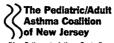
Asthma Treatment Plan — Student (This asthma action plan meets N LI aw N LS A 186/40-12 8) (Physician): Orders)







(Please Print)	io (E.O) (Filysiolan's Gracis)	"Your Pathway to Asthma PACHU septioned Plan avail WMML pacity. Org	Control* IN NEW FRASETY	
Name		Date of Birth	Effective Date	
Doctor	Parent/Guardian (if appli	cable) En	nergency Contact	
Phone	Phone	Ph	one	
HEALTHY (Green Zone) You have all of these: Breathing is good No cough or wheeze Sleep through the night Can work, exercise, and play	MEDICINE HOW MUCH to take and HOW OFTEN to take it good Advair® HFA 45, 115, 230 2 puffs twice a day Aerospan 1, 2 puffs twice a day Alvesco® 80, 160 1, 2 puffs twice a day Dulera® 100, 200 2 puffs twice a day Dulera® 100, 200 2 puffs twice a day 2 puffs		Iirected. OW OFTEN to take it a day ffs twice a day ffs twice a day a day a day ffs twice a day wice a day alations once or twice a day	Triggers Check all items that trigger patient's asthma: Colds/flu Exercise Allergens Dust Mites, dust, stuffed animals, carpet Pollen - trees, grass, weeds Mold Pets - animal dander Pests - rodents,
And/or Peak flow above	☐ Other☐ None Remember to	to rinse your mouth after	<i>taking inhaled medicine.</i> _minutes before exercise.	SHIOVE
You have any of these: Cough Mild wheeze Tight chest Coughing at night Other: If quick-relief medicine does not help within 15-20 minutes or has been used more than 2 times and symptoms persist, call your	Continue daily control me MEDICINE Albuterol MDI (Pro-air® or Proven Xopenex® Albuterol 1.25, 2.5 mg Duoneb® Xopenex® (Levalbuterol) 0.31, Combivent Respimat® Increase the dose of, or add:	HOW MUCH to take and H til® or Ventolin®) _2 puffs eve _2 puffs eve _1 unit nebu _1 unit nebu _1 unit nebu _1 inhalation	ery 4 hours as needed ery 4 hours as needed ulized every 4 hours as needed n 4 times a day	products, scented products Smoke from burning wood, inside or outside Weather Sudden temperature change Extreme weather hot and cold Cozone alert days
doctor or go to the emergency room. And/or Peak flow from to	• If quick-relief medicing week, except before			o
Your asthma is getting worse fast: • Quick-relief medicine did not help within 15-20 minut. • Breathing is hard or fast. • Nose opens wide • Ribs sho. • Trouble walking and talking. • Lips blue • Fingernails blue. • Other:	Asthma can be a life MEDICINE Albuterol MDI (Pro-air® or Pro Xopenex® Albuterol 1.25, 2.5 mg Duoneb® Nove Market Mar	HOW MUCH to take oventil® or Ventolin®)4 pu4 pu1 un1 un	e and HOW OFTEN to take it uffs every 20 minutes uffs every 20 minutes nit nebulized every 20 minutes nit nebulized every 20 minutes nit nebulized every 20 minutes	This asthma treatment plan is meant to assist, not replace, the clinical decision-making required to meet individual patient needs
Add the contemplates as any actific cases ability was assumed before the contemplates and c	sion to Self-administer Medication: student is capable and has been instructed e proper method of self-administering of the nebulized inhaled medications named above	PHYSICIAN/APN/PA SIGNATURE	Physician's Orders	DATE

REVISED AUGUST 2014
Permission to reproduce blank form

Make a copy for parent and for physician file, send original to school nurse or child care provider.

 $\hfill \square$ This student is <u>not</u> approved to self-medicate.

PHYSICIAN STAMP