**Asthma**

Sample Classroom Individualized Health Care Plan

**Name: Effective Date:**

**Parent: School:**

**Doctor: School Nurse:**

**Special Ed: 504 DOB:**

**Bus: yes no Allergies:**

*(Personal data: i.e. onset, brief history, etc.)*

Asthma is a chronic lung disease, which is characterized by attacks of breathing difficulty. It is caused by spasms of the muscles in the walls of the air passages to the lungs. It is not contagious and tends to run in families. Asthma can be aggravated by allergy to pollen or dust, viral illness, cold, emotions, or exercise. There is no cure but asthma can be controlled with proper diagnosis and management.

Treatment consists of avoiding known triggers, recognizing early symptoms, monitoring with a peak flow meter, and medication to reduce or prevent symptoms. Some children who are allergic to specific substances may benefit from desensitization shots.

Problem: Breathing difficulty

Goal: Avoid attacks and maintain airway.

Action:

1. (\_\_\_\_) known triggers include:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and (\_\_\_\_) should avoid these triggers.
2. Symptoms of an asthma attack include:

Coughing Tightness in chest

Wheezing Gasping for air

Prolonged expiration Color changes (pale or blue).

1. If symptoms of an attack are present or (\_\_\_\_) states he/she feels an attack coming on:
2. Have him/her sit up right.
3. Administer prescribed medication by inhaler. See instructions below.

OR

1. Administer medication by nebulizer as prescribed. See instructions below.
2. Reassure (\_\_\_\_) and attempt to keep him/her calm and breathing slowly and deeply.
3. (\_\_\_\_) should respond to treatment within 15 - 20 minutes
4. If NO change or breathing becomes significantly worse, contact parent immediately.
5. Most asthma attacks can be successfully managed in this manner. If you feel he/she is getting rapidly worse and you have exhausted the suggested treatment, call for emergency assistance (911).
6. (\_\_\_\_) requires the following activity limitation /modifications as prescribed by his doctor:
7. (\_\_\_\_) requires a modified or adapted PE class. Unless otherwise stated by physician, he/she should have access to a physical exercise program. Parents and staff should understand the benefits of exercising in moderation.
8. Avoid over protection. Most children can assess their own ability to engage in activity. Encourage participation but do not force.

Problem: Nebulizer treatment

Goal: Administrate medication safely at school.

Action:

1. Measure prescribed dose of medication in dropper, *(Insert prescribed dose.)* and place in plastic medication chamber. Add diluent if prescribed sterile water, salt water, etc.
2. Attach chamber to nebulizer and turn machine on. Make sure it is plugged in.
3. Have (\_\_\_\_) breathe through facemask slowly and deeply until all liquid is gone from medication chamber.
4. Have (\_\_\_\_) remain sitting and resting until symptoms subside.
5. Wash chamber and facemask after each use.
6. (\_\_\_\_) can receive nebulizer treatments with \_\_\_\_\_\_\_\_\_\_ medication every \_\_\_\_\_\_\_ hours. Check home/school notebook to see if he received treatment at home and at what time to avoid over medicating.
7. Document all treatments given on school medication log and home school notebook.

Problem: Inhaler treatment

Goal: Safe administration of medication at school

Action:

1. A metered dose inhaler is a device to give medication directly into the lungs.
2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ inhaler is kept in the nurse’s office.

Or

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_keeps his/her inhaler on person to self-administer.

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ has orders from the physician, permission from the parent and has

been assessed by the school nurse to self-administer his/her inhaler in the school setting.

(If self-administered this would be the end of this problem, goal, and action set. Delete the procedure listed below. If not self-administering continue with the following)

1. Remove cap and hold inhaler upright with mouthpiece below chamber.
2. Shake well.
3. Have student tilt head slightly back and breathe out.
4. Position inhaler one to two inches from mouth or use spacer.
5. Press down on the inhaler to release medication (you will hear a hissing noise) and have the student breathe in slowly (three to five seconds) and deeply. This is referred to as a PUFF.
6. Have student hold breath for 10 seconds to allow medication to stay in lungs.
7. Wait one minute between prescribed puffs. Repeat as directed.
8. (\_\_\_\_) should continue sitting upright and resting until medication takes effect (can be up to twenty minutes).
9. (\_\_\_\_) may require \_\_\_\_\_\_\_ puffs by inhaler every \_\_\_\_\_\_\_\_\_ hours. Document on the school medication log and home school notebook.

Problem: Medication side effects

Goal: Early recognition and reporting of side effects

Action:

*Note: The appropriate drug, side effects and educational implications, should be inserted here. A list of asthma medications and effects for your use are included in this care plan.*

1. (\_\_\_\_) is medicated regularly with Cromolyn, Intal, and Tilade.
2. Cromolyn is used to prevent asthma attacks. It is also used before exposure to substance or exercise to prevent reactions.
3. Cromolyn will not help an asthma attack that has already started. If this medication is used during a severe attack it may cause irritation and make the attack worse.
4. Side effects that should be reported to parents promptly include: Painful urination, dizziness, rash, headache, joint pain, muscle weakness, and nausea or vomiting.
5. More common side effects that usually do not require intervention include cough, hoarseness, and dry mouth.
6. (\_\_\_\_) is medicated as needed with Foradil, Proventil, Serevent, Ventolin (Albuterol), or Volmax.
7. Albuterol opens the air passages of the lungs. It is taken by oral inhalation to treat the symptoms of asthma. It relieves coughing, wheezing, shortness of breath, and troubled breathing by increasing the flow of air through the bronchial tubes.
8. Side effects that require immediate medical evaluation include: blue color to skin, lips or fingernails, dizziness, fainting, increased breathing rate, increased pulse (heart) rate, skin rash and swelling or face, lips or eyelids.
9. More common side effects that usually do not require intervention unless troublesome or worrisome include: overexcitement and hyperactivity, nervousness, restlessness, and trembling.
10. Symptoms of overdose may include: chest pain, chills, fever, seizures, fast or slow heartbeat, severe muscle cramps, severe nausea or vomiting, unusual paleness, and coldness of skin or severe weakness. Any of these symptoms require calling parent or nurse unless student is unconscious or having seizures. It is extremely rare to need immediate emergency intervention; if (\_\_\_\_) needs emergency care call (911).
11. (\_\_\_\_) is medicated as needed with Alupent, Brethine, Brethaire, Maxair, Tornalate, and Xoponex.
12. Bronchodilators are used to relax muscles in and around the airways. They act rapidly. Bronchodilators help to prevent exercise-induced asthma.
13. Common side effects that usually do not require intervention unless troublesome or worrisome include: feeling anxious, rapid heart rate, headache, nausea, insomnia, and tremor/shakiness.
14. (\_\_\_\_) is medicated as needed with Beclovent, Vanceril, Azmacort, Aerobid.
15. It is used to reduce swelling of airways, inflammation and mucus production and decrease airway irritability.
16. Common side effects that usually do not require intervention unless troublesome or worrisome include: oral yeast infection and/or hoarseness.
17. (\_\_\_\_) is medicated as needed with Atrovent.
18. Atrovent is used to reduce tightness of muscles around airways and mucus production induced by cholinergic nerves.
19. Common side effects that usually do not require intervention unless troublesome or worrisome include: nervousness, nausea, headache, dizziness, cough, dryness of mouth.
20. (\_\_\_\_) takes Prednisone Medral or Pediapred (a steroid) to reduce inflammation.
21. Prednisone is used to decrease airway twitching, reduces inflammation, swelling of airways and mucus production. Short bursts can interrupt asthma episodes.
22. The side effects that must be reported promptly to parents and school nurse include: behavior changes, stomach pain, blood in the stool or vomiting blood.
23. Common side effects that do not require notifying parent unless worrisome, include: moon-shaped face, flushing, acne, and headache. These side effects can negatively impact a student's self-image and school staff should be sensitive to this.
24. Long-term side effects can cause weight gain, acne, and slowing of growth.
25. Educational implications of prednisone are minimal.
26. Prednisone should always be taken with food to prevent stomach upset.
27. Prednisone should never be discontinued without physician instruction.
28. (\_\_\_\_) is medicated as needed with Theophylline, Slo-Bid, or Theo-Dur, Theo-24.
29. It is used to relax muscles in and around airways. It is long acting and helps prevent asthma attacks.
30. Common side effects that usually do not require intervention unless troublesome or worrisome include: shakiness, restlessness, nausea.
31. The side effects that must be reported promptly to parents include: vomiting, stomach cramps, diarrhea, headache, muscle aches, irregular heartbeat, and seizures.
32. (\_\_\_\_) is medicated as needed with Beconase, Vancenase, AQ, Nasacort, or Nasalide.
33. It is used to prevent and reduce swelling in nasal membranes.
34. Common side effects that usually do not require intervention unless troublesome or worrisome include: sensation of nasal burning or irritation, mild nosebleeds.
35. (\_\_\_\_) is medicated as needed with Nasalcrom.
36. Nasalcrom is used to prevent the symptoms of sneezing, runny nose, and itching.

b. Common side effects that usually do not require intervention unless

troublesome or worrisome include: occasional sneezing or nasal stinging.

1. (\_\_\_\_) is medicated with Singular, Accolate, and Zuflo.
2. This drug is helpful in improving airflow and reducing asthma symptoms. It is given as a pill.
3. The most common side effects are headache and nausea.

Problem: Field Trips

Goal: Continue safe administration of medication on school-sponsored events

Action:

1. If \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ class should go on a trip from the school building his/her \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ inhaler should accompany him/her on the trip.
2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ self-administers his/her inhaler. Before the class leaves school property, make sure he/she has his/her inhaler on person.

(If self-administers add number 3 only and end it there)

Or

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_’s inhaler should be picked up from the nurse’s office by the unlicensed medication train personnel accompanying the class on the field trip.

1. A copy of prescriber parental authorization form should accompany inhaler on the field trip.
2. Administer according to orders.
3. Document on medication administration record.
4. On return from field trip return inhaler to nurse’s office.

Problem: Transportation on School Bus

Goal: Bus driver be aware a student has asthma

Action:

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ has an inhaler on person to self-administer for asthma.

Or

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ has a history of asthma.

1. In the event that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ has difficulty breathing while being transported on the school bus the bus driver should stop the bus, call 911 and transportation supervisor for assistants.
2. Transportation supervisor will call school nurse and parent.

Problem: Emergency Evacuation of School Building

Goal: To assure that medication is available for student

Action:

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, or \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ will remove \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_’s \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_inhaler to the area that the school nurse or medication trained assistant will be located in the event of evacuation of the school building due to an emergency or unforeseen event.
2. In the event of an emergency requiring lock down in the school building, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ will be identified in the safety plan and will be directed to the school nurse or medical assistant if safe where his/her inhaler will be.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Physician Signature Parent Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School Nurse Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School Contact School Contact