



Publication by:

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Phone: 237-4520 *Supporting people affected by asthma and related conditions* Fax: 237-4254

School Asthma Plan

Students' Name _____

Address _____

Parent/Caregiver _____ Phone _____ (H) Phone _____ (W)

Alternative contact _____ Phone _____ (H) Phone _____ (W)

Usual Doctor _____ Phone _____

Please describe your child's asthma _____

What brings on your child's asthma?

- | | | | |
|--------------------------------|-----------------------------------|--|-------------------------------------|
| <input type="checkbox"/> cats | <input type="checkbox"/> dogs | <input type="checkbox"/> pollen | <input type="checkbox"/> mould |
| <input type="checkbox"/> fumes | <input type="checkbox"/> cold air | <input type="checkbox"/> dust and dust mites | <input type="checkbox"/> chalk dust |
| <input type="checkbox"/> foods | <input type="checkbox"/> humidity | <input type="checkbox"/> chest infections | <input type="checkbox"/> smoke |

Has your Doctor written an Asthma Action Plan?

- No Yes

(For information about the Asthma Action Plan contact your Doctor or the Asthma Educator - Phone 237-4520.)

Medicines to take each day at school

Name of medicine _____

How much? _____ How often? _____

Medicines to take before exercise

Name of medicine _____

How much? _____ How often? _____

Medicines to take for an asthma attack (wheeze, shortness of breath, persistent cough)

Name of medicine _____

How much? _____ How often? _____

Note _____ 's inhaler(s) is/are kept _____

PLEASE CONTACT THE SCHOOL IF THERE ARE ANY CHANGES TO MEDICINES.

It is the parent's responsibility to talk with the family doctor about their child with asthma.

I agree to the school administering a reliever inhaler to my child in an emergency.
I understand that the school will inform me if this medicine is used.

Signed _____ Date _____

School staff note: call an ambulance if the student
- can't walk, talk, or breathe because of asthma, or
- if there is any blueness of the lips, or
- if there is no response to the reliever inhaler, or
- if they look very ill.