

# Parenting Tips for Managing Asthma in the Child Care Setting

## Have a plan

- Talk to your child's **health care provider** about managing your child's asthma in the child care setting. Ask your health care provider for an **asthma treatment plan**.
- Discuss your child's **triggers** and how they can be managed with your child's health care provider. Check off the appropriate triggers on the **asthma treatment plan** together.
- Make sure your **child care provider** knows your child has asthma. Give a copy of your child's **asthma treatment plan** to the child care provider.
- Keep a copy of the **asthma treatment plan** for your family for managing asthma at home



For a copy of the Pediatric/Adult Asthma Coalition of New Jersey (PACNJ) **Asthma Treatment Plan** and **Patient/Parent Instructions** for completing the plan with your health care provider, click here: <http://www.pacnj.org/plan.html>

## Talk with your child care provider every day

For the health and safety of your child with asthma, it is best to talk with your child care provider when **dropping off** and **picking up your child**. Discuss any changes in your child's:

- Medications
- Asthma symptoms
- Triggers
- Physical or emotional condition

For a sample of a daily reporting form to note in writing the changes you want to discuss with the child care provider visit the PACNJ website at <http://www.pacnj.org/DailyAsthma-AllergyCommunicationEnglishandSpanish.pdf>

## Send your child to child care when asthma is under control

Your child's asthma is well managed when she/he:

- Participates in all activities,
- Sleeps comfortably at naptime and at night without coughing,
- Has minimal side effects from medications,
- Uses a reliever medication no more than 2 times per week and
- Has no hospitalizations or emergency room visits due to asthma

## Keep your child home when asthma is out of control

It is important to keep your child home if your child:

- Continues to wheeze or cough after a medication treatment
- Is having trouble breathing or is breathing fast
- Has a fever of 101.5 orally or 100.5 auxiliary (armpit)
- Is too weak or tired to take part in normal activities (dressing self, eating)

## Do a spring update

Spring is a good time to:

- Check the expiration date on medications
- Check the filter on your child's nebulizer
- Order an extra inhaler for summer outdoor activities
- Update emergency contact information
- Update your child's records with any new triggers, new health care providers or specialists treating your child
- Bring the "**Asthma Friendly Child Care Checklist**" to your child care provider to talk about **controlling triggers**. For the checklist go to: <http://www.asthmaandallergies.org/Articles/Asthma%20Friendly%20Child%20Care.pdf>

