

# AMERICAN LEADERSHIP ACADEMY

## INDIVIDUALIZED ASTHMA EMERGENCY CARE PLAN FOR THE BUS DRIVER

ALA CAMPUS: \_\_\_\_\_ School Year: 20\_\_\_\_/20\_\_\_\_

STUDENT NAME: \_\_\_\_\_ CARRIES INHALER: \_\_\_ YES \_\_\_ NO

BUS# \_\_\_\_\_ ROUTE# \_\_\_\_\_ GRADE: \_\_\_\_\_ TEACHER: \_\_\_\_\_

PARENT/GUARDIAN NAME: \_\_\_\_\_

PHONE #: \_\_\_\_\_ CELL: \_\_\_\_\_

### PRESENTING PROBLEM INFORMATION:

#### ASTHMA – TROUBLE BREATHING - WHEEZING

#### EMERGENCY PLAN:

1. STOP the bus.
2. Call 911 if student's condition is getting worse and you are unsure of what to do.
3. Call 911 if student can't count to 10 without taking a breath or is breathing more than 30 times a minute.
4. Report incident to school and/or parent.