

# Hollidaysburg Area School District

## ASTHMA CARE PLAN

Name: \_\_\_\_\_ Grade: \_\_\_\_\_ School Year: \_\_\_\_\_

Goal #1: Student will not experience any acute asthma episode at school/school activity during the current school year by following the prescribed asthma regimen and avoiding asthma triggers.

Goal #2: If an acute asthma episode does occur at school, the student will remain free of any further medical complications by following the outlined care plan to prevent further emergency medical care.

### In Case of Emergency, Contact:

1. \_\_\_\_\_ Phone \_\_\_\_\_ Relationship: \_\_\_\_\_  
2. \_\_\_\_\_ Phone \_\_\_\_\_ Relationship: \_\_\_\_\_

Asthma onset at student's age of: \_\_\_\_\_

Asthma Severity: \_\_\_\_\_ Mild \_\_\_\_\_ Moderate \_\_\_\_\_ Severe

Asthma triggered by: \_\_\_\_\_

Personal best peak flow: \_\_\_\_\_

### All Current Medications:

1. \_\_\_\_\_ Dosage: \_\_\_\_\_ Time: \_\_\_\_\_  
2. \_\_\_\_\_ Dosage: \_\_\_\_\_ Time: \_\_\_\_\_  
3. \_\_\_\_\_ Dosage: \_\_\_\_\_ Time: \_\_\_\_\_

### Medications to be given at school (if any, the attached medication form must be completed by the PHYSICIAN):

1. \_\_\_\_\_ Dosage: \_\_\_\_\_ Time: \_\_\_\_\_  
2. \_\_\_\_\_ Dosage: \_\_\_\_\_ Time: \_\_\_\_\_

### The following steps will be followed if an Acute Asthma Episode occurs at school:

1. Give prescribed rescue medication
2. Assess lung sounds, pulse oximeter, skin color
3. Do not allow student to lay down during the acute episode
4. Notify parent/guardian
5. Call 911 if the episode meets emergency criteria

Other Instructions: \_\_\_\_\_  
\_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Physician Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I agree to be solely responsible for my asthma inhaler and to follow the directions for its use as ordered by my physician, as well as the district's medication policy. I am aware that any abuse of this privilege will result in the confiscation of my inhaler.

Student's signature: \_\_\_\_\_ Date: \_\_\_\_\_

REV/10-18def