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









(Please Print)

(1 TORISC F)							
Name				Date of Birth		Effective Date	
Doctor			Parent/Guardian (if app	Parent/Guardian (if applicable)		Emergency Contact	
Phone			Phone	Phone Phone			
HEALTHY	(Green Zone)	T:	ake daily control m ore effective with	edicine(s). Some i	nhalers may be	Triggers Check all items	
	Vou hove ell of thoses						
	Breathing is good	141	NOINE	NE HOW MUCH to take and HOW OFTEN to take it ® HFA □ 45, □ 115, □ 2302 puffs twice a day			
	• No cough or wheeze		erospan tm	Dan TM \square 43, \square 173, \square 230 $\underline{\square}$ 2 puris twice a day \square 1. \square 2 puris twice a day			
	• Sleep through	□ Al	vesco® □ 80, □ 160	span™ 1,			
Design .	the night		ulera® □ 100, □ 200 <u> </u>	1 [®] □ 100, □ 2002 puffs twice a day			
CET H	 Can work, exercise, 		JVent® □ 44, □ 110, □ 220 _ /ar® □ 40 □ 80	1, 2 puris twice a day 2 puris twice a			
0 4	and play	□s _i	mbicort® 🗆 80, 🗆 160		ouffs twice a day	animals, carpet	
		[□ Ac	lvair Diskus® 🗀 100, 🗀 250, 🏻	☐ 5001 inhalatio	n twice a day	O Pollen - trees, grass, weeds	
		I AS	:manex® Iwisthaler® 🔲 110, 🔲	220	nhalations once or twice a day	o Mold	
		H	ilmicort Flexhaler® 🗀 90. 🗀 12	1	n twice a day nhalations □ once or □ twice a day	O Pets - animal	
		□ Pi	lmicort Respules® (Budesonide) 🔲 (0.25, 🗆 0.5, 🔲 1.01 unit nebu	nhalations □ once or □ twice a day llized □ once or □ twice a day	dander O Pests - rodents.	
		🗆 51	ngulair® (Montelukast) 📖 4, 🔲 5,	, 🗀 10 mg1 tablet dai	ily	cockroaches	
And/or Dook	flerer above	Ot				Odors (Irritants) O Cigarette smoke	
And/or Peak	And/or Peak flow above None						
Remember to rinse your mouth after taking inhaled medicine. If exercise triggers your asthma, takepuff(s)minutes before exercise.							
	ii exercise trigger:	your asu		puii(s)	minutes before exercise	 Perfumes, cleaning 	
CAUTION (Yellow Zone) IIIC Continue daily control medicine(s) and ADD quick-relief medicine(s).						products, scented products	
You have <u>any</u> of these: MI			MEDICINE HOW MUCH to take and HOW OFTEN to take it				
(" ")	• Mild wheeze		Albuterol MDI (Pro-air® or Proventil® or Ventolin®) _2 puffs every 4 hours as needed			O Smoke from burning wood,	
	• Tight chest		penex®2 puffs every 4 hours as needed			inside or outside	
XX 400	• Coughing at night		lbuterol □ 1.25, □ 2.5 mg1 unit nebulized every 4 hours as needed			☐ Weather ○ Sudden	
	• Other:		□ Duoneb®1 unit nebulized every 4 hours as needed			temperature	
			☐ Xopenex® (Levalbuterol) ☐ 0.31, ☐ 0.63, ☐ 1.25 mg _1 unit nebulized every 4 hours as needed				
			Combivent Respirat®1 inhalation 4 times a day				
15-20 minutes or has been used more than			☐ Increase the dose of, or add:			O Ozone alert days	
2 times and symptoms persist, call your Other						☐ Foods:	
octor or go to the emergency room. • If quick-relief medicine is needed more than 2 times a week, except before exercise, then call your doctor.						o	
And/or Peak flo	ow fromto		eek, except before	exercise, then ca	ill your doctor.	<u> </u>	
						O	
200	Your asthma is		sthma can be a life	uitilles 14044 (and CALL 311.	0	
	getting worse fast:					0	
	 Quick-relief medicine (Hid M	EDICINE	HOW MUCH to tak	te and HOW OFTEN to take it	o	
	not help within 15-20 r • Breathing is hard or fa		Xopenex®	outerol MDI (Pro-air® or Proventil® or Ventolin®)4 puffs every 20 minutes penex®4 puffs every 20 minutes			
TID (1)	Nose opens wide • Rib	s show	Albuterol ☐ 1.25. ☐ 2.5 mg	uterol 🗆 1.25, 🗀 2.5 mg1 unit nebulized every 20 minutes			
	• Trouble walking and to	alking 🗀	Duoneb®	1 u	init nebulized every 20 minutes	plan is meant to assist, not replace, the clinical	
And/or	• Lips blue • Fingernails	s blue 🔲	Xopenex® (Levalbuterol) □ 0.31	, □ 0.63, □ 1.25 mg1 u	init nebulized every 20 minutes	decision-making	
Peak flow	• Other:		Combivent Respirat®	1 i	nhalation 4 times a day	required to meet	
below		ᆜ	Other			individual patient needs.	
LA SCHARTHEITE: De ma plêse Metebellik Zil. Auf provide na 14 'nn of benn The Avencen Lung Ass Conton pi Rev Jeney and pi gifan is deciant all my Landon in Parisminat avencen anno anno anno	ra Terricu Par esta estas e e por present de costa e escritor el re del Albeir (U.U.A.), de frencestas Arbeir en des estas en espais, colony e albeiros, colony de la colonia.	rmiesies to	Colf-administer 88-21-41-	DIN/OLOLANIA CHI/DA CIA			
CONTRACTOR OF THE PROPERTY OF	This student is or		Self-administer Medication:	PHYSICIAN/APN/PA SIGNATUR	Physician's Orders	Date	
			method of self-administering of the				
estimat his any class, we recover, customiliary port and or mission of the determining interest Plan, and the control of the control. The characteristical features developed with the company processor by the ferror states plantation in the stray the project company and the control of the c			bulized inhaled medications named above PARENT/GUARDIAN SIGNATURE			_	
The Prince and Sol Letters Continued Haw Seep, speciment by the Prince study Association in the Seep Seep Section for water study in proceeding the Section Se			ordance with NJ Law.				
Processing Processing September Agentus IAAAAP Analysing Analysing September Agentus IAAAAP Analysing September September Analysing September Anal	And the control of the proper better the control of	This student	s <u>not</u> approved to self-medicate.	PHYSICIAN STAMP			
REVISED MAY 2017 Make a converter and for physician file, cond original to cohool names or child care provider							
Make a copy for parent and for physician file, send original to school nurse or child care provider.							