MATHIS ISD HEALTH SERVICES

ASTHMA ACTION PLAN

Name_____**DOB**_____ **Allergies** □ **NKDA** □ **Yes**_____
Severity Classification: □ Intermittent □ Mild Persistent □ Moderate Persistent □ Severe Persistent
Asthma Triggers_____

Green Zone: Doing Well

Symptoms: Breathing is good – No cough or wheeze – Can work and play – Sleeps well at night

Control Medicine(s)

Medicine	How much to take	When and how often to take it	Take at
_____	_____	_____	□Home □School
_____	_____	_____	□Home □School

Physical Activity
☐ Use Albuterol/Levalbuterol_____ puffs 15 minutes before activity □ with all activity □ when you feel you need it

Yellow Zone: Caution

Symptoms: Some problems breathing-Cough, Wheeze, or tight chest-Problems working or playing-Wake at night

Quick-relief Medicine(s)
□ Albuterol/Levalbuterol _____puffs every 20 minutes for up to 4 hours as needed

Control Medicine(s)
□ Continue Green Zone medicines
□ Add _____ □ Change to _____
You should feel better within 20-60 minutes of the quick-relief treatment. If you are getting worse or are in the Yellow Zone more than 24 hours, THEN follow the instructions in the RED ZONE and call the doctor right away!

Red Zone: Get Help Now!

Symptoms: Lots of problems breathing-Cannot work or play-Getting worse instead of better-Medicine is not helping

Take Quick-relief Medicine NOW! □ Albuterol/Levalbuterol _____ puffs _____ (how frequently)
Call 911 Immediately if the following danger signs are present:

- Trouble walking/talking due to shortness of breath
- Lips or fingernails are blue
- Still in the red zone after 15 minutes

School Staff: Follow the Yellow and Red Zone instructions for the quick-relief medicines according to asthma symptoms. The only control medicines to be administered in the school are those listed in the Green Zone with a check mark next to "Take at School".

□ I have instructed student in the proper way to use his/her inhaler including when to tell an adult if symptoms do not improve after taking the medicine. It is my professional opinion he/she **should** be allowed to carry and self-administer his/her quick-relief inhaler while at school or school related events. **Provider Initials**_____

Healthcare Provider
Name_____Signature_____Date_____

Address_____Phone#_____

How to Use a Metered-Dose Inhaler with a Valved Holding Chamber (Spacer)

1. Shake the inhaler for 10 seconds
2. Before you put chamber mouthpiece in your mouth breathe out
3. Put chamber mouthpiece in mouth
4. Press inhaler one time and breathe in deep and steady
5. Hold your breath for 10 seconds then breathe out slowly.
6. Additional puff of medicine wait 1 minute and repeat steps 2 to 5.
7. Rinse mouth with water and spit it out. Do not swallow water after rinsing.