

This guide must be read alongside the *Medical Condition and Administration of Medication Procedures*.

What is Asthma?

Asthma is a medical condition that affects the breathing tubes within the lungs. Asthma triggers may include exercise, cigarette smoke, colds, flu, thunderstorms* and allergens (e.g. grass pollen). Symptoms include wheezing (a high-pitched sound coming from the chest while breathing), a feeling of not being able to get enough air or being short of breath, a feeling of tightness in the chest and coughing

Parent responsibilities

- Provide a current Medical Management Plan (/Asthma Action Plan) that details:
 - Current child photograph
 - Prescribed medications
 - Possible signs and symptoms
 - Possible triggers (if known)
 - First aid actions
 - The name and signature (and date) of authorising doctor
- Supply child's medication and spacer (and mask if used) daily.

Educator responsibilities

- All staff must maintain first aid qualifications, including emergency management of Asthma.
- Centre Director / educators must implement all *Medical Condition and Administration of Medication Procedural* responsibilities and tasks.
- Store medication (and spacer if applicable):
 - in a clean environment (e.g. replace the cap of the inhaler after each use, place equipment in zip-lock bag / plastic container)
 - Out of direct sunlight or heat
 - Not in the refrigerator
- During a storm, stay inside, with window and doors shut. Closely observe children for Asthma signs and symptoms.



How to use an inhaler

With a spacer

- Assemble spacer (attach mask if under 4yrs).
- Remove cap and shake well.
- Insert puffer upright into spacer.
- Place mouthpiece between teeth and seal lips around it OR place mask over child's mouth and nose forming a good seal.
- Press once firmly on puffer to fire one puff into spacer.
- Encourage child to take 4-8 breaths in and out of spacer.
- Repeat 1 puff at a time until 4 puffs are taken, shaking the puffer before each puff.
- Replace cap.



Without a spacer

- Remove puffer cap and shake well.
- Place mouthpiece between child's teeth and seal lips around it.

- Ask child to take slow, deep breath.
- Press once firmly on puffer while child breathes in.
- Encourage child to hold breath for at least 4 seconds, then breath out slowly away from puffer
- Repeat 1 puff at a time until 4 puffs are taken, shaking the puffer before each puff.
- Replace cap.

Asthma First Aid

In the event of an acute asthma emergency, follow the child's medical management plan.

Not sure if it is asthma? If a child remains conscious and is struggling to breathe, follow the below first aid steps. Asthma reliever medication is unlikely to harm, even if the child does not have Asthma.

Sit the child upright. Be calm and reassuring.

Do not leave the child alone.

Give 4 reliever puffs via spacer. Give 1 puff at a time with four 4 breaths after each puff.

Wait 4 minutes. If the child still cannot breathe normally, give 4 more puffs (1 puff at a time using a spacer).

Acute Asthma Emergency - Call 000 if the child has any of these danger signs

- Severe breathing problems, i.e. you can see the muscles on the neck and chest working harder to suck in air
- Symptoms get worse very quickly
- Reliever has little or no effect
- Difficulty saying sentences
- Blue lips
- Drowsiness
- Say to the 000 operator that you believe the child is having an Asthma Attack.
- If the child is Asthmatic, refer to Medical Management Plan. If undiagnosed and parent written authorisation to administer emergency medication has not been provided, advise the 000 operator and follow their instructions.
- Continue to administer reliever - 4 puffs every 4 minutes until the ambulance arrives.

****** Important ******

A child with diagnosed Asthma cannot commence enrolment until:

- Centre has a current medical management plan that has been prepared and authorised (date and signed) by a doctor.
- A risk minimisation plan has been developed, documented. *Risk Minimisation Plan Template – Asthma* is available in the policy library
- A communication plan has been implemented and documented to ensure all staff are aware of child's medical condition, risk minimisation plan and health needs.

References

- National Asthma Council Australia (2019) - [My Asthma Guide](#).