



SAINT ROSE *of* LIMA
CATHOLIC SCHOOL
PRAYER | STUDY | COMMUNITY | SERVICE

St. Rose of Lima School
Nurse's Office

Asthma Requirements Overview

Required forms can be downloaded via the links in blue below.

1. **[Asthma Treatment Plan:](#)**

Fill out completely with medications needed, triggers, minor section regarding ability to self-medicate, and parent and physician signatures.

2. **[School Asthma Record:](#)** *(For New Students Only)*

Parents, please fill out in its entirety so we have information on your child's condition. Please return immediately.

3. **Inhaler**

If applicable, please send inhaler into school, in original, current pharmacy box with pharmacy label.

4. **Nebulizer Accessories & Medication**

If applicable please send Nebulizer tubing, mouthpiece/mask, and medication (in current prescription box) into school. The school has a nebulizer for students to use.