or get worse after 24 hours in Yellow Zone

-Or-

Peak flow: less than _____
 (50 percent of my best peak flow)

Take this medicine:

_____ 4 or 6 puffs or Nebulizer
(short-acting beta₂-agonist)
 _____ mg
(oral steroid)

Then call your doctor NOW. Go to the hospital or call an ambulance if:

- You are still in the red zone after 15 minutes AND
- You have not reached your doctor.

DANGER SIGNS ■ Trouble walking and talking due to shortness of breath

■ Take 4 or 6 puffs of your quick-relief medicine AND

■ Lips or fingernails are blue

■ Go to the hospital or call for an ambulance

NOW!

(phone)

See the reverse side for things you can do to avoid your asthma triggers.

This guide suggests things you can do to avoid your asthma triggers. Put a check next to the triggers that you know make your asthma worse and ask your doctor to help you find out if you have other triggers as well. Then decide with your doctor what steps you will take.

Allergens

Animal Dander

Some people are allergic to the flakes of skin or dried saliva from animals with fur or feathers.

The best thing to do:

- Keep furred or feathered pets out of your home.
- If you can't keep the pet outdoors, then:
 - Keep the pet out of your bedroom and other sleeping areas at all times, and keep the door closed.
 - Remove carpets and furniture covered with cloth from your home.
 - If that is not possible, keep the pet away from fabric-covered furniture and carpets.

Dust Mites

Many people with asthma are allergic to dust mites. Dust mites are tiny bugs that are found in every home—in mattresses, pillows, carpets, upholstered furniture, bedcovers, clothes, stuffed toys, and fabric or other fabric-covered items.

Things that can help:

- Encase your mattress in a special dust-proof cover.
- Encase your pillow in a special dust-proof cover or wash the pillow each week in hot water. Water must be hotter than 130° F to kill the mites.
- Cold or warm water used with detergent and bleach can also be effective.
- Wash the sheets and blankets on your bed each week in hot water.
- Reduce indoor humidity to below 60 percent (ideally between 30—50 percent). Dehumidifiers or central air conditioners can do this.
- Try not to sleep or lie on cloth-covered cushions.
- Remove carpets from your bedroom and those laid on concrete, if you can.
- Keep stuffed toys out of the bed or wash the toys weekly in hot water or cooler water with detergent and bleach.

Cockroaches

Many people with asthma are allergic to the dried droppings and remains of cockroaches.

The best thing to do:

- Keep food and garbage in closed containers. Never leave food out.
- Use poison baits, powders, gels, or paste (for example, boric acid). You can also use traps.
- If a spray is used to kill roaches, stay out of the room until the odor goes away.

Indoor Mold

- Fix leaky faucets, pipes, or other sources of water that have mold around them.
- Clean moldy surfaces with a cleaner that has bleach in it.

Pollen and Outdoor Mold

What to do during your allergy season (when pollen or mold spore counts are high):

- Try to keep your windows closed.
- Stay indoors with windows closed from late morning to afternoon, if you can. Pollen and some mold spore counts are highest at that time.
- Ask your doctor whether you need to take or increase anti-inflammatory medicine before your allergy season starts.

Irritants

Tobacco Smoke

- If you smoke, ask your doctor for ways to help you quit. Ask family members to quit smoking, too.
- Do not allow smoking in your home or car.

Smoke, Strong Odors, and Sprays

- If possible, do not use a wood-burning stove, kerosene heater, or fireplace.
- Try to stay away from strong odors and sprays, such as perfume, talcum powder, hair spray, and paints.

Other things that bring on asthma symptoms in some people include:

Vacuum Cleaning

- Try to get someone else to vacuum for you once or twice a week, if you can. Stay out of rooms while they are being vacuumed and for a short while afterward.
- If you vacuum, use a dust mask (from a hardware store), a double-layered or microfilter vacuum cleaner bag, or a vacuum cleaner with a HEPA filter.

Other Things That Can Make Asthma Worse

- Sulfites in foods and beverages: Do not drink beer or wine or eat dried fruit, processed potatoes, or shrimp if they cause asthma symptoms.
- Cold air: Cover your nose and mouth with a scarf on cold or windy days.
- Other medicines: Tell your doctor about all the medicines you take. Include cold medicines, aspirin, vitamins and other supplements, and nonselective beta-blockers (including those in eye drops).

For More Information, go to: www.nhlbi.nih.gov