School Asthma Card

To be filled in by the parent/carer

To be fitted in by the parent/caref			
Child's name			
Date of birth			
Address			
Parent/carer's name			
Telephone – home			
Telephone – work			
Telephone – mobile			
Doctor/nurse's name			
Doctor/nurse's telephone			

This card is for your child's school. **Review the card at least** once a year and remember to update or exchange it for a new one if your child's treatment changes during the year. Medicines should be clearly labelled with your child's name and kept in agreement with the school's policy.

Reliever treatment when needed

For wheeze, cough, shortness of breath or sudden tightness in the chest, give or allow my child to take the medicines below. After treatment and as soon as they feel better they can return to normal activity.

Medicine	Parent/carer's signature

Expiry dates of medicines checked

Medicine	Date checked	Parent/carer's signature

What signs can indicate that your child is having an attack?

Parent/carer's signature

Date

Does your child tel	l you when he,	/she needs m	nedicine [®]
---------------------	----------------	--------------	-----------------------

	Yes		No
--	-----	--	----

Does your child need help taking his/her asthma medicine?

Yes No

What are your child's triggers (things that make their asthma worse)?

Does your child	l need to	take any	medicines	before
-----------------	-----------	----------	-----------	--------

exercise or play? Yes No

If yes, please describe below

Medicine

Medicine

How much and when taken

Does your child need to take any other asthma medicines while

in the school's care? Yes

If yes, please describe below

| How much and when taken

No

Dates card checked by doctor or nurse

Date	Name	Job title	Signature

What to do in an asthma attack

- 1 Make sure the child takes one to two puffs of their reliever inhaler, (usually blue) preferably through a spacer
- 2 Sit the child up and encourage them to take slow steady breaths
- 3 If no immediate improvement, make sure the child takes two puffs of reliever inhaler, (one puff at a time) every two minutes. They can take up to ten puffs
- 4 If the child does not feel better after taking their inhaler as above, or if you are worried at any time, call 999 for an ambulance. If an ambulance does not arrive within ten minutes repeat step 3.

Asthma UK Adviceline Ask an asthma nurse specialist 0800 121 62 55 asthma.org.uk/adviceline 9am–5pm, Monday–Friday

Asthma UK Summit House, 70 Wilson Street, London EC2A 2DB **T** 020 7786 4900 **F** 020 7256 6075

asthma.org.uk

The Information Standard Certified member

©2011 Asthma UK Registered charity number in England 802364 and in Scotland SC039322