

Asthma Visit Checklist for the Provider

Control ☐ Establish the patient's and family's concerns, goals and needs ☐ Update asthma history and level of control from prior year ☐ How has asthma affected the child's activity level, attendance and school performance? ☐ Assess asthma severity and current level of asthma control ☐ Identify barriers to medication adherence
Rescue
☐ Does the patient/family understand the AAP and how to track their symptoms?
 Have they recognized changes over certain times of the year?
☐ Discuss when and how frequently relievers should be used
o Routinely or only for certain activities such as exercise?
☐ Establish good inhaler technique with a spacer
☐ Evaluate/discuss child's readiness to self-carry asthma medication
Establish barriers at school to self- carry and administer medications Propose colutions if barriers identified.
 ○ Propose solutions if barriers identified □ Identify the resources at school to support a child with asthma:
o If known, document the name, contact information and school resource person
responsible for dealing with an asthma flare
☐ Is there an emergency plan in place to manage severe asthma exacerbations?
School and Environment
☐ Identify asthma triggers and potential exposures at school (pets, irritants, allergens)
☐ Encourage parents to meet with the school nurse and discuss child's asthma management
☐ Identify barriers to the child seeking help with asthma management at school
☐ Consider establishing direct communication with the school nurse, especially for poorly
controlled or non-adherent asthmatics
Farmer and Consultat
Forms and Supplies ☐ Transmit Asthma Action Plan and medication authorization form
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information
☐ Transmit authorization to have medication administered and self-carried at school
Provide/prescribe for school:
Additional quick relief inhaler
☐ Valved-holding device (spacer) for school use.

