

**SCHOOL ASTHMA ACTION PLAN**

Student Name: \_\_\_\_\_

DOB: \_\_\_\_\_

**MAINTENANCE THERAPY** : Medication taken daily at a set time for long term control and symptom prevention: **No Cough, No Wheezing, No Shortness of Breath**

**MEDICATION**

**HOW MUCH TO TAKE (MG/PUFFS)**

**WHEN TO TAKE IT**

Steroid Inhaler \_\_\_\_\_

Oral Medication \_\_\_\_\_

Metered Dose Inhaler \_\_\_\_\_

2 puffs  4 puffs

Before Exercise  \_\_\_\_\_



BREATHING IS EASY

Please include the name of the medication and the prescribed dose. The noted regimen must be consistent with physician's prescription. Please note a physician's order is required for inhalers used more frequently than the prescription label describes. Physician's signature on this plan qualifies as a physician's order for the purposes of asthma management in the school setting. If the student has no maintenance therapy, please leave this section blank.

**STEP UP THERAPY: PRESCRIBED quick relief ( Rescue Inhaler) medication:** **Coughing, Wheezing, Shortness of breath, Tightness of chest, Difficulty with activity**

Albuterol  Levalbuterol



2 puffs  4 puffs



As needed for shortness of breath, wheezing or coughing

Expect symptoms to resolve within 20 minutes. If relieved, return to green zone, student may return to class. If symptoms are mild, but medication provides no relief, student should stay in office and parents should be contacted. If symptoms are moderate or severe and cannot be controlled or if worsening of symptoms, proceed to red zone.

**THIS STUDENT SELF MANAGES/CARRIES THEIR OWN RESCUE MEDICATION**



FLARE-UP OF SYMPTOMS

**EMERGENCY TREATMENT: BREATHING IS DIFFICULT, CANNOT WALK OR TALK, CHANGE IN LEVEL OF CONCIOUSNESS, BLUENESS**

**FOLLOW UP DOSE OF RESCUE INHALER IF 15 MINUTES HAVE PASSED WITH NO RELIEF OR SYMPTOMS ARE WORSENING**

**IMMEDIATELY BEGIN CPR AS NECESSARY**

**STAY WITH STUDENT UNTIL EMS ARRIVES**



**IMMEDIATELY DELEGATE CALLS TO:**

**EMS (9-1-1)**

Parents: \_\_\_\_\_

Nurse: \_\_\_\_\_



EMERGENCY

MD Signature ( required if plan deviates from prescription label directions): \_\_\_\_\_

Date \_\_\_\_\_

Parent Signature ( required): \_\_\_\_\_

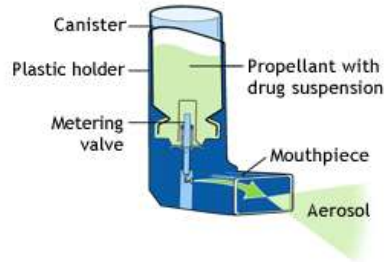
Date \_\_\_\_\_

School RN Signature ( required) \_\_\_\_\_

Date \_\_\_\_\_

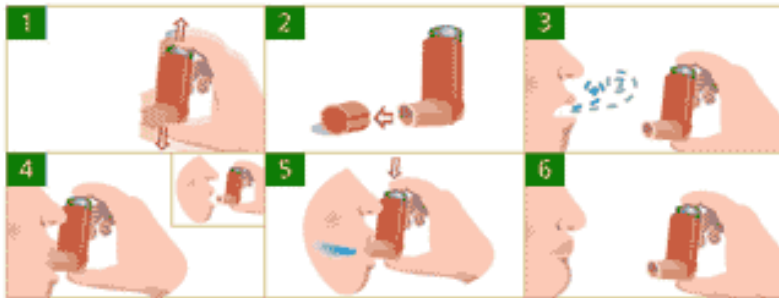
## How to Use a Metered-Dose Inhaler :

A metered-dose inhaler, called an MDI for short, is a pressurized inhaler that delivers medication by using a propellant spray.



## To use an MDI:

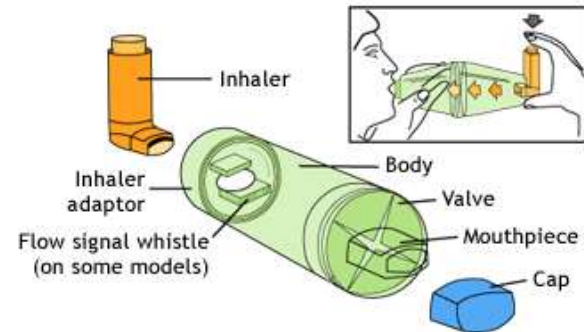
1. Shake the inhaler well before use (3 or 4 shakes)
2. Remove the cap
3. Breathe out, away from your inhaler
4. Bring the inhaler to your mouth. Place it in your mouth between your teeth and close your mouth around it.
5. Start to breathe in **slowly**. Press the top of you inhaler once and keep breathing in slowly until you have taken a full breath.
6. Remove the inhaler from your mouth, and hold your breath for about 10 seconds, then breathe out.



If you need a second puff, wait 30 seconds, shake your inhaler again, and repeat steps 3-6. After you've used your MDI, rinse out your mouth and record the number of doses taken.

## About Spacers

Also known as aerosol-holding chambers, add-on devices and spacing devices, spacers are long tubes that slow the delivery of medication from pressurized MDIs.



Spacers can make it easier for medication to reach the lungs, and also mean less medication gets deposited in the mouth and throat, where it can lead to irritation and mild infections.

To

## Use a Spacer:

1. Shake the inhaler well before use (3-4 shakes)
2. Remove the cap from your inhaler, and from your spacer, if it has one
3. Put the inhaler into the spacer
4. Breathe out, away from the spacer
5. Bring the spacer to your mouth, put the mouthpiece between your teeth and close your lips around it
6. Press the top of your inhaler once
7. Breathe in **very slowly** until you have taken a full breath. If you hear a whistle sound, you are breathing in too fast. **Slowly** breath in.
8. Hold your breath for about ten seconds, then breath out.

