



Andergrove State School

STUDENT ASTHMA RECORD CARD

Every student with asthma should have the following standard record filled out by parents in consultation with the family doctor.

Student's Name: _____ D.of.B.: _____ Class: _____

Severity of asthma (please circle): Mild Moderate Severe

Trigger Factor/s:

1. Normal maintenance treatment taken when well and usual inhalation device (puffer):

2. Medications to be used when asthma symptoms develop, with actions to be followed as advised by student's doctor.

Signature of Parent/Guardian: _____ Date: _____

(In an emergency, school staff will follow first-aid procedures.)

"Linking Learning to Life"

D:\jmor183\Desktop\Student Asthma Record Card.doc

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