Langley Grammar School Procedure for the use of emergency salbutamol inhalers



Langley Grammar School holds salbutamol inhalers for use in emergencies in line with the discretionary power granted to schools in October 2014.

The emergency inhalers should only be used by students, for whom written parental consent for its use has been given, who have either been diagnosed with asthma and prescribed an inhaler or who have been prescribed an inhaler as reliever medication.

A register of students diagnosed with asthma and specific consent for the use of emergency salbutamol inhaler is held in student support together with the inhaler, spacer and the log for recording the use of the emergency inhaler.

If a student suffers an asthma attack and they do not carry their own inhaler or their own inhaler is empty or broken, a check must be made to see if a second inhaler in the student's name is held in Student Support. These inhalers are stored in alphabetical order in an unlocked cabinet inside the Student Support Office. If no named inhaler is available or functioning and a consent form for the use of an emergency inhaler has been signed (this form differs and is in addition to the medical emergency consent form), the emergency inhaler can be used. The administration must be supervised by a First Aid trained member of staff.

Once the emergency inhaler has been administered, details are recorded on the log and parents / carers informed both verbally by phone and in writing (see sample letter – appendix D).

- Appendix A how to recognise an asthma attack
- Appendix B What to do in the event of an asthma attack
- Appendix C consent form for the use of emergency salbutamol inhaler
- Appendix D Emergency salbutamol inhaler use log

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Appendix A

HOW TO RECOGNISE AN ASTHMA ATTACK

The signs of an asthma attack are

- Persistent cough (when at rest)
- A wheezing sound coming from the chest (when at rest)
- Difficulty breathing (the student could be breathing fast and with effort, using all accessory muscles in the upper body)
- Nasal flaring
- Unable to talk or complete sentences. Some children will go very quiet.
- May try to tell you that their chest 'feels tight' (younger children may express this as tummy ache)

CALL AN AMBULANCE IMMEDIATELY AND COMMENCE THE ASTHMA ATTACK PROCEDURE WITHOUT DELAY IF THE STUDENT:

- Appears exhausted
- Has a blue/white tinge around lips
- Is going blue
- Has collapsed

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WHAT TO DO IN THE EVENT OF AN ASTHMA ATTACK

- Keep calm and reassure the student
- Encourage the student to sit up and slightly forward
- Use the student's own inhaler if not available, use the emergency inhaler
- Remain with the student while the inhaler and spacer are brought to them
- Immediately help the student to take two puffs of salbutamol via the spacer
- If there is no immediate improvement, continue to give two puffs at a time every two minutes, up to a maximum of 10 puffs
- Stay calm and reassure the student. Stay with the student until they feel better. The student can return to school activities when they feel better
- If the student does not feel better or you are worried at ANYTIME before you have reached 10 puffs, CALL 999 FOR AN AMBULANCE

If an ambulance does not arrive in 10 minutes give another 10 puffs in the same way

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Appendix C

Consent form for the use of emergency salbutamol inhaler

- 1. I confirm that my child has been **diagnosed with asthma / has been prescribed an inhaler*** [* delete as appropriate].
- 2. My child has a working, in-date inhaler, clearly labelled with their name, which they will bring with them to school every day.
- 3. In the event of my child displaying symptoms of asthma, and if their inhaler is not available or is unusable, I consent for my child to receive salbutamol from an emergency inhaler held by the school for such emergencies.

Signed:
Name (print):
Student's name:
Form

Emergency Salbutamol inhaler use log

Student		Dosage			Any other action taken	Parent informed by telephone		Staff responsible (initials)
Name	Form	Date	Time	No Puffs		Date	Time	