

**CHARLES A. MEMORIAL SCHOOL CORPORATION
ASTHMA ALERT/INSTRUCTIONS**

State Law, as of 7/01/01, requires **TWO WRITTEN PERMISSIONS** for your child to carry his/her **ASTHMA INHALER(S)** in school and during school activities.

1. **DOCTOR'S PERMISSION VIA ASTHMA FORM OR SCRIPT.**

- Your doctor may send an Asthma form or script with your student.
- Your doctor may **FAX or email** an Asthma form or script stating that your child may carry his/her Asthma Inhaler(s) with him/her during school and school activities.
- Peak Flow Meter levels and instructions for use of the Asthma Inhaler(s) are to be included.

PLEASE CALL OR VISIT YOUR CHILD'S DOCTOR TO REQUEST AN ASTHMA FORM, SCRIPT OR A FAX (this is usually the easiest way) TO BE SENT TO THE NURSE'S OFFICE.

PLEASE SEE FAX NUMBERS BELOW:

KNIGHTSTOWN ELEMENTARY	(765) 345-7134
KNIGHTSTOWN INTERMEDIATE	(765) 345-5523
KNIGHTSTOWN HIGH SCHOOL	(765) 345-7977

2. **PARENT OR GUARDIAN'S ASTHMA ALERT.**

- Peak Flow Meter levels and instructions for use of the Asthma Inhaler(s) are to be included "if" the doctor has not already listed them in the Asthma permission form or script.

PLEASE COMPLETE THE ASTHMA ALERT AND RETURN TO *THE NURSE'S OFFICE*

THANK YOU FOR PROVIDING THIS INFORMATION TO ASSIST YOUR CHILD'S HEALTH AND WELL-BEING IN SCHOOL

**Updated 7/25*