

## **ASTHMA POLICY**

### **Asthma Definition**

Is a medical condition that causes narrowing of the small air passages in the lungs. The airways respond to 'Triggers' initiating a flare up, which then cause the muscles around the airways to tighten, swell and increase mucus production. These changes make it harder for the affected person to get air in and out of the lungs, which leads to wheeze, coughing and difficulties in breathing. Each episode can be a sudden onset or over a slow period with symptoms ranging from mild to severe.

### **Asthma Management Plan**

- Every student who has a diagnosis of asthma must supply the school with a written Asthma Management Plan (proforma 1), filled out by their parents/guardian and family doctor or Paediatrician. This plan should be attached to the student's record, and a copy filed in the Asthma Management Plan folder that is kept with the first aid officer.
- In order that this plan is kept up to date a Family Record information update form will be sent home annually at the beginning of the year to each family, so the parents can notify the school if their child's details have changed. (Proforma two.)

### **Asthma Medication**

- Parents of children diagnosed with Asthma should provide the school with the appropriate and adequate supply of medication required by the student on the school premises.
- The school first aid officer will notify the families when the asthma medication has expired or has a low supply.
- The school will supply asthma first aid kits for camp and excursions and ensure all staff have the knowledge to administer the medications to treat an asthma attack.

### **Treatment of an Asthma Attack**

- If a student develops signs of what appears to be an asthma attack, appropriate care must be given immediately. Regardless of whether an attack of asthma has been assessed as mild, moderate or severe treatment must commence immediately using the 4x4x4 national asthma guidelines.
- All students judged to be having a SEVERE ATTACK require medical assistance. Call 000 and continue to carry out the steps in the student's Asthma Management Plan until medical help arrives.
- If the student has **NO** Asthma Plan follow the 4 step Asthma plan (initiated by the national asthma council) displayed on the wall in the first aid room. Every staff member should become familiar with this. (Proforma three)

## **EMERGENCY TREATMENT OF AN ASTHMA ATTACK**

- Assess the severity of the attack:

**Mild:** Involves coughing, soft wheeze, minor difficulty in breathing and no difficulty speaking in sentences

**Moderate:** Involves persistent cough, loud wheeze, obvious difficulty in breathing & able to speak in short sentences only.

**Severe:** Student often very distressed, anxious, grasping for breath, unable to speak more than a few words with one breath, pale & sweaty & may have blue lips.

\* \* \* \*

- If not severe - treatment must still commence immediately. Consult our Asthma Register and follow the child's asthma management program.
- If severe, the child requires emergency medical assistance.
- Call an ambulance and carry out the steps below while waiting for the ambulance to arrive:

### **Steps to follow for an asthma attack:**

1. Follow an action plan available for that child.
  2. If no action plan is available -
    - (a) bronchodilator is to be given (i.e. Ventolin puffer with spacer)
    - (b) sit the student down, provide reassurance
    - (c) administer 4 puffs of bronchodilator via spacer according to the following
      - (i) shake asthma puffer, insert it into the spacer and fire 2 puffs in rapid succession into the spacer chamber
      - (ii) ask student to breathe in and out through mouth piece for 4 breaths
      - (iii) repeat immediately to administer 2 further puffs.
    - (d) wait 4 minutes, if no improvement repeat Step C above.
    - (e) if there is still no improvement immediately call an ambulance stating student is having an asthma attack
    - (f) repeat steps (c) & (d) continuously while waiting for ambulance to arrive
    - (g) contact student's parents/guardians.
- **Even if the student has a complete recovery from the asthma attack their parents/guardians must be notified of the incident**
  - **If a student suddenly collapses or appears to have difficulty breathing, and is not known to have pre-existing asthma: follow the steps above for a severe attack of asthma**

## **ASTHMA MANAGEMENT FOLDER.**

- The Asthma Management folder has now been compiled and is on the First Aid Officers desk. Please follow these procedures if a child presents to you with Asthma:
- Check the Asthma Management folder for the child's name. The class lists are at the front and the plans are filed alphabetically, so they should be easy to locate.
- Skim through for student's name on class checklist. If they have a tick on 3rd column, you know there is a regime to follow.

- If the child has a colored star next to their name, you know that the parent has supplied their own medication.
- Students own medication is kept in the sick bay on top of the cupboard. Each child's medication is in their own individual storage drawer. If shared by a sibling the eldest name is on the drawer
- If a child presents to us for asthma and there is no documentation, you need to have someone contact parents immediately. Use the school's Ventolin and spacer, following Asthma Victoria's asthma plan.

**Reviewed June 2020**