

San Diego City Schools  
Wellness Program

PLEASE NOTE: Retrieve student absentee rate as per SHIP Protocol (>5 days) and as needed using professional judgement

**HEALTHLINK ASTHMA REPORT**

Nurse \_\_\_\_\_

Year \_\_\_\_\_

School \_\_\_\_\_

Send at End of Each Quarter

1. ASTHMATIC STUDENTS	Nov.	Jan.	Apr.	Jun./Jul.
• Total # Asthmatics <i>(Use updated Asthma Survey or Health Problems List)</i>				
• Total # Absences <i>(Due to asthma or related causes, i.e., hospitalizations, wheezing, cough, etc.)</i>				
• # Health Office Visits <i>(Asthma only)</i>				
• Health Education -- Student				
• Health Education -- Parent				
• Total # Daily Meds Given at School <i>(e.g., inhalers, oral)</i>				
• Total # Asthma Treatments <i>(e.g., pulomonaide tx.)</i>				
• # Consultations with Medical Provider				
<b>Enrollment in Medical Home</b> <i>(Medi-Cal, Healthy Families, California Kids, Kaiser Cares for Kids, etc.)</i>				
▪ Total # of Students Newly Enrolled <i>(From your own knowledge or ask outreach worker)</i>				
<b>Referrals</b>				
▪ M.D.				
▪ Urgent				
▪ Followed Through				
▪ Resolved				
<b>Letters</b>				
▪ # Parent Letters Sent				
❖ # Parent Responses				
▪ # M.D. Letters Sent				
❖ # M.D. Responses				
▪ # Follow-Ups by Nurses				
<b>Referrals to Asthma Education Programs</b>				
▪ Children's Hospital				
❖ # Successful Referrals				
▪ Kaiser				
❖ # Successful Referrals				
▪ Open Airways				
❖ # Successful Referrals				
▪ Other				
❖ # Successful Referrals				