Asthma Treatment Plan — Student (This asthma action plan meets NJ Law N.J.S.A. 18A:40-12.8) (Physician's Orders)







REVISED AUGUST 2014

(Please Pr	int)					
Name			Date of Birth	Effective Date		
Doctor		Parent/Guardian (if app	n (if applicable) Emergency Contact			
Phone		Phone	Phone Pi		Phone	
HEALTHY	(Green Zone)	Take daily control more effective with a	edicine(s). Some i	inhalers may be	Triggers Check all items	
	You have all of these:	MEDICINE HOW MUCH to take and HOW OFTEN to take it			that trigger	
17.0	Breathing is good	MEDICINE Advair® HFA 45, 115, 23	20 2 nuffe twi	I HOW OF LEN TO TAKE IT	patient's asthma:	
	 No cough or wheeze 	☐ Aerospan™		puffs twice a day	□ Colds/flu	
CO W	Sleep through	☐ Aerospan™ ☐ Alvesco® ☐ 80, ☐ 160 ☐		puffs twice a day	☐ Exercise☐ Allergens	
	the night	☐ Dulera® ☐ 100, ☐ 200 ☐ Flovent® ☐ 44, ☐ 110, ☐ 220 ☐	z pulls twi 2 puffs twi	ice a uay ice a dav	o Dust Mites,	
四人	Can work, exercise,	☐ Qvar® ☐ 40, ☐ 80		ouffs twice a day	dust, stuffed animals, carpet	
	and play	☐ Qvar® ☐ 40, ☐ 80		ouffs twice a day	o Pollen - trees,	
		Asmanex® Twisthaler® 110.		n twice a day nhalations □ once or □ twice a day	grass, weeds	
		☐ Asmanex® Twisthaler® ☐ 110, ☐ ☐ Flovent® Diskus® ☐ 50 ☐ 100 ☐ ☐ Pulmicort Flexhaler® ☐ 90, ☐ 1	☐ 2501 inhalatio	n twice a day	o Mold o Pets - animal	
		☐ Pulmicort Flexhaler® ☐ 90, ☐ 18 ☐ Pulmicort Respules® (Budesonide) ☐ 0	80	nhalations () once or () twice a day		
	•	☐ Singulair® (Montelukast) ☐ 4, ☐ 5,		inzeu 🗀 once oi 🗀 twice a day	O Pests - rodents, cockroaches	
		☐ Other	, · · · · · · _ · · · · · · · · · · · · · · · · ·	,	Odors (Irritants)	
And/or Peak	flow above	None			O Cigarette smoke	
				er taking inhaled medicine.		
	If exercise triggers you	ır asthma, take	puff(s)	minutes before exercise.		
PAUITIMNI.	(Yellow Zone) III	Continue daily control me	odiaina/a) and ADD au	tal valiatusadiaisa/at	cleaning products,	
augin i inaini	You have <u>any</u> of these:	Continue daily Control in	edicine(s) and ADD qu	nck-renei medicine(s).	scented products	
	• Cough	MEDICINE			O Smoke from	
Jaily	Mild wheeze	☐ Albuterol MDI (Pro-air® or Prove			burning wood, inside or outside	
	• Tight chest	☐ Xopenex® ☐ Albuterol ☐ 1.25, ☐ 2.5 mg	2 puffs e	every 4 hours as needed	□ Weather	
	 Coughing at night 	☐ Albuterol ☐ 1.25, ☐ 2.5 mg	1 unit ne	bulized every 4 hours as needed	o Sudden	
CP1	• Other:	☐ Duoneb® Duoneb® Double Duoneb® Double Duoneb®	IU⊓II⊓e 1062 □ 125 ma 1 unitna	bulized every 4 hours as needed	temperature change	
VQ		Combivent Respirat®			o Extreme weather	
	edicine does not help within	☐ Increase the dose of, or add:		ion i unioo a day	- hot and cold Ozone alert days	
	r has been used more than ptoms persist, call your	☐ Other			☐ Foods:	
	he emergency room.	 If quick-relief medici 	ne is needed more	e than 2 times a	o	
And/or Peak flo	ow from to	week, except before	exercise, then ca	all your doctor.	o	
CMCDACN	ICV (Ded Zero) IIII	E223 B U.B			o O Other:	
EMERGENCY (Red Zone) Take these medicines NOW and CALL 911. Asthma can be a life-threatening illness. Do not wait!					O	
	Your asthma is getting worse fast:				0	
	Quick-relief medicine did	MEDICINE		ke and HOW OFTEN to take it	o	
	not help within 15-20 minut				This asthma treatment	
	 Breathing is hard or fast Nose opens wide • Ribs sho 			unit nebulized every 20 minutes	plan is meant to assist,	
	. Trouble walking and talking	ı 🗀 Duoneb®	1:	unit nebulized every 20 minutes	not replace, the clinical	
And/or	• Lips blue • Fingernails blue	☐ Xopenex® (Levalbuterol) ☐ 0.31	, □ 0.63, □ 1.25 mg1	unit nebulized every 20 minutes	decision-making required to meet	
Peak flow Delow	• Other:	☐ Combivent Respimat® ☐ Other	I	imaiauon 4 umes a uay	individual patient needs.	
Redstance Point of the extent	ra baseri lle nda primi berga en (si. Re arto; b				<u> </u>	
racial ar as fai d' lark. Tre krefira (1994) aftar d'ibre kray ed el affany dellar af en l'indictri mai d'armais a l'armai hille arch	ada selemberaria estanocialen ura core ende estanociale estanocialen permissione estanocialene	sion to Self-administer Medication:	PHYSICIAN/APN/PA SIGNATUR	E	DATE	
AN-A CSC 10 TORNSTVING KCITCH EST.	percentage of part mon, avenue a	student is capable and has been instructed		Physician's Orders		
ningiralaye a rigiyaye trodukin ningiralaye a rigiyaye troduka ningiralaye a rigiyaye (Lodiy ya ra)		proper method of self-administering of the	PARENT/GUARDIAN SIGNATUR	KE		
(fild fild fild for the test of the large spirit conjured to a year the field of the first fild fild District field and film from the fild fild fild.	100111 Total de la constante d	nebulized inhaled medications named above cordance with NJ Law,	The state of the s	• •	_	
arter ar de primerzata especiale d'edici L'aron de Pezer (especiale d'ar d'architecte Jones d'America (proporte Aproved 1470)	ucchildren, Gentraldisch nach aben Senat and	student is not approved to self-medicate.	PHYSICIAN STAMP			

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