

ASTHMA - Emergency Action Plan

Student Information

Student Name: CedarTrain Sample41

Birth Date: 05/18/2008

Address: 1234 Candy Cane Lane

Parent: First Last

PH#: Primary

ALT PH#:

Grade: Tenth grade

School: Cedar Springs High School

Plan Date: 05/18/2024

Doctor: Helen DeVos General Pediatrics

Doctor's Location: Helen DeVos General Pediatrics: 330 Barclay Ave. NE, Suite 300, Grand Rapids, MI 49503

Doctor's Phone: 616-391-8810

Doctor's Fax: 616-391-8897

Teacher:

Allergies and Health Concerns

Allergies: Known Drug Allergies

Additional Health Concerns/Medical Diagnosis: All pertinent medical data:

Emergency Contact Name Phone Number Alt Phone Number

Warning Symptoms

Describe "typical" warning symptoms for this student:

More student specific information about plan of care provide in Individualized School Healthcare Plan.

Moderate Difficulty:

Coughing

Wheezing

Chest tightness

Shortness of breath

Waking at night due to asthma

Inability to do usual activities

Severe Difficulty:

Very short of breath

Nasal Flaring

Intercostal retractions

Quick-relief medications have not helped

Inability to do usual activities

Symptoms are same or get worse after 24 hours of moderate difficulty

Emergency Care

1. **Do not leave student alone.**
2. Consider calling MERT () and 9-1-1.
3. Call School Nurse (Megan Dailey BSN, RN) and parent.
4. Provide treatment as prescribed by doctor:
 - Give medication stored in
 - Give medication stored in
 - Follow Albuterol Emergency Protocol
5. Consider limiting activity and/or outdoor recess.
6. Student should assume a resting position (however the student finds it most comfortable to breathe).
7. If breathing stops, provide CPR
8. Complete an Accident/Incident Report if 9-1-1 is called.

Transportation and Field Trips

N/A need to accompany on field trip.

During field trips, provide care as described EXCEPT:

School Nurse: Megan Dailey
BSN, RN

Phone: 616-696-1204 ext 1043
Phone:

Alternate Phone: 616-696-
1200 ext 7927

Back up Nurse:

Alternate Phone:

ASTHMA - Individualized School Healthcare Plan

Student Name: CedarTrain Sample41

Birth Date: 05/18/2008

Asthma is a chronic, or long-term, disease that inflames and narrows the airways of the lungs. Asthma causes a variety of symptoms that can worsen at any time, making breathing difficult. Unfortunately, there is no cure for asthma. Even when you are not having symptoms, there is still inflammation in the lungs. However, by working closely with the healthcare provider to manage asthma, it is possible to get symptoms under control.

1. Follow Asthma Management Plan from the doctor.

- Asthma Management plan is available and attached: No
- Medication/Treatment order is available and attached: No
 - **Emergency medications must be readily accessible and available at all times!**
- Treatment Schedule at School:
 - May pretreat _____ minutes prior to physical activity
 - _____
 - _____

2. Student's history of asthma:

3. Other Considerations

- Evaluate need for use of strong chemicals, such as those used in cleaning or laboratory assignments
-
-
-

4. Avoid triggering stimuli if possible.

Triggering Stimuli Include:

- Animals
- Dust
- Pollen
- Mold
- Foods
- Smoke
- Strong smells
- Exercise
- Upper respiratory infections
- Cold air/weather changes
- Emotions
- Other:

5. Present Level of Functioning

Student is:

- o able to identify and avoid triggers: No
- o able to recognize and communicate early warning signs: No
- o able to self administer medication: No

6. Nursing Goals:

Care Plan developed on: 05/18/2024

Does this student need a Plan of Care for medical supports? Yes No

School Nurse: Megan Dailey
BSN, RN

Phone: 616-696-1204 ext 1043

Alternate Phone: 616-696-1200 ext 7927