

Northfield Secondary School Asthma Update



Dear Parent/Guardian of:

Student Name _____ Grade _____

We are in the process of updating our asthma file on your student. In addition to the information you have given us, please help update our records by answering the following:

1. How severe is your student's asthma? Mild moderate severe
2. When was his/her last asthma episode? _____
3. Please list the medications your student currently takes for asthma.

Medication	Dose	Frequency	Side effects
------------	------	-----------	--------------

4. Are there any physical restrictions? (if so, what?) _____

5. A nebulizer is available at school for student use. Please bring in tubing with mouthpiece and medication in labeled bag to the nurse office.

PERMISSION TO CARRY INHALERS:

It is recommended that students who have asthma carry their inhaler daily to school. Students need to demonstrate correct use of inhaler, agree never to share their inhaler with another person and notify the nurse if there is no improvement after using the inhaler.

My student understands the above terms and has permission to carry his/her inhaler to school.

Parent signature _____ Date _____

Student signature _____ Date _____
(return this form to the nurse's office)