







strategies

- i. Shared with appropriate school staff and others who are in direct contact with students with asthma (e.g. transportation providers, volunteers).
- ii. Posted in a key area of the school where staff have access on a regular basis.
- iii. Located in the educator's daybook and/or occasional staff plans.

3. Facilitating and Supporting Daily or Routine Management

In general, asthma medications work in one of two ways to relieve symptoms. They either work by controlling or preventing the inflammation and mucous production or by relieving the muscle tightness around the airways.

- i. Controller Medication (Flovent, Advair, Qvar, Pulmicort, etc.):
 - " Used daily, before and after school at home, to prevent asthma attacks
 - " Decreases and prevents swelling of the airways
 - " Can take days to weeks of regular use to work effectively
- ii. Reliever Medication (Ventolin/Salbutamol, Bricanyl, etc.)
 - " Used to relieve symptoms of asthma
 - " Called the 'rescue' inhaler (usually blue in colour)
 - " Needs to be readily accessible at all times.

If symptoms persist:

- i. Wait 5-10 minutes to see if breathing difficulty is relieved.
- ii. If not, repeat the reliever inhaler as directed in the Asthma Health Management Plan.
- iii. If the student's breathing difficulty is relieved, they can resume school activities, but should be monitored closely. The student should avoid vigorous activity and may require additional reliever medication.
- iv. Contact parent(s)/ guardian(s) to inform and track on the Medical Emergency Record.

b. If symptoms persist or worsen (i.e., difficulty speaking or is struggling for breath, appears pale or grey, sweating, greyish/blue lips or nail beds), staff shall:

~~Call the parent(s) or guardian(s) to inform them of the situation and to arrange for pickup. If the parent(s) or guardian(s) cannot be reached, call the local emergency services (911) and inform them of the situation. The student should be taken to the hospital for further evaluation and treatment.~~

7. Definitions

Age and/or Developmentally Appropriate Readiness

Age and/or developmentally appropriate readiness for individual students will need to be considered by the Superintendent of Schools and Principal in consultation with the Parent(s)/Guardian(s)/Caregiver(s). The responsibilities that a student can assume will be assessed based on the student's age and capability to understand their condition. Students with special education needs may require additional assistance by school or central staff and Parent(s)/Guardian(s)/Caregiver(s).

Asthma

A chronic inflammatory disease of the airway that may cause one or more of the following symptoms:

- " Shortness of breath;
- " Tightness in the chest;
- " Coughing; and/or,
- " Wheezing.

Symptoms can:

- " Range from mild to severe and sometimes can be life threatening;
- " Vary from person to person;
- " Flare up from time to time and then not appear for long periods; and/or,
- " Vary from one episode to the next.

The cause of asthma is not known, and currently there is no cure. A high percentage of asthma patients also have seasonal allergies that are known to trigger an asthma episode.

Exercise- Induced Asthma

When students participate in physical activity, they commonly breathe through their mouths at a rapid rate, which causes cooling and drying of the sensitive airways. This cooling and drying effect causes the airways to narrow resulting in asthma symptoms. Exercise-induced asthma may present itself during or after physical activity. It is more common when activities are conducted in cold environments and during high pollen or pollution count days. However, students can experience exercise-induced asthma anywhere, including indoors.

Asthma Medication

Most people with asthma take two kinds of medication. Each asthma medication treats only one aspect of the condition and are defined as follows:

- " Controllers, also called 'preventers', reduce inflammation in the airways. Controllers are taken every day.
- " Relievers, generally known as 'inhalers', are very good at helping to alleviate symptoms immediately, such as coughing or wheezing. However, reliever medications do nothing for the underlying problem of inflammation. Relievers are only a short-term solution to breathing problems and indicate that there is underlying inflammation present that requires a controller medication.

Asthma Triggers

Things in your environment that cause worsening of asthma symptoms or asthma attacks. There are two types of asthma triggers:

1. Inflammatory (allergic) triggers can cause inflammation of the lungs' airways or tightening of the airways' muscles. Inflammatory triggers include:
 - " Dust mites
 - " Animals/Pet Allergens (i.e., dander)



York Catholic District School Board
Administration of Medication to Students with Asthma
Parent Letter Template
School Letterhead

Date

Dear Parent/Guardian;

As we update our school records related to the administration of medication for students with asthma, I am requesting that you sign and return the attached Form S40 (Acknowledgement and Consent) and carefully review the current S40(a) for Elementary Students, or S40(a1) for Secondary Students as soon as possible. This information is necessary for the safety and protection of your child.

As per Policy 206 Supporting Students with Prevalent Medical Conditions: Anaphylaxis, Asthma, Diabetes and/or Epilepsy, section 4.6.5 To confirm annually to the Principal or their designate that their child's medical status is unchanged.

If revisions to the medical information outlined on the attached Form S40(a) or Form S40(a1) are necessary for students who have a previous *Administration of Medication for Asthma* form on file, you will be required to complete a new form and secure an updated physician signature.

If no revisions are necessary, please return the "new" signed Form S40 along with the current S40(a) or S40(a1) and an updated picture of your child as soon as possible.

Please contact the school office if you have any questions and/or concerns.

Thank you for your immediate attention to this request and your ongoing support in the shared responsibility for asthma management in our school.

Sincerely,



ELEMENTARY ADMINISTRATION OF PRESCRIPTION MEDICATION FOR ASTHMA

THE FOLLOE.1 (r)-U SISON ()Tj EMC 6.4 Tm (T)Tj -10.00.018 Tc 0.01(Tw 16 674.4 Tm [(F)1typ0.018 Tc 0.01S Tw 6.4 Tm (T)Tj -140[(F)18 Tc 0.01) Tw 16 674.4 Tm [(F)14BT .007

<hr/> <hr/> <input type="checkbox"/> <input type="checkbox"/>		<hr/>
<hr/>		

ACTION – INDIVIDUAL EMERGENCY PLAN:

‘ Remove student from the trigger if possible in order to reduce the severity of the symptom(s)

‘ Use inhaler immediately or administer prescribed medication as indicated on this form and try to keep student calm

‘ Have student remain in an upright position if possible and do not lie down. If symptoms persist or worsen, call 911 and/or contact the school nurse. If the student has a severe allergic reaction, call 911 immediately. If the student has a severe allergic reaction, call 911 immediately. If the student has a severe allergic reaction, call 911 immediately.

York Catholic District School Board

SECONDARY SCHOOL
ADMINISTRATION OF PRESCRIPTION MEDICATION FOR ASTHMA

STUDENT'S NAME: _____ STUDENT'S DOB: _____
SCHOOL NAME: _____ ROUTE/BUS# _____
(IF APPLICABLE) _____

<p>Address _____ _____ _____ Phone # _____ Physician's or Licensed Health Care Provider's Name _____ Phone # _____</p> <p><input type="checkbox"/> <input type="checkbox"/></p>	<p>PLACE STUDENT'S PHOTO HERE (MUST BE KEPT CURRENT)</p>	<p>MEDICATION KEPT:</p> <p>With Student <input type="checkbox"/> E' at all times*</p> <p>If not with student at all times, specify location:</p> <p>In Office <input type="checkbox"/> E'</p> <p>Other (I alwher3.4 3Tc pt _____</p>
<p>_____</p>		

ACTION – INDIVIDUAL EMERGENCY PLAN:

- ‘ Remove student

