Asthma care plan for schools

CONFIDENTIAL: Staff are trained in asthma first aid (see overleaf) and can provide routine asthma medication as authorised in this care plan by the treating doctor. Please advise staff in writing of any changes to this plan.

To be completed by the treating doctor and parent/guardian, for supervising staff and emergency medical personnel.

PLEASE PRINT CLEARLY

Asthma Australia

Photo of student

(optional)

Student's name:

Date of birth:

Managing an asthma attack

Staff are trained in asthma first aid (see overleaf). Please write down anything different this student might need if they have an asthma attack:

Daily asthma management

This student's usual asthma signs

- ☐ Cough
- ☐ Wheeze
- ☐ Difficulty breathing

Other (please describe)

Frequency and severity

- ☐ Daily/most days
- ☐ Frequently (more than 5 x per year)
- ☐ Occasionally (less than 5 x per year)

Other (please detail)

Known triggers for this student's asthma (eg exercise*, colds/flu, smoke) — please detail:

Does this student usually tell an adult if s/he is having trouble breathing?	☐ Yes	☐ No
Does this student need help to take asthma medication?	☐ Yes	☐ No
Does this student use a mask with a spacer?	☐ Yes	☐ No
*Does this student need their blue reliever puffer medication before exercise?	☐ Yes	☐ No

Medication Plan —

If this student needs asthma medication, please detail below and make sure the medication and spacer/mask are supplied to staff.

Name of medication and colour	*Dose/number of puffs*	*Time required*

Name of doctor

Address

Phone

Signature Date / /

Parent/guardian

I have read, understood and agreed with this care plan and any attachments listed. I approve the release of this information to staff and emergency medical personnel. I will notify the staff in writing if there are any changes to these instructions. I understand staff will seek emergency medical help as needed and that I am responsible for payment of any emergency medical costs.

Name

Signature

Date / /

AA AF School Caretaker 0113
31 January 2013 9:05 PM

Asthma First Aid

1 Sit the person upright

— Be calm and reassuring
— Do not leave them alone

2 Give 4 puffs of blue reliever puffer medication

— Use a spacer if there is one
— **Shake** puffer
— Put **1 puff** into spacer
— Take **4 breaths** from spacer

Repeat until **4 puffs** have been taken

Remember: Shake, 1 puff, 4 breaths

3 Wait 4 minutes

— If there is no improvement, give **4 more puffs** as above

4 If there is still no improvement call emergency assistance (DIAL 000)*

— Say 'ambulance' and that someone is having an asthma attack
— Keep giving **4 puffs** every **4 minutes** until emergency assistance arrives

*If calling Triple Zero (000) does not work on your mobile phone, try 112

Call emergency assistance immediately (DIAL 000)

— If the person is not breathing
— If the person's asthma suddenly becomes worse, or is not improving
— If the person is having an asthma attack and a puffer is not available
— If you are not sure if it's asthma

Blue reliever medication is unlikely to harm, even if the person does not have asthma

Asthma Australia

To find out more contact your local Asthma Foundation
1800 ASTHMA (1800 278 462) | **asthmaaustralia.org.au**

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