

SCHOOL ATTENDANCE CHECKLIST

Asthma and School Attendance: Checklist For Deciding About School Attendance

Clues for Sending Child to School:

1. Stuffy nose but no wheezing.
2. Mild wheezing which clears after medicine.
3. Good exercise tolerance (able to participate in usual daily activities).
4. No extra effort needed with breathing pattern.

Clues for Keeping Child at Home:

1. Evidence of infection-red/sore throat, or swollen glands.
2. Fever over 100 degrees (hot and flushed).
3. Wheezing which continues to increase one hour after medicine is taken.
4. Child is too weak or tired to take part in routine daily activities.
5. Breathing pattern is labored, irregular, rapid (more than 25 breaths per minute at rest).

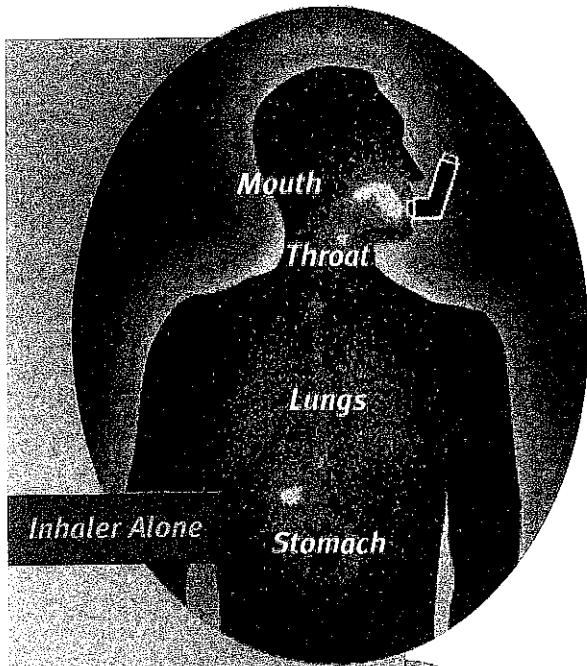
Each child is different and follows his/her own special pattern during an asthma episode. Therefore, it is best to observe your child closely and learn his/her particular body signs which serve as a guide to his/her state of health.

Asthma/Reactive Airway and School

What an exciting time for you and your child! This major life stepping stone is one of lots of new, and sometimes, changing events. If your child has experienced symptoms related to asthma and/or reactive airway, then your child has probably required medication during the day. With your child entering public education, you may wonder "what's a parent to do?" Listed below are some helpful hints to make the transition from home care to school care somewhat easier:

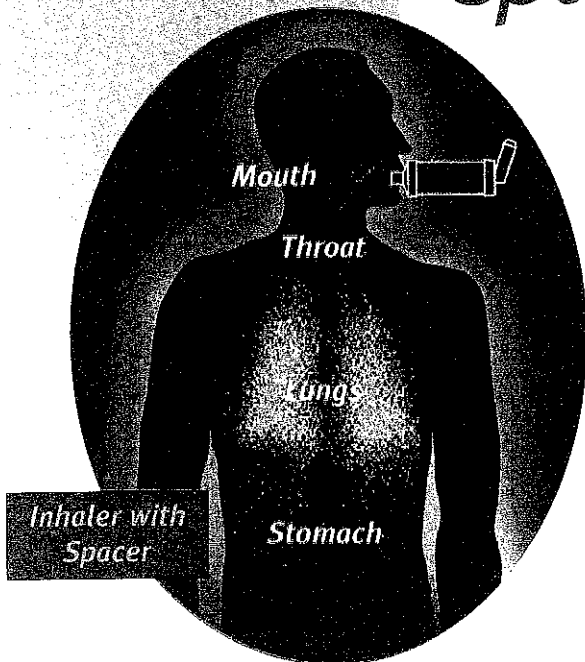
- Talk with your child's doctor to see if this is the time to transfer medication administration from a nebulizer to a "puffer" —a metered dose inhaler.
- If your child's doctor thinks an inhaler would be beneficial to be left at school, see if they will write you a script for an extra inhaler to be left in the health room.
- If your child needs treatment for their asthma, either by inhaler or by nebulizer, a school nurse is available to administer the treatment and assess your child's breathing. Simply call your child's school and talk with the nurse to make these arrangements.
- Medication is required to be labeled by the pharmacy (or a note from the physician if it is a sample) with your child's name, the name of the medicine, the exact dosage, times to be given, and the physician's name.
- An adult must always transport medication to and from school to the school nurse and complete the appropriate medication forms.

Your school nurse will ask you to complete an "*Initial Asthma/Reactive Airway Interview*" form that details your child's history with their breathing issues. This allows the school nurse a better overview of your child's symptoms and what treatments have and are being used. Each subsequent year all you will need to do is to update the information on the "*Asthma Action Plan*"!

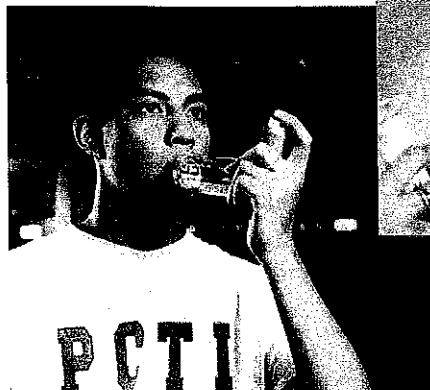


- ◀ When an inhaler is used alone, medicine ends up in the mouth, throat, stomach and lungs.
- ◀ Medicine left in the mouth, throat and stomach may cause unpleasant taste and side effects.

Why should I use a spacer with my inhaler?

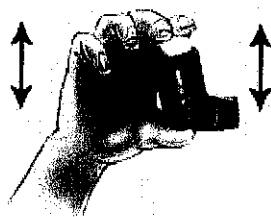


- ◀ When an inhaler is used with a spacer, more medicine is delivered to the lungs, where it works.



Spacers should be used by patients of all ages.

How to Use a Metered-Dose Inhaler



1. Shake the medicine.



Or



2a. Hold the inhaler so that the mouthpiece is 1 and 1/2 to 2 inches (about 2 to 3 finger widths) in front of your open mouth. Breathe out normally. Press the inhaler down once so it releases a spray of medicine into your mouth while you breathe in slowly. Continue to breathe in as slowly and deeply as possible.

2b. If holding the inhaler in front of your mouth is too hard, breathe out all the way and then place the mouthpiece in your mouth and close your lips around it. Press the inhaler down once to release a spray of medicine into your mouth while you breathe in slowly.

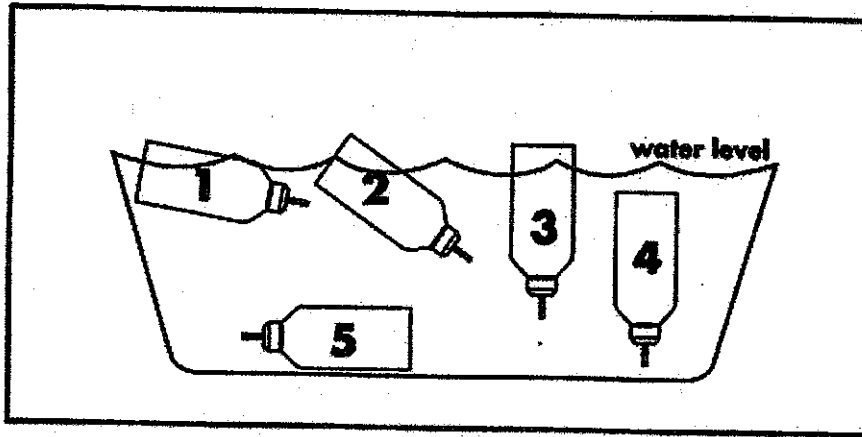


3. Hold your breath for 10 seconds, or as long as is comfortable. Breathe out slowly.

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How to check if my inhaler is empty

The Float Test



The Float Test: 1. empty; 2. 1/4 full; 3. 1/2 full; 4. 3/4 full; 5. full.

How to clean your AeroChamber

- Spacer should be cleaned at least once a week
- Remove only the rubber ring that would connect the inhaler (MDI adapter)
- Soak parts in a basin filled with clean, warm water for 20 minutes using mild detergent
- Gently agitate the parts to dislodge any residue. If using a cloth to loosen residue, avoid contact with the one-way diaphragm and exhalation valve
- Remove spacer from soapy water and replace with fresh, clean water and rinse
- Gently shake away excess water droplets and place on a clean, dry surface to air dry
- Do not rub with a cloth or bottle brush
- Ensure that all parts are completely dry before reassembly

Controlling Things That Make Asthma Worse

SMOKE

- Do not smoke. Attend classes to help stop smoking.
- Do not allow smoking in the home or car. Remaining smoke smell can trigger asthma.
- Stay away from people who are smoking.
- If you smoke, smoke outside.

DUST

- Vacuum weekly with a vacuum with a high efficiency filter or a central vacuum. Try to make sure people with asthma are not home during vacuuming.
- Remove carpet if possible. Wet carpet before removing and then dry floor completely.
- Damp mop floors weekly.
- Wash bedding and stuffed toys in hot water every 1-2 weeks. Freeze stuffed toys that aren't washable for 24 hours.
- Cover mattresses and pillows in dust-mite proof zippered covers.
- Reduce clutter and remove stuffed animals, especially around the bed.
- Replace heating system filters regularly.

PESTS

- Do not leave food or garbage out. Store food in airtight containers.
- Try using traps and poison baits, such as boric acid for cockroaches. Instead of sprays/bombs, use baits placed away from children, such as behind refrigerator.
- Vacuum up cockroach bodies and fill holes in with caulking or copper wool.
- Fix leaky plumbing, roof, and other sources of water.

MOLD

- Use exhaust fans or open windows for cross ventilation when showering or cooking.
- Clean mold off hard surfaces with detergent in hot water and scrub with stiff brush or cleaning pad, then rinse clean with water. Absorbent materials with mold may need to be replaced.
- Make sure people with asthma are not in the room when cleaning.
- Fix leaky plumbing or other sources of water or moisture.

ANIMALS

- Consider not having pets. Avoid pets with fur or feathers.
- Keep pets out of the bedroom of the person with asthma.
- Wash your hands and the hands of the person with asthma after petting animals.

ODORS/SPRAYS

- Avoid using strongly scented products, such as home deodorizers and incense, and perfumed laundry products and personal care products.
- Do not use oven/stove for heating.
- When cleaning, keep person with asthma away and don't use strong smelling cleaning products.
- Avoid aerosol products.
- Avoid strong or extra strength cleaning products.
- Avoid ammonia, bleach, and disinfectants.

POLLEN AND OUTDOOR MOLDS

- Try to stay indoors when pollen and mold counts are high.
- Keep windows closed during pollen season.
- Avoid using fans; use air conditioners.

COLDS/FLU

- Keep your body healthy with enough exercise and sleep.
- Avoid close contact with people who have colds.
- Wash your hands frequently and avoid touching your hands to your face.
- Get an annual flu shot.

WEATHER AND AIR POLLUTION

- If cold air is a problem, try breathing through your nose rather than your mouth and covering up with a scarf.
- Check for Spare the Air days and nights and avoid strenuous exercise at those times.
- On very bad pollution days, stay indoors with windows closed.

EXERCISE

- Warm up before exercising.
- Plan alternate indoor activities on high pollen or pollution days.
- If directed by physician, take medication before exercise. (See Green Zone of Asthma Action Plan.)

