

ASTHMA CHECKLIST FOR SCHOOL NURSES

NOTE: Any child who needs medications delivered at school or who self-administers medications at school must have an Oral Medication Order Form.

I. Planning for Care before School Begins

- School nurse is notified that student has asthma.
- School nurse sends an asthma history form home for parents to provide additional information about the student's asthma.
- School nurse calls or meets with the student and family.
- Discuss parent/student expectations of asthma care while at school.
- Discuss details of asthma management plan obtained from primary healthcare provider and accommodation needs at school.
- Determine equipment and supplies needs for school including a 3-day disaster supply.
- Discuss plans for communication with parent and primary healthcare provider.
- Discuss role of health services and personnel involved.
- Obtain Oral Medication Order form if needed for delivery of medications at school.
- Obtain parent request for care and other legal documents as needed.
- If needed, have parents sign an Exchange of Medical Information form.

II. Assigning Level of Care

- Considering the severity of the student's asthma and the student's needs at school, determine level of nursing care needs and assign a level based on the "Staff Model for the Delivery of School Health Services." The following depicts usual nursing level assignments for students with asthma: (Appendix J)

Level B	Medically Fragile
Level C	Medically Complex
Level D	Health Concerns

Level B (Medically Fragile)-Individual Health Plan/Section 504 Plan

- With the parent, and student if appropriate, develop the Individual Health Plan/Section 504 Plan and School Asthma Emergency Plan. This planning may include others who will provide care to the student. Issues to be addressed include:
 - a. Management of routine medications
 - b. Management of an acute asthma attack
 - c. Monitoring peak flow measurements
 - d. Participation in activities (physical education, recess)
 - e. Field trips
 - f. Transportation
 - g. Obtain Oral Medication Order form
- Review school day schedule and assess level of independence.
- If needed, clarify specifics of treatment by talking with the primary healthcare provider.
- Notification and education of school personnel working with the student e.g., secretary, lunchroom and playground personnel, principal, transportation, coaches.
- Training of personnel who will give medications or supervise activities.
- Providing classroom education as needed.
- Monitor staff and student needs and update as needed.
- Annual review of IHP/Section 504 plan or revise as needed.

Level C (Medically Complex)—Planning for Care

- Obtain the Oral Medication Order Form signed by the primary healthcare provider.
- Assure medications are pharmacy labeled with student's name, primary healthcare provider, type of medication, dose, delivery methods, and any special instructions.
- Develop a School Asthma Emergency Plan with the parent and student, if appropriate. Distribute to all school personnel who interact with the student.
- Obtain Exchange of Medical Information form if needed.
- Renew medications, order annually or as needed.

Level D (Health Concerns)—Monitoring

- Assure health concern of asthma is recorded in health files.
- Assess health status as needed to assure student's maximum participation in school educational and physical activities.
- As needed, review of student's asthma and possible treatment needs.

III. Self Administration of Oral Medications

Asthma is a condition that requires immediate treatment when an asthma attack occurs. For this reason many school districts allow self-administration of asthma medications; however, some school districts do not allow any medications to be self-administered. District policy should be reviewed before self-administration is considered.

- Assess student's readiness for self-administration of oral medications or peak flow monitoring.
 - Student is capable of identifying individual medications.
 - Student is knowledgeable of purpose of individual medications.
 - Student is able to identify/associate specific symptom occurrence and need for medication administration.
 - Student is capable/knowledgeable of medication dosage.
 - Student is knowledgeable about method of medication administration.
 - Student is able to state side effects/adverse reactions to this medication.
 - Student is knowledgeable of how to access assistance for self if needed in an emergency.
 - Student is able to identify safety issues: no sharing of medications with others; need for safe storage of medication; consistent placement of medication.
- Obtain an Oral Medication Order form indicating permission from the primary healthcare provider and parent for the student to self-administer oral medications.
- Develop a plan for oral medication administration with the student, parent and other school personnel as needed.
- Develop a School Asthma Emergency Plan.

IV. Promoting Independence in the Student's Self Management

As the student grows and develops, responsibility in assessing and making asthma management decisions should progress. School nurses can assist in promoting this independence within the school setting in various ways.

- **Assess and promote:**
 - Knowledge and understanding of asthma
 - Use of the metered dose inhaler
 - Recognition of asthma symptoms
 - Avoidance of asthma triggers
 - Planning for self-care
- **Assess asthma control in relation to:**
 - Absenteeism rate
 - Participation in activities, particularly physical education, recess
 - School performance

- **Assess social/emotional growth related to student's asthma and self care:**
 - Feeling that he/she is different from other students
 - Avoids taking medications; toughs it out during an attack
 - Reluctance to go to office for medications
 - Notifying school personnel about medication need or use if self-administering
 - Safety issues, e.g., not sharing medications with other students

- **Promote self esteem:**
 - Assist student in providing information about asthma to others
 - Positive feedback for good decisions
 - Increasing independence in plan of care