Asthma Card



Child's Name				Date of	f Birth		
Address						Postcode	
Parent/carer nam	ie						
Telephone		Telephone			Telepho	ne	
(home)		(work)			(mobile)	
Doctor's Name			Doctor's te	elephone	9		

Reliever treatment when	Dosage	Medicine	Expiry Date checked	Parent/Carer signature
needed. For wheeze, cough,	-			-
shortness of breath or				
sudden tightness in the				
chest, give or allow my child				
to take the medicines stated				
here. After treatment and as				
soon as they feel better they				
can return to normal activity.				

What signs can indicate that your child is having an asthma attack?	
Does your child tell you when he/she needs medicine?	🗆 Yes 🗆 No
Does your child need help taking his/her asthma medicine?	🗆 Yes 🗆 No
What are your child's triggers (things that make asthma worse)?	
Does your child need to take medicines before exercise or play?	🗆 Yes 🗆 No
Do you give permission for your child to use the emergency salbutamol inhaler in school? (see overleaf)	□ Yes □ No

Parent/Carer signature		Date				
This card is for use at Chadsmead Primary Academy. Review the card at least once a year and remember to update or exchange it for a new one if your child's treatment changes during the year. Medicines should be clearly labelled with your child's name and kept in agreement with the school's medical policy.						



Use of emergency salbutamol inhalers

From 1st October 2014 the Human Medicines Regulations will allow schools to buy salbutamol inhalers, without prescription, for use in emergencies. It is now school policy for emergency salbutamol inhalers to be made available.

The emergency salbutamol inhaler will only be used by children for whom written parental consent for use of the emergency inhaler has been given, who have either been diagnosed with asthma and prescribed an inhaler, or who have been prescribed an inhaler as reliever medication.

The inhaler will only be used if the pupil's prescribed inhaler is not available (e.g. because it is broken or empty).