

## Authorization for Self-administration of Reliever Medication for Asthma (To be completed by parent/guardian)



School name:	School year:	
Student information		
Name:	Birthdate:/	<i>J</i>
Address:	Year Month	Day
MHSC # (6 digit): PHIN # (9 digit):		
Parent/guardian information		
Parent/guardian:	Daytime phone(s)	
Parent/guardian:	Daytime phone(s)	
Emergency contact:	_ Daytime phone(s)	
Name of reliever medication  Salbutamol (e.g., Ventolin*, Airomir) Symbicort* Other		
Usual location of reliever medication:		
As per school policy, the student shall carry urgently require	d medication on their person.	
Parent/guardian authorization		
I acknowledge that my child can safely and responsibly carr school hours and understand that I am responsible for cons medication.	•	•
Parent/guardian signature:	Date:	



## **Asthma Emergency Response Plan**

The Asthma Emergency Response Plan is based on the clinical practice guidelines developed by the Unified Referral and Intake System (URIS) in consultation with Children's Allergy and Asthma Education Centre (CAAEC) at Health Sciences Centre. These clinical practice guidelines are available on the URIS website. <a href="Unified Referral and Intake System">URIS</a>) | Manitoba Education and Early Childhood Learning (gov.mb.ca)

IF YOU SEE THIS:	DO THIS:
<ul> <li>Symptoms of asthma</li> <li>Coughing</li> <li>Wheezing</li> <li>Chest tightness</li> <li>Shortness of breath</li> <li>Increase in rate of breathing while at rest</li> </ul>	<ol> <li>Remove the child from triggers of asthma.</li> <li>Have the child sit down.</li> <li>Ensure the child takes reliever medication (usually blue cap or bottom).</li> <li>Encourage slow deep breathing.</li> <li>Monitor the child for improvement of asthma symptoms.</li> <li>If reliever medication has been given and asthma symptoms do not improve in 5-10 minutes, contact parent/guardian.         <ul> <li>Reliever medication can be repeated once at this time. If the child is not well enough to remain at the community program, the parent/guardian should come and pick them up.</li> </ul> </li> <li>If any of the emergency situations occur (see list below), call 911/EMS.</li> </ol>
<ul> <li>Emergency situations</li> <li>Skin pulling in under the ribs</li> <li>Skin being sucked in at the ribs or throat</li> <li>Greyish/bluish color in lips and nail beds</li> <li>Inability to speak in full sentences</li> <li>Shoulders held high, tight neck muscles</li> <li>Cannot stop coughing</li> <li>Difficulty walking</li> </ul>	<ol> <li>Activate 911/EMS.         <ul> <li>Delegate this task to another person. Do not leave the child alone.</li> </ul> </li> <li>Continue to give reliever medication as prescribed every five minutes.</li> <li>Notify the parent/guardian.</li> <li>Stay with the child until EMS personnel arrive.</li> </ol>