

Standards of Care for Asthma Management in the School Setting Utah 2017

NOTE: School nurses should determine their individual scope of practice regarding new asthma treatment therapies and/or asthma care practices.

Asthma is a chronic condition affecting 5%-10% of the children in the United States. Asthma is responsible for more hospital admissions, emergency room visits, and school absences than any other childhood disease. It can be serious and life-threatening, but it can also be controlled. Symptoms of asthma may be mild, severe, or fatal.

During an acute episode, the airways become narrow or blocked, causing wheezing, coughing, and dyspnea. The most common stimuli are viral infections, exercise, allergens, environmental irritants, and stress.

Asthma Action Plan

Students with asthma should have an Asthma Action Plan on file with the school before they attend. The plan is signed by the healthcare provider and the parent, and is reviewed by the school nurse. The Asthma Action Plan should be reviewed at least annually, or when the student transfers to another school.

The Department of Health along with other stakeholders have developed a State form (IHP101.1 or IHP101.2) that is recommended for use in Utah. This form is required for any student carrying and self-administering asthma medication while at school.

Asthma Medication

Utah Code 53A-11-602 allows students to carry and self-administer inhaled asthma medication when the appropriate form (IHP101.1 or IHP101.2) has been completed and signed by parent and healthcare provider, and returned to the school.

Self-Care Management

Self-care ability level should be determined by school nurse and parent/guardian.

- a. All students, regardless of age or expertise, should have an Asthma Action Plan on file with the school, and may need assistance when experiencing a severe asthma episode.

Management

The school nurse can assist the student who is asthmatic with managing their condition in the following ways:

- Encourage parents to provide an extra rescue inhaler to be left at school in case of emergencies.

- Keep accurate records of asthmatic episodes at school, including triggers, early warning signs, treatment, and student/family education.
- Assist physical education teachers to modify physical education requirements (as necessary).
- Assist teachers in modifying the student's environment as needed to reduce triggers.
- Assist the student in administering the prescribed medications (as needed).
- Counsel the student about regular class attendance and the importance of pre-medication prior to engaging in activities that trigger asthmatic episodes.
- Monitor the student's activities, medication compliance, and academic performance.

REFERENCES

Virginia Department of Education. First aid guide for school emergencies. Retrieved from http://www.doe.virginia.gov/support/health_medical/index.shtml