Anxiety/Panic Disorder Classroom Health Care Plan

Name:	Effective Date:			
Parent(s):	School:			
Home Phone:	Bus:yesnoSchool Nurse:Office#			
Emergency/Cell:	S	chool Nurse:	Office#_	
DOB:	Doctor:		Office#	
Allergies:		Preferred	Hospital:	
Medications:				
was diagnosed disabling condition that impairs ead to problems such as substated as a content attacks that are not account abuse or medication, or a gener Symptoms of a panic attacks symptoms such as che addition, intense fear, the feeling the fear of dying may also be proccur. While 10% of children we are Through research, effect Currently there is clinical reseases. Problem: Panic attacks Goal: To reduce anxiety Action: 1. (with Anxiety/Panic schildren's behavior nee abuse, loss of a need for by another all medical condition attack may be characted st pain, rapid heart but go f being detached resent. Tacks increases, a characteristic treatments control on medications to medications to the precipitating even a f about panic attacks cur.	Disorder on	Anxiety/Panic Disorder mance, social activities as a disorder is marked by rests of a substance such as repeated episodes of anxietness of breath, and other e's mental state has been ations for fear another att p panic disorder. It people with panic disorder. It people with panic disorder.	er is a nd can ecurrent drug iety and rs. In altered, c ack may order.
Problem: Medication Goal: Early recognition and re Action: 1. () is medic	ated with	for pani	ic attacks.
Physician Signature School Nurse Signature	Date Date	Parent Signature	Date	