

**Northern Valley Regional High School at Old Tappan
Health Office**

Dear Parent/Guardian:

It has been noted that your child _____ has asthma. If he/she is to be allowed to carry and self administer an inhaler, you and your child's health care provider will need to fill out, sign and return the enclosed Asthma Action Plan. An extra inhaler should also be kept in the Health Office for emergencies and as a spare.

If you have any questions regarding this request, please do not hesitate to contact me at 201-784-1600, ext. 24190 or email at Ferencevych@nvnet.org .

Thank you,

Virginia Ferencevych, RN,MS
School Nurse