

ASTHMA ACTION PLAN


**ASTHMA
AUSTRALIA**

VICTORIAN SCHOOLS

Student's name: _____

DOB: _____

Confirmed triggers: _____

PHOTO

- ☐ Child can self-administer if well enough
- ☐ Child needs to pre-medicate prior to exercise
- ☐ Face mask needed with spacer

ALWAYS give adrenaline autoinjector **FIRST**, and then asthma reliever puffer if someone with known asthma and allergy to food, insects or medication has **SUDDEN BREATHING DIFFICULTY** (including wheeze, persistent cough or hoarse voice) even if there are no skin symptoms.

Adrenaline autoinjector prescribed: ☐ Y ☐ N Type of adrenaline autoinjector: -

ASTHMA FIRST AID

For Severe or Life-Threatening signs and symptoms, call for emergency assistance immediately on Triple Zero "000"
Mild to moderate symptoms do not always present before severe or life-threatening symptoms

1. Sit the person upright
Stay with the person and be calm and reassuring
2. Give - separate puffs of Airomir, Asmol or Ventolin
Shake the puffer before each puff
Puff 1 puff into the spacer at a time
Take 4 breaths from spacer between each puff
3. Wait 4 minutes
If there is no improvement, repeat step 2
4. If there is still no improvement call emergency assistance
Dial Triple Zero "000"
Say 'ambulance' and that someone is having an asthma attack
Keep giving - puffs every 4 minutes until emergency assistance arrives

Commence CPR at any time if person is unresponsive and not breathing normally.

Blue/grey reliever medication is unlikely to harm, even if the person does not have asthma.

SIGNS AND SYMPTOMS

MILD TO MODERATE

- Minor difficulty breathing
- May have a cough
- May have a wheeze
- Other signs to look for:



SEVERE

- Cannot speak a full sentence
- Sitting hunched forward
- Tugging in of skin over chest/throat
- May have a cough or wheeze
- Obvious difficulty breathing
- Lethargic
- Sore tummy (young children)

LIFE-THREATENING

- Unable to speak or 1-2 words
- Collapsed/exhausted
- Gasping for breath
- May no longer have a cough or wheeze
- Drowsy/confused/unconscious
- Skin discolouration (blue lips)

Emergency contact name: _____

Plan prepared by Dr or Nurse Practitioner: _____

Work ph: _____

Signed: I hereby authorise medications specified on this plan to be administered according to the plan

Home ph: _____

Date prepared: _____

Mobile ph: _____

Date of next review: _____



- Assemble spacer.
- Remove cap from puffer.
- Shake puffer well.
- Attach puffer to end of spacer.

- Place mouthpiece of spacer in mouth and ensure lips seal around it.
- Breathe out gently into the spacer.
- Press down on puffer canister once to fire medication into spacer.
- Breathe in and out normally for 4 breaths (keeping your mouth on the spacer).