



Health Management Plan

Asthma

September 2016

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1. Asthma – What is It?

Asthma is a serious chronic condition characterized by recurrent attacks of difficult or laboured breathing.

The Grand Erie District School Board recognizes that some students within the school system have been diagnosed with asthma and without proper management this condition can be life threatening.

While it cannot guarantee an environment free of agents that can trigger asthma, Grand Erie school staff shall make every reasonable effort to:

- reduce the risk of exposure to asthma triggers in classrooms and common school areas;
- ensure access to necessary asthma medications (i.e. student will carry medication);
- ensure that school personnel are aware of which students within the school population have been diagnosed with this condition; and
- outline the procedures necessary to intervene and respond in the event of an asthma emergency.

In order for school personnel to respond appropriately, it is crucial for the parent/guardian (adult student) to keep the school principal/designate fully informed of the student's asthma and the medication(s) which have been prescribed to address the condition

2. Ryan's Law – Ensuring Asthma Friendly Schools

In accordance with Ryan's Law – Ensuring Asthma Friendly Schools, the Grand Erie District School Board is required to establish and maintain a policy for students diagnosed with asthma, as well as provide training for all staff on asthma management. The safety of students with a medical condition such as asthma is a shared responsibility of the board, school, family, health care provider and community partners.

With respect to the administration of emergency medication at the time of an asthma emergency, "*Ryan's Law – Ensuring Asthma Friendly Schools*" is very clear:

- "If an employee has reason to believe that a pupil is experiencing an asthma exacerbation, the employee may administer asthma medication to the pupil for the treatment of the exacerbation, even if there is no preauthorization to do so under subsection (1).: 2013, s. 3 (3)
- "No action or other proceeding for damages shall be commenced against an employee for an act or omission done or omitted by the employee in good faith in the execution or intended execution of any duty or power under this Act" 2013, s. 3 (4).

RESPONSIBILITY CHECKLIST

Ensuring the safety of asthmatic children in a school setting depends on the co-operation of the entire school community. To minimize risk of exposure , and to ensure rapid response to emergency, parents, students and school personnel must all understand and fulfill their responsibilities.

1.0 Role of the **PARENT/GUARDIAN OR ADULT STUDENT**

The parent/guardian of the student or an adult student who has been diagnosed with asthma is expected to:

- inform the school principal/designate of the student's asthma at the beginning of each school year regardless of whether or not the student is new;
- inform the school principal/designate of any changes to the asthma and/or medication that will affect their school routine, performance or ability to participate in school activities;
- inform a new school of their medical needs, if the student transfers to another school within the Board's jurisdiction;
- complete SO102 Request for School Assistance in Health Care (<http://bit.ly/2bEmUMz>) on an annual basis;
- provide a minimum of one (1) up-to-date medication package (Reliever Inhaler) properly marked with child's name and expiry date;
- provide up-to-date emergency contact names and telephone numbers;
- provide a Medic Alert™ bracelet or equivalent for their child (The form can be obtained by calling 1-800-668-1507);
 - Partner with school staff members to complete the Student Support Plan for School – Asthma and Student Support Plan for Transportation – Asthma for their child.
- In collaboration with their health care provider teach their child to:
 - be able to recognize symptoms of worsening asthma including those related to exercise
 - communicate to an adult about asthma symptoms and the need for help
 - access and use medication quickly and correctly
 - have a Reliever Inhaler handy at all times, either on his/her person or in a safe location nearby
 - be prepared for school field trips.

2.0 Role of the **STUDENT** with Asthma

Dependent on the physical and cognitive capabilities of the student and the informed consent of the parent/guardian, the student with asthma has the responsibility to:

- tell teachers, educational assistants, school principal and friends about her/his asthma;
- tell occasional personnel (i.e. occasional teachers, occasional educational assistants, lunch room monitors/supervisors, crossing guards, school bus drivers, volunteers) about her/his asthma;
- carry a Reliever Inhaler on her/his person at all times OR tell teachers, educational assistants, school principal where to locate her/his Reliever Inhaler;
- follow the instructions of her/his physician and parent/guardian;
- know how and when to use asthma medication safely, including -
- making sure their name is on the medication container
- not sharing medications with friends
 - knowing when medication is empty
 - telling parents and teachers every time medication is used
 - telling a teacher if help is required to take medication
 - wear a Medic Alert™ bracelet or equivalent, when provided by the parent;
 - know what triggers asthma and makes it worse and have a plan for handling asthma triggers;
 - telling teachers when asthma is bothering her/him;
 - learning more about asthma by –
- attending asthma education programs
 - seeing health care provider on a regular basis
 - visiting websites www.asthma-kids.com or www.puffr.ca.

3.0 Role of the **SCHOOL ADMINISTRATOR (PRINCIPAL)/Designate**

3.1 Registration

- At the time of the registration of each new student, the school principal/designate shall record, when notified, that a student has asthma in the medical information section in the student information system.
- At the beginning of each school year, the school principal/designate shall update the medical information of each student enrolled in the school to determine if new medical conditions have developed and/or if existing medical conditions have changed.

3.2 Authorization

When the school principal/designate is informed by the parent/guardian/adult student that a student within the school has been diagnosed with asthma and may require the administration of asthma medication, the school principal/designate shall:

- request that the parent/guardian/adult student return a completed SO102 Request for School Assistance in Health Care (<http://bit.ly/2bEmUMz>)
- If the physician authorization form indicates that the student requires the administration of asthma medication during the school day, the school principal/designate shall:
- obtain a minimum of one (1) Reliever Inhaler from the parent/guardian (adult student);
- ensure that the medication is already labelled to indicate the name of the student, the name of the medication and the expiry date;
- with parent/guardian consent, arrange to have one (1) Reliever Inhaler on the student's person (e.g. in a fanny pack) at all times;
 - if necessary arrange to have a second Reliever Inhaler in a safe, secure location (e.g. main office) or if the student does not have the medication on her/his person, in the classroom;
 - ensure that any medication which has reached its expiry date is returned to the parent/guardian (adult student) and replaced by up-to-date medication.

3.3 Staff Education

Online asthma education sessions will be provided for all staff members. In schools this will include school principal, school vice-principal(s), department heads, guidance counsellors, resource teachers, classroom/subject teachers, occasional teachers, designated early childhood educators, occasional designated early childhood educators, educational assistants, occasional educational assistants, school secretaries, lunch room monitors and lunch room supervisors. Education sessions will include information about asthma, the safe, effective use of the Reliever Inhaler, and a review of a general Asthma Management Plan. A record shall be kept of all individuals who successfully complete the training program.

When the school principal/designate is informed by the parent/guardian/adult student that a student enrolled at the school has asthma a completed SO102 Request for School Assistance in Health Care (<http://bit.ly/2bEmUMz>) has been received, the school principal/designate shall:

- identify the student to all staff members of the school as a student with asthma;
- arrange for the completion of the Student Support Plan for School - Asthma and Student Support Plan for Transportation - Asthma

- The Student Support Plan for School - Asthma shall be available in key locations around the school including the Main Office, and other locations accessible to staff only. A copy of the Student Support Plan for Transportation – Asthma shall also be made available to the student’s regular or field trip school bus driver
- The plan will be reviewed on an annual basis or as needed.

3.4 Filing in the Ontario Student Record (OSR)

After the Student Support Plan for School – Asthma and the Student Support Plan for Transportation – Asthma has been developed, the school principal/designate shall file both documents, as well as a completed SO102 Request for School Assistance in Health Care (<http://bit.ly/2bEmUMz>) in the “CONSENT FORMS (dark green)” section of the OSR

3.5 Documentation

The school principal/designate shall ensure that each time a staff person assists a student with the administration of the Reliever Inhaler the incident will be recorded on the Student Medication Record (see SO 102 Request for School Assistance in Health Care <http://bit.ly/2bEmUMz>).

3.6 Prevention

The school principal/designate shall take steps to create a supportive, safe environment for students with asthma, including:

- ensuring staff members complete online training regarding asthma management in schools
- facilitating the use of asthma friendly school supplies and products such as scent-free markers and cleaning products, dust free chalk, etc., when possible;
- scheduling extensive building repairs or cleaning at times that reduce the possibility of exposing students and staff to dust, fumes and other irritants, when possible;
- monitoring for asthma triggers on an ongoing basis and taking action to reduce exposure to asthma triggers whenever possible:
 - refer to student’s Asthma Trigger Checklist (SO102 Request for School Assistance in Health Care <http://bit.ly/2bEmUMz>)
 - refer to Health Canada’s Indoor Air Quality (IAQ) Tools for Schools http://www.hc-sc.gc.ca/ewh-semt/pubs/air/tools_school-outils_ecoles/index-eng.php
 - providing asthma resources for the school office and school library
 - creating and supporting the expectation that students with asthma should be participating in physical activities to the best of their abilities, including recess and physical education;
- ensuring that when a student with asthma is involved in an out-of-school learning experience, that the Student Support Plan for School - Asthma is taken on the outing, the student has a Reliever Inhaler on her/his person and that the supervising teacher has a second Reliever Inhaler if possible, as well as a cell phone to be used in emergency situations.

4.0 Role of the **SCHOOL STAFF**

- When the school principal/designate is informed by the parent/guardian (adult student) that a student within the school has asthma and the parent/guardian/adult student has authorized the administration of a Reliever Inhaler by the completion of SO102 paperwork (<http://bit.ly/2bEmUMz>) during an asthma episode, whether the student does or does not require assistance from staff, all school staff, shall participate in the staff education session. (3.3)
- The staff shall remain vigilant concerning circumstances or events which may constitute a situation for students at risk to experience an asthma episode and shall report these to the school principal / designate.

- When a student experiences an asthma episode the staff member(s) who recognizes the warning signs/symptoms shall respond and ensure the Reliever Inhaler is administered immediately and shall inform the school administrator/designate and parent/guardian
- If there is no improvement within 5-10 minutes after taking the Reliever Inhaler staff member will follow the Emergency 911 Protocol (Appendix H)
- After the medication has been administered, the staff member(s) shall record the incident in the Student Medication Record see SO 102 Request for School Assistance in Health Care <http://bit.ly/2bEmUMz>;

5.0 Role of the **CLASSROOM/SUBJECT TEACHER**

- ensure the student with asthma has access to their Reliever Inhaler when needed to relieve symptoms and/or before exercise, if indicated;
- ensure that the identified student is carrying a Reliever Inhaler on her/his person during all out-of-school learning experiences;
- ensure that an additional Reliever Inhaler (if available) and a cell phone are available during all out-of-school learning experiences;
- review with the class(es) the steps to take if someone is experiencing worsening asthma if appropriate;
- monitor the presence of materials within the classroom setting which may trigger an asthmatic reaction in the identified student;
- take action to reduce student's exposure to asthma triggers whenever possible, e.g. chalk dust, freshly cut grass, furry animals, pollen, poor air quality, strong smelling markers, very cold or very hot temperatures and viral infections (encourage frequent hand washing to decrease spread of infection);
- use preventive measures to allow participation in exercise and/or physical activity including a warm-up period, use of Reliever Inhaler 10-15 minutes prior to the activity (if indicated on Student Support Plan for School - Asthma) and understand how to handle symptoms associated with exercise.

6.0 Role of the **SCHOOL SECRETARY**

The school secretary is expected to record the presence of the student's health condition in Student Information System and follow the Emergency 911 Protocol (Appendix H) at the time of an asthma emergency.

7.0 Role of **OTHER PARENTS/GUARDIANS** and **SCHOOL VOLUNTEERS**

Parents/guardians and volunteers within the school community have the responsibility to:

- be aware of and comply with the Asthma Management Plan; assist the school principal and the staff of the school in disseminating information to all members of the community

SCHOOL ASTHMA EMERGENCY RESPONSE PLAN

SIGNS & SYMPTOMS	
MILD	SEVERE
<ul style="list-style-type: none"> • Coughing (a constant cough may be the only warning sign and should be treated) • Breathing is difficult and fast • Complaining of chest tightness (child will describe this symptom in all sorts of ways) • Wheezing (a high pitched musical sound when breathing) • Restlessness • Irritability • Tiredness 	<p>Any of the following may be observed</p> <ul style="list-style-type: none"> • Unable to catch their breath • Breathing is difficult and fast (x25 inspirations/min) • Ribs show during breathing (the skin between the neck and ribs is sucked in with each breath) • Not improving after taking reliever inhaler within 5-10 minutes • Can only say 3-5 words before needing to take another breath • Lips or nail beds blue or grey • You have ANY doubts about the child's condition
WHAT TO DO	
<ol style="list-style-type: none"> 1 Administer the reliever inhaler immediately <ul style="list-style-type: none"> • (the inhaler is usually blue in colour and opens the narrowed airway passages quickly) 2 Stay calm! Remain with and reassure the child <ul style="list-style-type: none"> • Asthma episodes are frightening...listen to what the child is saying 3 Tell the child to breathe slowly <ul style="list-style-type: none"> • Usually it is easier to sit up and lean slightly forward. • Lying on their back is not recommended! • <u>Do not</u> have child breathe into a paper bag. 4 Reliever inhaler should help within 5-10 minutes...if not: FOLLOW THE EMERGENCY INSTRUCTIONS FOR SEVERE EPISODES 	<ol style="list-style-type: none"> 1 This is an emergency CALL 911 2 Give reliever inhaler immediately. 3 Notify Parent / Guardian. 4 Continue to give the reliever inhaler every few minutes until help arrives. 5 A student should always be taken to the hospital in an ambulance. School Staff should not take the student in their car as the student's condition may deteriorate quickly. <p><i>Information adapted from The Lung Association's Poster "My Child is Having an Asthma Episode: What are the Signs?"</i></p>
AFTER THE EPISODE	
<ul style="list-style-type: none"> • Notify parent/guardian about the episode. • Minor asthma episodes should not interrupt a child's movement in school. As soon as the child feels better, s/he can return to normal activities. • If the child requires the inhaler again in less than four hours or if you have any concerns about the child's condition, medical attention should be sought. 	<ul style="list-style-type: none"> • Record medication taken as per board policy. • Record activities to assist student.

STUDENT SUPPORT PLAN – SCHOOL PAGE 1 OF 2



Grand Erie District School Board
 349 Erie Avenue, Brantford, Ontario N3T 5V3

Student Support Plan - School

Name	OEN	Board Id #	Grade
School	Family		Gender
Principal			DOB

Student Information

Parent/Guardian Information

Address

Name & Address

Home Telephone

Home Telephone

Date Of Development

Other Support Staff:

Agency Involvement:

Primary Medical Concern:

Insert Student Picture

Triggers:

Other Relevant Information (e.g. signs, precursors, etc.)

Immediate Communication

Immediate Actions:


SUMMARY OF INTERVENTION

Action To Be Taken

Taken By

Time Line

STUDENT SUPPORT PLAN – SCHOOL PAGE 2 OF 2



Grand Erie District School Board
349 Erie Avenue, Brantford, Ontario N3T 5V3

SUMMARY OF INTERVENTION

Action To Be Taken	Taken By	Time Line

Signing this form indicates we have read and agree to this Student Support Plan

Date:	Date:
Principal's Signature	Parent/Guardian Signature

STUDENT SUPPORT PLAN FOR SCHOOL – ASTHMA EXAMPLE Page 1 of 2



Grand Erie District School Board
349 Erie Avenue, Brantford, Ontario N3T 5V3

Student Support Plan - School

Name	Last Name, First Name	OEN	111222333	Board Id #	178482329	Grade	G
School	School Name	Family	Spec Ed Family			Gender	M/F
Principal	Principal Name					DOB	dd-mmm-yyyy

Student Information		Parent/Guardian Information	
Address	Street Address City	Name & Address	Parent/Guardian Name Street Address City, Postal Code
Home Telephone	5195555555	Home Telephone	(519) 555-5555

Date Of Development 12-Nov-2015

Other Support Staff:	Agency Involvement:
----------------------	---------------------

Primary Medical Concern:

Asthma

Triggers:

Colds/viruses, weather conditions, strong smells, animals, allergies

Other Relevant Information (e.g. signs, precursors, etc.)

continuous coughing, complaints of chest tightness, difficulty breathing, wheezing, restlessness, irritability, tiredness, unable to catch breath, difficulty speaking a few words, lips or nail-bed blue or grey, breathing is difficult and fast.

Reliever is used to: relieve symptoms, prevent exercise induced asthma (given 10-15 minutes prior to activity)

Location of reliever inhaler: student carries own inhaler, stored in classroom (specify location:)

Can student self-administer: Yes - No, needs assistance

Immediate Communication:

Assigned teacher communicates with main office, to the attention of the Principal or Principal's designate that student is having asthma attack.

Immediate Actions:

1. Staff present at the onset of asthma attack will initiate the asthma protocol.
2. Medication: Reliever/Rescue Inhaler - use reliever (name of medication) in the dose of (# puffs/doses)

Insert Student Picture

SUMMARY OF INTERVENTION

Action To Be Taken	Taken By	Time Line
Remain Calm	All Staff, All Students	

STUDENT SUPPORT PLAN FOR SCHOOL – ASTHMA EXAMPLE

Page 2 of 2




Grand Erie District School Board
 349 Erie Avenue, Brantford, Ontario N3T 5V3

Communication with Principal or Principal's Designate	Assigned Teacher	Immediately
Principal or Principal's Designate attends the classroom to assess and coordinate supports required	Principal or Principal's Designate	Immediately
Available Staff called to support Student during Asthma Attack	Principal or Principal's Designate	Immediately
Administer the reliever inhaler	Staff responding	Immediately
Tell the student to breathe slowly & deeply	Staff responding	Throughout
Notify parent/guardian of episode	Assigned Teacher/Principal or Principal's Designate	As soon as possible
Student can resume normal activities once feeling better. If the student requires reliever inhaler in less than 4 hours, medical attention should be sought	Staff responding	
If there is no improvement in 5 to 10 minutes treat as an emergency and call 911	Staff responding	Immediately
Administer reliever inhaler again and continue to administer every few minutes until help arrives	Staff responding	Immediately
One staff member will travel with Student in the AMBULANCE	Staff member who has been with him/her since the outset of the attack	When ambulance arrives

Signing this form indicates we have read and agree to this Student Support Plan

Date:	Date:
Principal's Signature	Parent/Guardian Signature

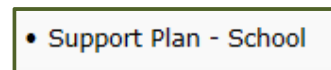
STUDENT SUPPORT PLAN FOR TRANSPORTATION – ASTHMA EXAMPLE

		Grand Erie District School Board 349 Erie Avenue, Brantford, Ontario N3T 5V3			
Student Support Plan - Transportation					
Name	Last Name, First Name	OEN	111222333	Board Id #	111222333
School	School Name	Family	Spec Ed TC Name	Grade	G
Principal	Principal Name			Gender	F/M
				DOB	dd-mmm-yyyy
Student Information			Parent/Guardian Information		
Address	Street Address City	Name & Address	Parent/Guardian Name Street Address City, Postal Code		
Home Telephone	5195555555	Home Telephone	(519) 555-5555		
Date Of Development 11-Feb-2016					
Other Support Staff:		Agency Involvement:			
Primary Medical Concern: All information entered in this field on the Student Support Plan School will appear here on the Student Support Plan Transportation.					
Triggers: All information entered in this field on the Student Support Plan School will appear here on the Student Support Plan Transportation.					
Other Relevant Information (e.g. signs, precursors, etc.): Enter all other relevant information.					
Immediate Communication: Bus Driver contacts the Bus Line dispatch immediately to indicate the location of the incident and to request that emergency services be dispatched immediately.					
Immediate Actions: In the event of a problem during his/her travel on a school bus the bus driver will stop the vehicle and ensure that it is completely immobilized. Driver will assess the situation. Bus Driver will be attentive to student while awaiting the emergency services.					
SUMMARY OF INTERVENTION					
Action To Be Taken		Taken By		Time Line	
The student's parent or guardian must have completed and signed SO102 - Request for School Assistance in Health Care, which must be signed by a doctor and given to the school.		Parent			
Bus Driver, Dispatcher and School Principal will follow STSBHN Emergency Procedure guidelines.		Bus Driver, Bus Operator, School Principal		Immediately	
Signing this form indicates we have read and agree to this Student Support Plan					
Date:		Date:			
Principal's Signature		Parent/Guardian Signature			

LITE – STUDENT SUPPORT and TRANSPORTATION PLANS

Page 1 of 4

1. Select *SSTP* (Student Support & Transportation Plans) from the tabs across the top of the screen. From the *SSTP* tab menu select Support Plan – School.



2. Select your *School*; enter the first couple of letters of the student's last name and then select *Find*. Choose the student from the drop down list.

 A yellow search bar with four input fields: "School" (with a dropdown arrow), "Id #" (with a dropdown arrow), "Last Name" (with a dropdown arrow), and "Student List" (with a dropdown arrow). A "Find" button is on the right.

3. In the Plan Dates field select Create New Plan. A *Calendar* box adjacent to Date of Development will be accessible. Once a date is selected the *Create* button is accessible. That date will now appear in your Plan Dates box.



Calendar Box

A new Support Plan should be created yearly, an existing plan can be modified during the school year by selecting the date of the plan.

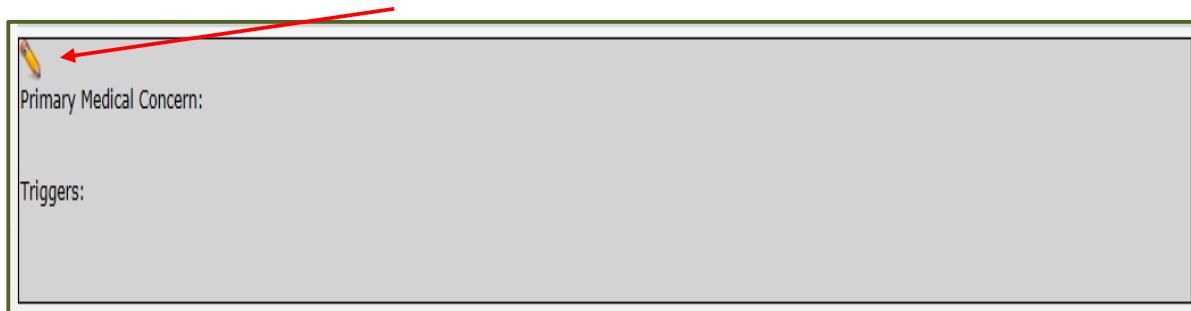
 A form titled "Student Support Plan - School". It has fields for Name, School, Principal, OEN, Family, Board Id #, Grade, Gender, and DOB. Below these are sections for Student Information (Address, Home Telephone) and Parent/Guardian Information (Name & Address, Home Telephone). At the bottom, there is a "Plan Dates" field with a dropdown arrow showing "28-Jan-2016", a "Date Of Development" field with a dropdown arrow, and a "Create" button.

4. Enter the support staff that is available for the student and enter any agencies that are involved with the student, if applicable.

 A form with two sections: "Other Support Staff:" and "Agency Involvement:". Each section has a dropdown arrow and a text input field.

LITE – Student Support Plans –School/Transportation Page 2 of 4

- To record information in the *Primary Medical Concern* and *Triggers* field select the Pencil icon. All information entered in this field will also appear on the Student Support Plan – Transportation if transportation plan is also required. This eliminates the need to re-enter the same information on both forms. If during the school year the information entered in Primary Medical Concern and Triggers needs to be updated, entering the data on either the School or Transportation Support Plan automatically updates the other plan with the entered information.



Primary Medical Concern:

Triggers:

- Record Other Relevant Information (e.g. signs, precursors, etc.), Immediate Communication and Immediate Actions.

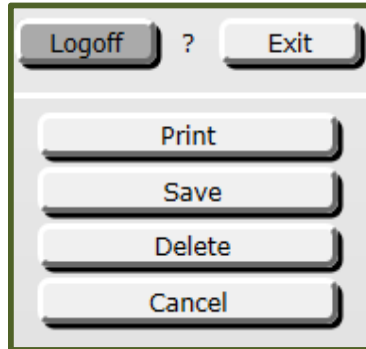
Other Relevant Information (e.g. signs, precursors, etc.)	Insert Student Picture
Immediate Communication:	
Immediate Actions:	

- Enter a summary of the actions that need to be taken, in sequence, during an episode. If additional lines to your SUMMARY OF INTERVENTION are required select the save button, and a new line will be inserted.

SUMMARY OF INTERVENTION		
Action To Be Taken	Taken By	Time Line

LITE – Student Support Plans –School/Transportation Page 3 of 4

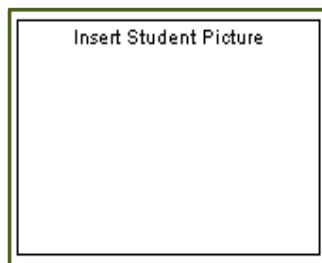
8. Select Save from the left navigation bar.



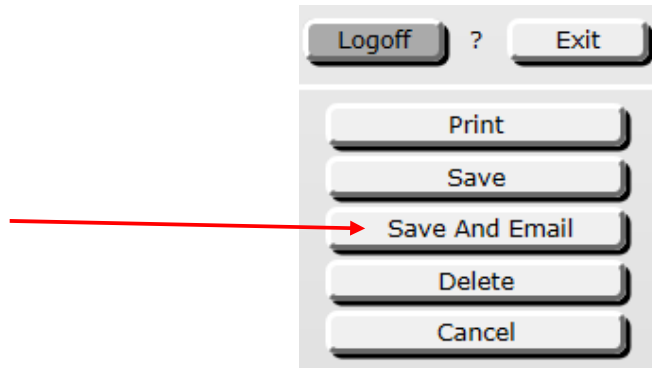
9. Print a copy of this form and have the parent/guardian sign.

Signing this form indicates we have read and agree to this Student Support Plan	
Date:	Date:
Principal's Signature	Parent/Guardian Signature

10. Once saved (as a PDF), an area is provided for insertion of the student's picture if required.



11. Access and generation of the Student Support Plan – Transportation is the same as above with the exception that there is a Save and Email button. Select Save if the form is only partially completed; once completed select Save and Email. A copy of this form is automatically sent to the Transportation Department so that they may inform the Transportation Provider.



12. The Student Support Plans (Transportation and School) follow the student if they change schools and is therefore accessible to their new school within our Board.

CONSENT – SO 102 REQUEST FOR SCHOOL ASSISTANCE IN HEALTH CARE

Please refer to Procedure SO102 – Request for School Assistance in Health Care which shall be implemented to document physician directives and parental consent in regards to administration of prescribed medications.

<http://bit.ly/2bEmUMz>

File completed SO102 in the “CONSENT FORMS” (dark green) file in the Ontario Student Record (OSR).

9-1-1 Asthma Script Protocol
TO BE POSTED BY TELEPHONE

1. This is _____School.
Address is:_____
Nearest Major Intersection is:_____
Telephone Number is:_____
2. We have a student who is having an asthma emergency. We have administered a Reliever Inhaler. There has been no improvement in their breathing. We need an ambulance IMMEDIATELY.
3. The closest entrance for the ambulance is on:
_____Ave. / Road / Street.
4. A staff member will be outside the school entrance to provide direction.
5. Do you need any more information?
6. How long will it take you to get here?
7. Call parent / guardian / emergency contact.

IMPORTANT MEDICAL INFORMATION REQUIRED FOR ALL STUDENTS:

For the safety of your child, it is imperative that we are aware of all students in the building that have serious medical conditions. We need to be able to let each teacher know if any of their students have conditions that could be life-threatening.

Please complete the following form so that we can ensure that our records are up to date.

Name of Student: _____

<i>MEDICAL CONDITION</i>	<i>This student HAS experienced an attack/reaction in the past</i>	<i>This student carries medication for this condition</i>	<i>Notes/Other: (type of medication, where stored)</i>
Anaphylaxis (Sabrina's Law)	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	
Asthma (Ryan's Law)	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	
Diabetes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	
Epilepsy	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	
Heart Condition	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	
Concussion	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	
Other:			

Any other medical notes should be included on the registration form (i.e. non-anaphylactic allergies) in the appropriate section. Please keep us informed of any changes in your child's critical medical conditions by contacting the school at (_____).

Signature of Parent/Guardian or Student 18+ years

Date



NOTICE: Authorization for the collection and maintenance of the personal information recorded on this form is the Education act, R.S.O. 1980, S.265(d) and S.266 and Municipal Freedom of Information and Protection of Privacy Act. Users of this information are supervisory officers, principals, and teachers at the school. Any questions regarding the collection of personal information should be directed to the principal of the school.

STEPS TO IDENTIFYING AN ASTHMATIC STUDENT IN THE STUDENT INFORMATION SYSTEM

Setting the Critical Medical Condition Symbol in Power School

1. Start Page
2. Select Student
3. Select Either Registration Form OR Emergency Contact / Medical

Anaphylactic Shock Condition Alert	()
Critical Medical Condition Alert	()
Student has suffered a concussion and is on a Return to Learn/Return to Physical Activity plan	()
Critical Medical Notes	
Other Medical Notes	

4. Check "Critical Medical Condition Alert"
5. Check "Student has suffered a concussion...", if applicable.
6. Enter student's medical / health information in the "Critical Medical Notes" field
(Note: information **must** be in this field to generate the alert symbol).
7. Click Submit.
8. A Critical Medical Alert symbol  will appear next to student's name.
9. A Concussion Alert symbol  will appear next to the student's name if this field was indicated as applicable.

Entering information in the "Other Medical Notes" field for non-life-threatening conditions will not generate the Critical Medical Condition Alert.

For more information, refer to Section 6.09 of the Power School OnSIS Instruction Manual:
<http://geportal.granderie.ca/linksandresources/powerschoolmanual/Pages/default.aspx>