

If medications are to be given during school, a medication permission slip needs to be filled out yearly. Medications must be in the original labeled container. (When you get prescriptions filled you can ask the pharmacist to put them into two containers so you'll have one for school and one for home use.)

7. If your child does not respond to medication, what action do you advise school personnel to take? _____

8. What, if any, side effects does your child have from his/her medications?

9. Has your child been taught how to use an extension tube or spacer, pulmonary aid, inspirsteak kit or other device with his/her inhaler? Yes No
10. How many times has your child been hospitalized overnight or longer for asthma in the past year? _____
11. How many times has your child been treated in the emergency room for asthma in the past year? _____
12. How often does your child see his/her doctor for routine asthma evaluations?

13. Does your child need any special considerations related to his/her asthma while at school? (Check any that apply and describe briefly; to do some may need doctor follow-up)
- Modified gym classes _____
 - Modified recess outside _____
 - No animal pets in classroom _____
 - Avoiding certain foods _____
 - Emotional or behavior concerns _____
 - Special consideration while on field trips _____
 - Special transportation to and from school _____
 - Observation for side effects from medication _____
 - Other _____
14. Do you know what your child's baseline peak flow rate is?
 Yes No Rate _____
15. Do you think your child holds him/herself back from participating in all activities at school because of his/her asthma? If so, please describe.

16. Have you ever attended an asthma education class? Yes No
17. Has your child had asthma education? Yes No

**Thank you for your time and assistance in assessing
your child's special asthma needs at school.**