



# Mobile Pediatric Asthma Clinic

- Does playing and/ or exercise leave your child short of breath? Y/N
- Does your child cough at night? Y/N
- Does your child use their rescue inhaler more than once a week? Y/N

**Parents:** If you can answer “Yes” to any of these questions above or you are just concerned about your child’s breathing, we can help by performing a free pulmonary function test and be assessed by our Nurse Practitioner. Just need an Asthma Care Plan in order for your child to receive their inhaler at school? Then sign your child up. All will be performed at no cost to you or your insurance. If you would like an appointment for a **FREE SCREENING** please fill out the bottom of this form and return to your school’s Nurse or call at 903-665- 2461 ext: 3014 .

(You will receive a call to set up appointment time)

**We will be on your child’s campus on:**

**April 17<sup>th</sup> and 18<sup>th</sup>**

**\*\* Parent or Guardian must accompany child to appointment \*\***

**Please bring all medication your child is taking to appointment,**

**Parent’s Name:** \_\_\_\_\_

**Child’s Name:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

**Home/Cell Phone:** \_\_\_\_\_

**Grade:** \_\_\_\_\_ **Age:** \_\_\_\_\_ **Male/Female:** \_\_\_\_\_