

Don't let Asthma



Nationwide Asthma Screening Program

Coordinator's Manual



American
College
of Allergy, Asthma
& Immunology

allergist

This program is supported by



INTRODUCTION

Welcome to ACAAI's Nationwide Asthma Screening Program, an important public service campaign to help people across the country breathe easier. The program identifies suspected asthma, nasal allergy and EIB sufferers and refers them to allergists for diagnosis and treatment. Nearly 135,000 adults and children have been screened.

By conducting an asthma screening program in your community, you play an important part in the College's nationwide effort to raise awareness about asthma, allergies and EIB and the role allergists play in treatment of these diseases. The campaign is supported by Teva Respiratory.

This manual provides step-by-step guidance on how to plan, organize and publicize your screening program. The manual's sections are:

- I. [Partnerships](#)
- II. [Patient Support Groups](#)
- III. [Planning and Organizing](#)
- IV. [Publicity](#)
- V. [Screening Program Materials](#)
- VI. [Exercise-Induced Bronchoconstriction \(EIB\)](#)
- VII. [Innovative Program Sites](#)
- VIII. [Hispanic Communities/Cultural and Ethnic Groups](#)
- IX. [Protocol and Guidelines](#)

Each section has detailed instructions for coordinating your screening program. Suggested timelines and sample materials, such as news releases, mayoral proclamations and letters to community organizations, are provided. Throughout the manual you will find *Questions and Answers* based on experiences of previous screening program coordinators.

The Asthma and Allergy Foundation of America (AAFA) and Allergy & Asthma Network (AAN) have local members in your community who should be eager to help you with your screening program.



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I. PARTNERSHIPS

A screening program enables you to raise local awareness about asthma, allergies and allergists as a medical specialty that treats these conditions. It also can help build partnerships with others in your community who are concerned about asthma and allergies. These partners can help with planning, publicity and staffing on the day of the screening.

Partnerships can be formed with:

- Other allergists and physicians
- Allied health professionals such as physician assistants, nurse practitioners, school nurses, respiratory therapists and pharmacists
- Patient support groups, such as the Allergy & Asthma Network (AAN) and the Asthma and Allergy Foundation of America (AAFA) (see [PATIENT SUPPORT GROUPS](#) – Section II)
- Teva Respiratory sales representatives

This first section provides recommendations for recruiting allergists, other physicians and allied health professionals. [Sample letters of invitation](#) are provided.

RECRUITING VOLUNTEERS FOR THE SCREENING PROGRAM

You will need to recruit allergists and others to help plan, publicize and conduct your screening program.

Allergists. Using the College Membership Directory or allergist locator on the ACAAI website at acaai.org, call allergists in your community and surrounding area to invite them to participate. Allergists can:

- Help plan the event as committee members.
- Conduct screenings on the day of your program.
- Be included on a referral list that will be distributed to screening program participants.

Don't hesitate to invite other asthma specialists, allergists who aren't members of the College, and other physicians to join in this public service effort.

Allied Health Professionals. Physician assistants, nurse practitioners, respiratory therapists, school nurses and pharmacists may help with your screening program by distributing promotional fliers, publicizing the event in their newsletters or even helping to staff the event itself.

If you have active organizations of these groups in your community, contact a representative to invite their participation in the program.

Teva Respiratory Sales Representatives. ACAAI's Nationwide Asthma Screening Program is supported by Teva Respiratory. Teva sales representatives can be included in your team of volunteers to help organize and conduct a screening program, including assisting the day of your screening with registration, greeting participants and distributing health education materials. Call your representative if you would like assistance. However, Teva representatives are not responsible for coordinating local screenings and should not be asked to do so. Only a College member allergist is eligible to be screening program coordinator and that doctor must attend the screening. As part of the partnership with Teva Respiratory, your Teva sales representative may contact you about having a booth at the screening site to distribute additional information. You and your representative can coordinate this added benefit. Your Teva sales representative will also have a screening program banner to deliver to your office or the day of the event. Ask them about the banner.

[Suggested cover letters for contacting allergists, other physicians](#) and [allied health professionals](#) follow.

SAMPLE LETTER TO INVITE LOCAL ALLERGISTS AND OTHER PHYSICIANS TO PARTICIPATE IN A SCREENING PROGRAM

The following letter can be sent on your letterhead to allergists or other physicians in your area to invite them to participate in your screening program.

Dear **(Doctor's name)**:

The American College of Allergy, Asthma and Immunology invites you to help people stop wheezing and sneezing by participating in the Nationwide Asthma Screening Program on **(date)** at **(location)** from **(time)** to **(time)**. The program, supported by Teva Respiratory, is part of an important public service campaign to promote early detection and effective treatment of asthma and nasal allergies. More than 135,000 adults and children have been screened with more than half referred for a diagnosis since the program launched.

During the screenings, participants will take a health assessment survey and a lung function test (usually spirometry), and receive information on whether they should seek an appointment with an allergist for a diagnosis. People previously diagnosed with asthma or allergies will be able to assess whether their disease is under control.

A special effort also is being made to reach those who might have exercise-induced bronchoconstriction (EIB) but do not know it.

We are seeking the assistance of local allergists and other physicians to help conduct the screening and to be on site to help with health assessments. Your role will be to review the results of a 22-question self-administered test, interpret spirometer test results, discuss them with the individuals being screened and advise them on whether they should seek a diagnosis. Educational materials will be available to distribute.

I will call you shortly to determine your interest in participating in the screening program. If you have questions about the program, please don't hesitate to call me at **(your phone number)**.

Sincerely,

(Doctor's name)
Screening Coordinator

SAMPLE LETTER TO INVITE ALLIED HEALTH PROFESSIONALS TO PARTICIPATE IN A SCREENING PROGRAM

The following letter can be sent on your letterhead to allied health professionals in your community to invite them to participate in your screening program.

Dear **(Name)**:

The American College of Allergy, Asthma and Immunology invites you to help people stop wheezing and sneezing by participating in the Nationwide Asthma Screening Program on **(date)** at **(location)** from **(time)** to **(time)**. The program, supported by Teva Respiratory, is part of an important public service campaign to promote early detection and effective treatment of asthma and nasal allergies. More than 135,000 adults and children have been screened with more than half referred for a diagnosis since the program launched.

During the screenings, participants will take a health assessment survey and a lung function test (usually spirometry), and receive information on whether they should seek a diagnosis. People previously diagnosed with asthma or allergies will be able to assess whether their disease is under control.

A special effort also is being made to reach those who might have exercise-induced bronchoconstriction (EIB) but do not know it. Educational materials will be available to distribute.

I would like to discuss your interest in participating in the asthma screening program and will call you shortly. In the meantime, please don't hesitate to call me at **(your phone number)**.

Sincerely,

(Doctor's name)

Screening Coordinator

ORGANIZING A COMMITTEE

The partnerships you form with individuals and organizations can be the basis for one or more committees to plan and conduct the screening.

Committees should be charged with specific tasks. Committee assignments might include:

- [Allergist and other physician recruitment](#)
- [Allied health professional recruitment](#)
- [Patient support group recruitment](#)
- [Site selection and arrangements](#)
- [Equipment procurement](#)
- [Telephone hotline coordination](#)
- Poster and flier distribution
- [Print publicity](#)
- [Broadcast publicity](#)
- On-site screening staff coordination

Information about each of these activities is presented in this manual. As a screening program coordinator, you are in charge of the overall screening program and responsible for directing any committees and maintaining communications with them.

II. PATIENT SUPPORT GROUPS

Patient support groups can play a valuable role in the success of a local screening program. They can help secure publicity, recruit volunteers and staff the registration table on the day of the event.

The Nationwide Asthma Screening Program is supported by two patient support groups – the [Allergy & Asthma Network \(AAN\)](#) and the [Asthma and Allergy Foundation of America \(AAFA\)](#). This section provides information on how to work with these groups. Information on partnering with local chapters of the [American Lung Association \(ALA\)](#) also is provided.

ALLERGY & ASTHMA NETWORK (AAN)

Founded in 1985, [Allergy & Asthma Network \(AAN\)](#) is the nationwide community-based nonprofit health organization dedicated to eliminating suffering and death due to allergies and asthma through education, advocacy, community outreach and research.

At the local level, AAN has a network of outreach service coordinators (OSCs) – volunteer parents, grandparents and friends who want to educate their local communities about asthma and allergies and raise awareness of these chronic conditions. Some distribute educational materials to schools, libraries and hospitals a few hours a week. Others devote more time, speaking to community groups about the basics of the conditions, participating in local and statewide coalitions to improve asthma and allergy education, working with government officials to create laws supporting the rights of people with asthma and allergies, or organizing a community Asthma Awareness Day.

Many of the OSCs have played a role in local asthma screening programs across the country. Contact AANMA's national headquarters at 800-878-4403 to:

- Request information about AAN for display at your screening.
- Determine the possibility of OSCs or other AAN members assisting with your screening program.

ASTHMA AND ALLERGY FOUNDATION OF AMERICA (AAFA)

The Asthma and Allergy Foundation of America (AAFA) is a patient organization dedicated to improving the quality of life for people with asthma and allergies and their caregivers, through education, advocacy and research. The not-for-profit organization was founded in 1953 and provides practical information, community-based services, patient support and referrals through a national network of chapters and educational support groups.

AAFA's chapters provide a variety of services, educational programs and support to people with asthma and allergies in their communities, as well as local leadership dedicated to improving the quality of life for people with the conditions. Working together with volunteers, health care providers and private and government agencies, these chapters are able to positively influence their communities and the perception of asthma and allergies.

The majority of AAFA's eight chapters have participated in the ACAAI's local asthma screening programs. If you have a [chapter in your area](#), contact its leaders about participating in your screening program. The national office has notified each of its chapters about the screening program.

Information about AAFA and its asthma and allergy patient education and family support resources are also available for distribution at your local screening. If you would like to receive this information, contact either the local chapter nearest you or the national headquarters at 800-727-8462 or info@aafa.org.

AMERICAN LUNG ASSOCIATION (ALA)

ALA local chapters have been very involved in community screenings since the program was launched. Chapters often have a full-time staff that can provide additional resources for publicizing and staffing a screening.

To locate a local chapter, log on to the national association's website at lungusa.org, look for the "In Your Community" and enter your ZIP code.

III. PLANNING AND ORGANIZING

Preparing for your screening program well in advance will help ensure its success.

This section provides materials that will help you plan and organize your screening program:

- [Timeline and checklist](#)
- [Suggested screening sites](#)
- [Site selection criteria](#)
- [Day-of-screening equipment checklist](#)
- [Telephone hotline for public information](#)
- [Instructions for using the asthma and allergy screening program registration forms](#)

SCREENING PROGRAM TIMELINE AND CHECKLIST

This timeline and checklist will help you plan your asthma screening program. Many allergists choose a screening in May, which is Asthma and Allergy Awareness Month. That's the month there will be national publicity about the screening programs. Others choose the fall when back to school and changes in weather often exacerbate asthma symptoms. However, if another time is more appropriate in your community, a screening program can be held at any time of the year.

The activities to get ready for a screening program are listed below according to when they should be completed in advance of your screening event. A separate timeline for publicity for your program is in [Section IV \(PUBLICITY\)](#).

<u>DATE</u>	<u>ACTIVITY</u>
<input type="checkbox"/> PRE-PLANNING	<p>REVIEW the Protocol and Guidelines that are in Section IX (PROTOCOL AND GUIDELINES) of this manual.</p> <p>DETERMINE potential dates and sites for the screening, which can be a one- or two-day event. (See the Suggested Screening Sites and Site Selection Criteria in this section and Section VII, Innovative Program Sites.)</p>
<input type="checkbox"/> 8 WEEKS PRIOR	<p>CONTACT local patient support organizations and allied health professionals including respiratory therapists, nurse clinicians, school nurses and pharmacists to determine interest in co-sponsoring or assisting with the screening. Teva Respiratory sales representatives also may be available to assist you on the day of your screening program.</p> <p>RECRUIT local allergists as committee members to assist in coordinating screening program activities including selecting a screening site, recruiting volunteers and obtaining publicity. Outline their duties and responsibilities, and arrange a meeting to coordinate all activities.</p>

<u>DATE</u>	<u>ACTIVITY</u>
☐ 7 WEEKS PRIOR	<p>MEET with committee and co-sponsors to confirm screening date(s) and site(s), review screening activities, discuss and coordinate publicity efforts and determine staffing and support needs prior to and during the screening. Needs will include:</p> <ul style="list-style-type: none"> • Allergists or other physicians to perform the screenings. It is recommended that at least two, including the College member allergist coordinator, be on site at all times during the event. (Note: Only allergists or other physicians can conduct the actual screening.) • Volunteers to welcome each participant to the screening, ask age of the participant and provide and the appropriate Page 2 of the asthma and allergy screening program registration and report form on a clipboard, assist participants in completing screening forms and distribute asthma and allergy educational materials. • Trained respiratory therapists or nurse clinicians to administer spirometer tests. <p>DESIGNATE a website page or telephone number the public can call for more information about the screening.</p> <p>BEGIN recruiting screening program staff including local allergists, other physicians, volunteers, respiratory therapists and nurses to assist with the screening. Confirm with local allergists if they want to be included on a referral list to be distributed at the screening.</p>
☐ 6 WEEKS PRIOR	<p>WALK through screening site to determine physical set-up, equipment needs and traffic flow.</p> <p>ORDER screening program equipment. A list of suggested equipment is provided.</p> <p>CONTINUE recruiting screening program staff.</p>

CREATE a list of sources of care for the indigent and medically indigent for distribution, as necessary.

<u>DATE</u>	<u>ACTIVITY</u>
<input type="checkbox"/> 5 WEEKS PRIOR	<p>CONTINUE recruiting screening program staff.</p> <p>ADD time and place information to the flier reproduction PDF and produce in quantity.</p>
<input type="checkbox"/> 4 WEEKS PRIOR	<p>CONTINUE recruiting screening program staff.</p> <p>DISTRIBUTE screening program fliers to local school nurses, pharmacies, allergist offices and locations near the screening site.</p> <p>DISPLAY asthma screening posters in offices and other public locations.</p> <p>PLAN staffing schedule for the screening program.</p>
<input type="checkbox"/> 3 WEEKS PRIOR	<p>CALL all screening program staff and confirm staffing schedule for screening.</p> <p>CONTACT co-sponsors to confirm screening details.</p>
<input type="checkbox"/> 2 WEEKS PRIOR	<p>SECURE screening program equipment.</p> <p>PREPARE allergist referral lists for handouts. Be sure to include all College members who want to be listed.</p>
<input type="checkbox"/> 1 WEEK PRIOR	<p>CONFIRM screening details and schedule with all screening program staff.</p>
<input type="checkbox"/> 1-2 WEEKS AFTER	<p>SEND thank-you notes to all volunteers.</p>

SUGGESTED SCREENING SITES

Location, location, location. It's said to be the key to success in real estate, and it seems to be true for screening programs. Community festivals and fitness centers, shopping malls and schools are just some of the sites allergists participating in the Nationwide Asthma Screening Program have used to draw crowds. Drawn from the experiences of screening program coordinators, the following tips provide suggestions on selecting a successful screening site, including:

- Site selection criteria
- Sites to reach children and people with sports and fitness interests
- Locations and equipment needs

The program includes an initiative to reach people who might be at risk for exercise-induced bronchoconstriction (EIB). Information on selecting sites to reach this group is included below and in Section VI ([EXERCISE-INDUCED BRONCHOCONSTRICTION](#)). Section VI also provides tips on promoting a screening at another location with fitness and sports-related sites, events and groups.

Site selection is only one component of a successful screening program and getting the word out is essential. Reports from previous screening program coordinators show that those who secured media publicity consistently had higher turnouts than those who did not. [Sample media materials](#) and detailed information on generating advance publicity are included in Section IV ([PUBLICITY](#)).

Potential Sites

Here are some locations to consider when selecting a screening site.

- **Shopping malls.** Shopping malls are often a popular site. The ready-made audience of shoppers representing a cross-section of the community helps ensure good attendance.
- **Health fairs.** Communities and hospitals often hold annual health fairs that can be a perfect venue. Check with the coordinators of these events to determine estimated attendance and planned programs and activities since you'll be competing for attention.
- **Grocery/discount/drug/retail stores.** Grocery stores and large discount and retail stores offer a ready-made audience. The key to success is advance publicity, finding a high-traffic location within the store and providing signs that direct shoppers to you. If you are working with a store that is part of a regional chain, you can publicize the screening by displaying posters and distributing fliers with each of the chain's locations in your area. Several screening program coordinators have partnered with a regional grocery and drug store chain to conduct simultaneous screenings at store locations.
- **Sporting complexes/events.** Community sporting events, such as a marathon or tournament, can provide big crowds and a good opportunity to screen for exercise-induced bronchoconstriction (EIB). Fitness centers, recreational sports leagues and

youth sports programs also are potential outlets for a screening. If the event is outdoors, make sure you have a source of electricity and be prepared for the possibility of bad weather. More information on reaching these groups is available in [Section VI](#).

- **Inner-city.** Inner-city locations, such as community centers, housing developments and health centers, can help reach urban minorities who are at greater risk for having asthma and are more likely to not have the disease under control.
- **Festivals/fairs.** Some coordinators have had successful screenings during festivals and county fairs. Again, advance preparation is important since many of these events are outdoors.
- **Cultural, ethnic and affinity groups.** Some coordinators have conducted screenings that targeted specific groups of people. For example, screenings have been held in Chinese- and Polish-ancestry communities, at Catholic, Methodist, Presbyterian and Greek Orthodox churches and at synagogues and mosques, at local union headquarters and in retirement communities. Other potential groups to target are fraternal organizations such as the Lions, Elks and Kiwanis, women's and senior citizen organizations and community service groups. Since these targeted screenings are not open to the general public, advance publicity within the organization is very important. Evaluate the opportunities for flier distribution, newsletter article placement and poster displays when considering specific groups.
- **Workplace screenings.** From automotive plants to local banks, many screenings are in the workplace, either in conjunction with an existing health and wellness fair or as a separate event. Approach employers in your community to determine their interest. Your local Chamber of Commerce will have a list of businesses. In discussing an asthma screening with a company representative (usually someone from human resources or public relations), you should emphasize how the proper diagnosis and treatment of asthma and allergies lowers the cost for physician visits, hospitalization and emergency room visits and improves worker productivity. If the employer agrees to a workplace screening, discuss potential channels within the company for advance publicity. Additional information on conducting [workplace screenings](#) is included in SECTION VII ([INNOVATIVE PROGRAM SITES](#)).
- **State capital screenings.** Several coordinators have selected state capitals as the site for their screening, not only to find those at risk for asthma and allergies, but to raise awareness among legislators. If you are considering this type of screening, you may want to contact your local chapter of the American Lung Association. ALA chapters are often very involved with legislative activities and can be a valuable resource in coordinating an event. If you don't already have a state government contact, call the general number at the state capitol building and ask to speak with someone in special events. This person will likely be able to discuss the possibility of conducting a state capital screening and can serve as your contact for planning, equipment and space needs. For more information on conducting a [state capital screening](#), see SECTION VII ([INNOVATIVE PROGRAM SITES](#)).

- *Children's locations.* Most screening programs for the general public will attract children and their parents, but screenings also can be held at locations that are particularly child friendly. Some possibilities are:
 - Activity centers
 - Amusement parks
 - Libraries
 - Museums
 - Park district facilities
 - Toy stores
 - Schools
 - Sporting events (football games, soccer tournaments, Little League)
 - Summer camps
 - YMCAs
 - Zoos

You also can contact local community organizations tailored for children, such as the Boys and Girls Clubs of America, and the Boy Scouts and Girl Scouts, to determine opportunities for scheduling a screening program.

Timing

The timing of your screening is up to you. Many coordinators choose to have an event in May, National Asthma and Allergy Awareness Month. Other allergists have decided a fall event is good for them, as back-to-school and changing weather conditions often bring suffering to allergy and asthma patients. Screenings can be held anytime of the year.

Site Fees

Most sites that are chosen for screening programs do not require a rental fee because the program is a public service. If you select a site that requires a fee, ask if the fee can be waived since the screening program is part of a nonprofit national public service campaign conducted by the College, with more than 100 communities across the country participating to increase asthma and allergy awareness.

If the fee cannot be waived, consider an alternative location. Additional funding is not available from ACAAI or Teva Respiratory.

Liability Insurance

The majority of sites chosen for screening programs do not require special liability insurance. If, however, the management of the site raises the issue, contact the College at 847-427-1200 to determine if coverage is available through the College. Usually it can be provided at no cost.

SITE SELECTION CRITERIA

Use this checklist for selecting a screening program site.

- Look for space in high-traffic locations such as a shopping mall, sporting event, fitness club, 5K run, civic center, community hospital lobby or health fair.
- Walk through the site to determine physical set-up.
- Determine available dates and times for the screening.
- Check to see what other events are occurring at the site location on the proposed screening date that might either compete with your screening or help generate traffic.
- Ask about permit requirements, if any.
- Identify equipment needs such as tables, chairs and easels (see [Equipment Checklist](#)), and determine what can be provided by the operator of the site and what must be brought in.
- Determine electrical access. You will need electricity for spirometers and a television/DVD player/laptop/tablet if you want to display the educational video.
- Find out if the location allows signs or flier distribution for publicity before or during the event. For instance, in a mall, ask if fliers and posters can be distributed or displayed in food courts and stores. In a hospital or recreation center, ask if fliers or posters can be displayed at the information desk, cafeteria or in literature racks.
- If the screening program is held in a community hospital, mall, or fitness center, place a notice in the group's newsletter or on its website. Plan ahead so you don't miss publication deadlines.
- Ask about public address announcements. As a public service, some malls and retail stores will agree to make announcements periodically throughout the day to help drive traffic to the screening.
- Determine storage space. If a screening is more than one day, make arrangements for a secure place for overnight storage of screening equipment.

DAY-OF-SCREENING EQUIPMENT CHECKLIST

Use this checklist for equipment and supplies for the screening.

- Asthma and allergy screening program registration and report forms (standard page one and three versions of page two targeting adults 15 and over, kids 8-14, and children under 7)
- Posters
- Fliers and other educational materials
- Patient education video
- Children's publicity posters, fliers and activity sheet
- Allergist referral lists or card noting Find an Allergist locator availability on AllergyandAsthmaRelief.org
- Information about sources of asthma and allergy care for the indigent and medically indigent (These should be available and provided as appropriate.)
- Spirometers (Bring equipment from your office or check with local hospitals, clinics or vendors to see if you can borrow machines.)
- Disposable mouthpieces for spirometers
- Television/DVD player/laptop/tablet if you wish to show the educational video on asthma
- Tables for registering screening program participants, displaying educational materials, administering spirometer tests and providing allergist/participant counseling
- Tablecloths/table skirts
- Chairs for staff and participants
- Easels for displaying posters and other signs
- Clipboards for completing the asthma and allergy screening program registration and report forms
- Ballpoint pens
- String for fastening pens to the clipboards
- Scissors
- Drinking water and paper cups
- Trash cans
- Tissues
- Staplers
- Staple remover
- Duct tape
- Extension cord/power strip

WEBSITE PAGE/EMAIL ADDRESS/TELEPHONE HOTLINE FOR PUBLIC INFORMATION

An important component in setting up a screening program is a website, email address or telephone number the public can use to get more information about the screening or about asthma and allergies.

You may want to use your office website or Facebook page to list information or offer the office email address or telephone number, or the contact information of a volunteer from a patient support group. The most important thing is to provide additional details and, if necessary, have staff available and prepared to answer questions.

HOW TO USE THE ASTHMA AND ALLERGY SCREENING PROGRAM REGISTRATION FORM

The two-page asthma and allergy screening program registration form has been designed to simplify and standardize screening. Page 1 of the form gathers demographical information, and provides the release form for each participant. Page 2 is a questionnaire that asks participants about their breathing problem or asthma and nasal allergy symptoms. There are three versions of Page 2, each targeted to a different age group. Each is clearly identified at the top. They are:

- **For adults:** participants 15 and over
- **For kids:** participants 8-14 (Note: Youngsters ages 8-14 should answer questions on this form themselves.)
- **For children:** participants 7 and under (Note: Parents of children 7 and under should answer questions on this form for their child.)

Here are some suggestions for the use of the forms, samples of which are provided in this section.

- Ask the age of each participant and provide **Page 1** of the form and the **appropriate Page 2** of the form. Ask parents to complete forms for children 7 and under. For kids ages 8-14, ask parents to let the child complete Page 2 of the form by themselves.
- Make sure each participant completes the entire form and signs the release section before being screened by an allergist. If the participant is under the age of 18, the release section should be signed by a parent or guardian, even if the child has completed the Page 2 questionnaire. Participants also may sign the photo release section allowing the College to use photographs taken at the screening.
- Remind each participating allergist to complete the last section of the asthma and allergy screening program registration form indicating the number of “yes” responses, the referral recommendation and signature.
- Give the completed form to the person screened.

QUESTIONS AND ANSWERS

Based on the experience of previous local screening coordinators, the answers to these questions may help you plan your program.

What if I cannot participate in the screening but can send another physician, nurse or physician assistant?

A College member allergist must be on site to coordinate the program. Other physicians can help conduct screenings. And while nurses and physician assistants can assist with screening program activities, they should not discuss symptoms and test results with participants.

Will I incur any costs for coordinating a screening program?

You might have some miscellaneous expenses for things such as photocopying, equipment rental, disposable spirometer mouthpieces and perhaps lunch for screening program volunteers. However, these out-of-pocket expenses should be minimal. The supplies from the College include everything needed for an excellent screening program.

How many participants might we expect?

In screening programs held during the past 17 years, the typical number was between 20 and 40 participants, depending on the location, the publicity and number of allergists available for the screening. Publicity, in particular, plays an important role in drawing attendance to screening programs. The publicity not only increases screening attendance, it also reaches many thousands more people with educational information about asthma, allergies and allergists, through local media coverage.

Is my office or clinic an acceptable location for a screening program?

No. A screening program held in a private office or clinic may appear as self-promotion for an individual allergist. The screening program is intended to be a public service.

Where do I get spirometers for the screening program?

Many screening program coordinators have brought equipment from their offices or borrowed equipment from their local hospital or clinic. Others have contacted local spirometer manufacturers/suppliers to ask for a loan of equipment and mouthpieces. In return for the loan, the manufacturer/supplier is recognized with signage at the screening.

IV. PUBLICITY

Newspapers, television and radio offer opportunities to reach large audiences with information about asthma and allergies, and position allergists as medical specialists who treat allergic conditions. Publicity also plays an important role in drawing attendance to screening programs.

This section will help you publicize your screening program and Asthma and Allergy Awareness Month in your local media. Materials include:

- [Instructions](#) for developing media lists and using letters, news releases, fact sheets and television or radio public service announcement scripts
- Tips for [taking photos](#) at your screening
- A media relations [timeline](#)
- [Tips](#) on working with the media and participating in media interviews
- [Interview message points](#)
- [Instructions for obtaining a mayoral or gubernatorial proclamation](#) and [sample proclamations](#)
- Sample materials including [emails to the media](#), [news releases](#), [television or radio public service announcement scripts](#), [fact sheets](#) on asthma and nasal allergy

Media materials also are available in Spanish and are in Section VIII ([HISPANIC COMMUNITIES/CULTURAL AND ETHNIC GROUPS](#)).

The College also will be distributing a news release to national media across the country in advance of National Asthma and Allergy Awareness Month in May.

PUBLICITY COMPONENTS

Media lists, letters, news releases, fact sheets, public service announcements and follow-up can all help publicize your screening. Suggestions and sample materials are included in this section.

Media Lists

A media list is simply a list of reporters, editors and broadcast producers who you hope to interest in your story. You will need a list of appropriate contacts at print and broadcast media who might be interested in news or feature stories on asthma, allergies and your screening program.

To develop your media list, you can use a local telephone directory, the internet or library reference books to identify:

- Daily newspapers
- Weekly community newspapers
- Television stations, including news, talk and community affairs programs
- Radio stations, also including news, talk and community affairs programs

Call each of the media on your list to obtain the names of the calendar editor, news editor, medical or health reporter, feature reporter, public service director and any others who might be interested in stories about asthma, allergies and your screening program. You also can reach out to the online editors of local newspapers, television and radio stations. These web outlets often include a calendar of community events. In addition, consider posting your information on local event sites like Craigslist.

Additional publications to consider for your media list are the employee and member newsletters published by area businesses, industries, allied health professionals, schools, churches and community groups. Call active organizations in your area to determine appropriate newsletters and who to contact. Your local Chamber of Commerce may be able to provide useful information about community groups.

Social Media

Post an item on the date and location of your screening program on your practice and personal Facebook and Twitter accounts (and ask your staff to do the same). You can ask the people you interact with on these sites to spread the word to others in their network. If you have friends/ followers in other areas of the country, provide a link to the list of screenings taking place across the nation which is posted at AllergyandAsthmaRelief.org.

Email Pitches to Media

Email pitches are simple and effective tools to generate media interest in a story on asthma, allergies and your screening program. A pitch can introduce a story or a public service announcement.

News Releases

You can announce the details of your screening program to the media with a pre-event news release. After the screening, you also can distribute a news release that provides a summary of the results.

Fact Sheets

A fact sheet provides bulleted information and statistics on a subject.

Public Service Announcements

Public service announcements (PSAs) are brief messages – 10 to 30 seconds – of community interest. Television and radio stations donate air time for these announcements based on the public service value and quality

Follow-up

Follow-up with the media will provide you with the opportunity to see if the specific media contacts, such as an assignment editor or health reporter, are interested in pursuing a story about asthma or sending a reporter or camera crew to cover the screening.

Make a record of all contacts with the media on the worksheets provided in this section. Individual charts are available to keep track of newspaper, radio and television contacts.

TAKING PHOTOS AT YOUR SCREENING

You can capture your screening program in photographs and use these images on your website, in a patient newsletter or to secure coverage with your local newspaper. The College also welcomes photos from screening program events that can be highlighted on the website and in membership publications. Suggestions on how to take photos, obtain permission from participants and distribute photos are included in this section.

Photography Subjects

The most interesting types of photos are typically “action shots” that highlight the day’s activities, such as a screening program participant:

- Talking with an allergist
- Taking a lung function test
- Coloring in the children’s activity sheets
- Filling out the registration form

You want to keep this in mind when shooting photos.

Photo Release Form

You must obtain written permission from each person (allergist, other health professionals, screening program participant) that you photograph. A photo release section is included on page one of the registration form. A signature must be obtained from each person in the photograph. If the person is under the age of 18, a parent or guardian must sign the release.

Photography Tips

Kodak offers the following tips for taking great pictures:

- Hold your camera at the subject’s eye level. They don’t have to look into the camera. The eye level angle will create a personal and inviting feeling.
- Check the background of your photo. Look for trees or poles “sprouting” from your subject’s head. Try to remove clutter from the background. (Note: The screening program banner usually provides a nice backdrop.)
- Even outside, use your flash to remove shadows from the subject’s face or add more light on a cloudy day.
- Move in close to your subject so it fills your viewfinder.
- Make an effort to turn your camera and take some vertical pictures.
- Lock the focus to take a sharp picture of an off-center subject by:
 - centering the subject
 - press the shutter button half way down
 - reframe the subject in your viewfinder (while still holding the shutter button)
 - press the shutter button all the way

- Move your subject from the middle by imagining a tic-tac-toe board on your viewfinder and place the subject at one of the intersections.
- Recognize that your flash may only have a range of about 10 feet (or about four steps). Stand close enough to the subject for your flash to work.
- Great light makes great pictures. Watch out for objects that could make shadows and try to avoid overhead sunlight.
- Take an extra minute and become a picture director, arranging people and props.

Submitting Your Photos

You can post your photos on your website or include in your practice newsletter to showcase your screening. Your local media might be interested in a photograph and you can send one along with the news release that provides a summary on the results of your program. When you send the media a photo, include a caption that provides the names of those pictured and describe the event.

ACAAI also encourages you to send photos for College use. Please include the names of those pictured so they can be identified for use on the website and in member publications. Submit photographs and a copy of the registration form with the photo release section signed to info@acaai.org or by mail to:

ACAAI Executive Office
Nationwide Asthma Screening Program
85 W. Algonquin Road, Ste 500
Arlington Heights, IL 60005

Please note: ACAAI can only consider using photos that are submitted with a release form.

If you have any questions or require any additional information, please contact the College at 847-427-1200.

SCREENING PROGRAM PUBLICITY TIMELINE AND CHECKLIST

This timeline will help you generate publicity for your local screening program using email pitches, news releases, fact sheets and public service announcements. Sample media materials for each of the activities on the timeline are provided.

<u>DATE</u>	<u>ACTIVITY</u>
<input type="checkbox"/> 8 WEEKS PRIOR	<p>REVIEW Publicity Section of the asthma screening program manual.</p> <p>CREATE media lists of local radio and television stations and newspapers. Remember to include appropriate community newsletters.</p> <p>WRITE the local mayor or governor to obtain a mayoral or gubernatorial proclamation.</p>
<input type="checkbox"/> 7 WEEKS PRIOR	<p>SEND email and a news release to local radio and television talk show producers and newspaper medical writers and editors.</p> <p>CONTACT the mayor's or governor's office to determine if a proclamation can be issued.</p>
<input type="checkbox"/> 6 WEEKS PRIOR	<p>CONTACT local radio and television talk show producers and newspaper medical writers and editors to determine interest in an interview. Offer additional information, including the fact sheets.</p>
<input type="checkbox"/> 5 WEEKS PRIOR	<p>SEND email and PSA to local television and radio public service directors.</p>
<input type="checkbox"/> 4 WEEKS PRIOR	<p>SEND email and a news release to local radio and television news producers and health reporters to interest them in a timely story about asthma, allergies and your upcoming screening program.</p> <p>CALL the public service directors at local television and radio stations to determine interest in the PSAs.</p>

<u>DATE</u>	<u>ACTIVITY</u>
<input type="checkbox"/> 3 WEEKS PRIOR	<p>CALL local radio and television news producers and health reporters to confirm that they received your letter and are interested in developing a news story. Offer them a spokesperson, visuals and fact sheets. Ask if they need additional information.</p>
<input type="checkbox"/> 2 WEEKS PRIOR	<p>CALL the public service directors at local television and radio stations to confirm that the PSAs have been scheduled to air.</p> <p>CONFIRM media interviews.</p>
<input type="checkbox"/> 1 WEEK PRIOR	<p>POST event information on social networking sites like Facebook or Twitter.</p> <p>CONDUCT media interviews.</p> <p>CONTACT local newspaper photo desks to determine interest in sending a photographer to the screening program.</p> <p>CONTACT local television and radio assignment desks to determine interest in covering the screening program on the day of the event.</p>
<input type="checkbox"/> DAY OF THE EVENT	<p>POST event information on social networking sites like Facebook or Twitter.</p> <p>RECONTACT local newspapers, radio and television to confirm on-site coverage.</p>
<input type="checkbox"/> IMMEDIATELY AFTER THE EVENT	<p>PREPARE and distribute follow-up news release announcing results of the screening program.</p> <p>ARRANGE local newspaper, radio and television interviews to discuss results.</p> <p>SEND thank-you notes to media who covered the screening.</p> <p>POST information on your screening results on social networking sites.</p>

SEND your screening photos and a copy of the registration form with the photo release section signed to info@acaai.org or by mail to:
ACAAI Executive Office
Nationwide Asthma Screening Program
85 W. Algonquin Road, Ste 500
Arlington Heights, IL 60005

WORKING WITH THE MEDIA – WHAT REPORTERS WANT TO KNOW

In working with the media to obtain publicity for your screening program, you will need to provide:

- Date, times and location of the screening
- Names and telephone numbers (with permission) of spokespersons, including allergists, participating patient support group members, allied health professionals and patients who can talk about asthma or allergies and the importance of early diagnosis and treatment
- Accurate facts and figures on asthma and allergies (review the [fact sheets](#))
- Information on scheduled events, such as [mayoral or gubernatorial proclamation](#) presentations

Immediately after the screening, there are opportunities to secure additional stories on asthma and allergies by providing:

- [A news release summarizing the results of your program](#)
- Important findings, such as the number of participants with breathing difficulties referred and any human interest stories

The media like fresh and timely news, so this information must be provided as soon as possible after the screening.

Feature reporters often like to be participants in their stories. Don't hesitate to invite a reporter to be screened for asthma, nasal allergies or EIB.

If you are holding a two-day screening program, encourage television crews and photographers to attend and cover the first day, so that the coverage can help promote attendance on the second day.

TIPS FOR SUCCESSFUL MEDIA INTERVIEWS

Whether you are participating in a live broadcast interview or in a telephone interview, here are some tips for making the interview a success.

Before the Interview

- Confirm the interview time, date and place by telephone or email.
- Provide the interviewer with fact sheets and fliers. If possible, send these in advance of the interview. Include a phone number for public inquiries about your screening program.
- Ask if the interviewer wants to talk to any additional spokespersons or patients.
- Do your homework. Prepare for the interview by reviewing and knowing the latest facts and figures about asthma and nasal allergies.
- Arrive 15 minutes early to familiarize yourself with the setting and then relax.

During the Interview

- Know the [key message points](#) you want to communicate and state them early during the interview. Don't wait to be asked. Repeat the key points at least twice during the interview so the reporter knows you think this information is important.
- Speak in short, concise sentences.
- Relax and speak naturally.
- Use lay terms and avoid technical language and medical jargon.
- Use examples, stories and anecdotes when possible to dramatize your message.
- Anticipate questions that are likely to be asked during the interview, and be prepared to use those questions as launching pads for your key points.

Special Considerations for Television

- If possible, avoid sitting between two interviewers to prevent the disadvantage of constantly turning to answer questions.
- Maintain eye contact with interviewer. Do not talk into the camera unless directed to do so.
- Lean slightly forward in your chair. This posture makes you appear interested. Sitting with legs crossed is the most comfortable and natural position for most people.
- Use natural hand gestures.
- Offer slides and graphs if appropriate. If available, use horizontal slides rather than vertical ones.
- Wear off-white, beige or pastels. Television lights can make a white shirt or blouse flare.
- Avoid busy patterns, such as herringbone. They tend to “dance” under television lights.
- Wear calf-length socks with trousers to prevent skin showing between the sock top and trouser cuff.
- Keep jewelry to a minimum. Avoid dangly earrings and flashy rings and watches.

SCREENING PROGRAM MESSAGE POINTS FOR INTERVIEWS

Key Points

- Allergies and asthma are serious diseases and that's "nothing to sneeze at." Misdiagnosis and inappropriate treatment can be dangerous.
- Anyone with allergies and asthma should be able to feel good, be active all day and sleep well at night. No one should accept less.
- The Nationwide Asthma Screening Program offers free screenings to help people who have breathing problems, such as coughing, wheezing or shortness of breath, find out if they are at risk for asthma, nasal allergy or exercise-induced bronchoconstriction (EIB). The program is conducted by the American College of Allergy, Asthma and Immunology.
- During a screening, adults and children answer questions about their symptoms, take a lung function test that involves blowing into a tube and meet with an allergist to determine if they should be referred for a complete diagnosis.
- Board-certified allergists are the best-trained health professionals to perform allergy testing and treat allergic diseases effectively. Allergists:
 - Treat more than just symptoms.
 - Can identify the source of your suffering and develop a treatment plan to eliminate symptoms.
 - Provide you with the most cost-effective care and best outcomes.
- Visit AllergyAndAsthmaRelief.org for more information and tools to use.

Supporting Points

- Although symptoms may not always be severe, allergies and asthma are serious and, in some cases, deadly. The conditions, however, can be effectively controlled with proper diagnosis and treatment that involves more than just relieving symptoms but finding the source of the suffering.
- Asthma affects 27 million Americans including 7 million children and is the cause of about 4,000 deaths each year
- Nasal allergies affect 10 percent to 30 percent of adults and up to 40 percent of children.
- An estimated 80 percent to 90 percent of people with asthma have EIB, breathing problems that occur during or after exercise. EIB also affects 10 percent of people who don't have asthma.

- Allergists are experts in diagnosing and treating allergic diseases with an evaluation that includes a medical history, physical exam and administration of appropriate tests including allergy tests and breathing tests. After diagnosis, allergists teach patients the best way to avoid exposure to potential allergy triggers and select the most effective treatments to allow them to lead a normal, healthy life.
- Undiagnosed and untreated asthma and allergies not only affect quality of life but also can cause complications
- During the past 17 years, the program has screened more than 135,000 people and referred more than half for a diagnosis.
- About 100 screenings will take place across the country this year.

HOW TO OBTAIN A MAYORAL OR GUBERNATORIAL PROCLAMATION

A mayoral or gubernatorial proclamation for Asthma and Allergy Awareness Month can add credence to your local screening program. The proclamation also can be an opportunity to secure publicity for your screening.

Most mayors and governors have a press secretary or assistant who will be happy to arrange publicity for a proclamation.

These steps will help you obtain a proclamation:

- Send a letter requesting a proclamation. Contact the mayor's or governor's press secretary who can advise you on how best to proceed and can pave the way for your request.
- Follow up the letter within a week with a telephone call to the mayor's or governor's office.
- If a proclamation is granted, arrange with the press secretary or assistant to photograph the presentation of the proclamation. Invite your local newspaper.
- Invite the mayor or governor to your local screening program for a personal screening, even if a proclamation is refused. If the invitation is accepted, ask the press secretary or assistant to arrange a photo of the occasion for the local newspapers.
- Present the mayor or governor with a poster and literature on asthma and allergies. Ask that the poster be placed in City Hall or the State House.
- Write a letter thanking the mayor or governor for supporting the College's national campaign to increase awareness of asthma and allergies, and the importance of early diagnosis and treatment. Send a copy to the editor or editorial page editor of your local newspaper and send a copy to the College.

[Sample proclamations](#) obtained by members of the College are included in this section. You can use these samples to help draft a proclamation for your mayor or governor.

QUESTIONS AND ANSWERS

Local coordinators have found that purchased advertising rarely is necessary, but time spent on free publicity can generate a large attendance.

Doesn't publicity require a large time commitment?

It does, but the results justify the time commitment. For your publicity to be successful, you should follow up with the media by telephone after materials have been distributed. Many ACAAI members who regularly contact their local print and broadcast media have developed ongoing relationships and frequently serve as a local media resource on all allergy- and asthma-related topics.

Should I buy ads for my screening program in my local newspaper?

This probably won't be necessary. Advertisements are expensive and must appear repeatedly to be effective. Publicity is more effective and virtually free. Typically, media are eager to tell your story. You are performing a free public service and, at the same time, educating consumers about asthma and allergies. Coordinators have found that they can generate publicity by following the suggested screening program manual guidelines.

SAMPLE EMAIL

Email or hand deliver the following with the news release and fact sheet to:
radio/television talk show producers, health reporters, website editors, newspaper
medical writers/editors and radio/television news reporters.

Dear **(Name)**:

A cough. Wheezing. Shortness of breath. Sneezing and itchy eyes.

Anyone who has these symptoms – whether they happen frequently, just at night, seasonally or during exercise – might be at risk for asthma or nasal allergies.

Allergists from the American College of Allergy, Asthma and Immunology (ACAAI) will offer free screenings for asthma and nasal allergies at about 100 locations across the country to help adults and children find out if these conditions might be causing their symptoms. **(City)**-area allergists will conduct a free screening **(date and time)** at **(location)** as part of the national public service campaign.

The Nationwide Asthma Screening Program also includes a special initiative to reach people who have difficulty breathing during or immediately after exercise, a condition called exercise-induced bronchoconstriction (EIB).

We hope you can help us raise awareness of this important public service campaign. More information on asthma, allergies and EIB is available at AllergyAndAsthmaRelief.org. The site also offers an online self-test for those who cannot make it to a screening.

I will contact you soon to determine your interest, but in the meantime you can reach me at **(your phone number)**.

Thank you,

(Doctor's name)
Screening Coordinator

SAMPLE NEWS RELEASE – PRIOR TO THE SCREENING

Mail, email or hand deliver the following news release to: radio/television talk show producers, health reporters, website editors, newspaper medical writers/editors and radio/television news reporters.

Free Nasal Allergy and Asthma Screenings Offered Nationwide New Tools Will Help More Americans Find Sniffle, Sneeze and Wheeze Relief

**Media Contact (Your Name)
(Your Telephone Number)**

At-a-Glance

- Free allergy and asthma screenings are available for those undiagnosed or uncertain about controlling their condition.
- Allergic rhinitis affects 10 percent to 30 percent of adults and up to 40 percent of children.
- 26 million Americans have asthma, including 7million children.
- May is National Asthma and Allergy Awareness Month.
- Visit AllergyAndAsthmaRelief.org to find a nearby screening.

(Your City, State, Date) – Adults and children with symptoms such as wheezing, coughing or shortness of breath can find out if they are at risk for asthma through the annual Nationwide Asthma Screening Program. Participants can also see if a runny nose or itchy eyes might be nasal allergies.

A free screening will be held at (**time, date, location**), one of more than 100 [free asthma and allergy screenings](#) through the American College of Allergy, Asthma and Immunology’s (ACAAI) public

service campaign that helps those with breathing difficulties that might be asthma. The program also will offer testing for nasal allergies, often called hay fever, and exercise-induced bronchoconstriction (EIB), breathing problems that occur during or after exercise.

“Asthma and allergies are often connected, and we offer the tools and resources, both available at the screenings and online, to give people a chance to see if they are at risk and get them on the path to find relief,” said allergist (**Your Name, Your Practice**).

“The screening is quick, painless and free and checks for three conditions that could affect your quality of life.”

Online tools are available at AllergyAndAsthmaRelief.org, including a list of screening locations, Asthma and Allergy Symptom Test and the interactive MyEIBJournal.org which allows those with EIB to track their symptoms and exercise activities and share them with their allergist.

More than 25 million Americans, including 7 million children, have asthma. The disease is responsible for almost 4,000 deaths a year. An asthma attack is often triggered by allergens such as pollen, dust and animal dander, certain drugs and food additives or respiratory infections. Although the exact cause of asthma is unknown, many treatments are available to control this chronic inflammation of the airways in the lungs.

Nasal allergies affect 10 percent to 30 percent of adults and up to 40 percent of children. Allergic rhinitis can be seasonal, with symptoms brought on by sensitivity to pollen from trees, grasses or weeds, or to airborne mold spores.

Sometimes, sensitivity to house dust mites, animal dander or cockroaches can trigger a reaction, called perennial allergic rhinitis.

Between 80 percent to 90 percent of people with asthma also have EIB and the condition affects 10 percent of Americans who do not have asthma. When people exercise, they often breathe rapidly through their mouth instead of allowing their nose to warm and humidify the air. The cold, dry air that reaches the bronchial tubes can trigger breathing difficulties within five to 15 minutes after starting exercise and may occur for several minutes after stopping.

“Allergies and asthma are serious diseases and that’s nothing to sneeze at. Misdiagnosis and inappropriate treatment can have serious health consequences,” said **(Your Name)**. “Board-certified allergists are the best-trained health professionals to perform allergy testing and treat allergic diseases effectively so that people with asthma, allergies or EIB should be able to work, exercise and sleep well at night without symptoms.”

Allergists work with other healthcare professionals to conduct free screenings at shopping malls, civic centers, health fairs and other locations throughout the country. The screenings also offer people already diagnosed the chance to see if their condition is under control.

During a screening, adults complete a Life Quality (LQ) Test developed by ACAAI. Children under age 15 take the Kids’ Asthma Check that allows them to answer questions themselves about breathing problems and another version is available for parents of children up to 8 years of age to complete on their child’s behalf. Questions on allergies also are included.

To screen for asthma and EIB, participants take a lung function test that involves blowing into a tube. All participants meet with an allergist to determine if they should seek a thorough examination and diagnosis for any of the conditions.

Teva Respiratory supports the Nationwide Asthma Screening Program.

About ACAAI

ACAAI is a professional medical organization of more than 6,000 allergists-immunologists and allied health professionals, headquartered in Arlington Heights, Ill. The College fosters a culture of collaboration and congeniality in which its members work together and with others toward the common goals of patient care, education, advocacy and research. ACAAI allergists are board-certified physicians trained to diagnose allergies and asthma, administer immunotherapy, and provide patients with the best treatment outcomes. For more information and to find relief, visit www.AllergyandAsthmaRelief.org. Join us on [Facebook](#) and [Twitter](#).

#

SAMPLE NEWS RELEASE – AFTER THE SCREENING

Mail, email or hand deliver immediately after the completion of your screening program.

contact:

For further information

(Your Name)

(Your Telephone)

FREE SCREENINGS REFER (NUMBER) FOR AN ASTHMA DIAGNOSIS

(Your City, State, Date) – Area allergists conducted free asthma and allergy screenings on (date) at (location). Of the (number examined) adults and children screened, (number) participants were referred for diagnosis.

The free screenings were conducted as part of the Nationwide Asthma Screening Program to promote early detection and effective treatment of asthma and nasal allergies. The program is sponsored by the American College of Allergy, Asthma and Immunology and supported by Teva Respiratory.

“Asthma and allergies are serious diseases and they should be treated that way,” (Your First& Last Name), MD said. “The screening program is an important step to help people realize they don’t have to make lifestyle compromises if they have asthma or allergies – they can work and play all day and sleep well at night. An allergist can find the source of your suffering and stop it.”

More than 25 million Americans have asthma, which can include coughing, chest tightness, wheezing or shortness of breath. Its exact cause is unknown, but an asthma attack can be triggered by allergens such as pollen, dust and animal dander, certain drugs and food additives, viral respiratory infections or physical exertion. Nasal allergies, also called hay fever or allergic rhinitis, often trigger asthma symptoms and affect 10 to 30 percent of adults and up to 40 percent of children. Exercise-Induced Bronchoconstriction (EIB) affects 80 percent to 90 percent of those with asthma and 10 percent of the general population.

More information about asthma is available by calling (include your phone number or the number of a local organization).

###

SAMPLE PUBLIC SERVICE ANNOUNCEMENT (PSA) LETTER TO MEDIA

Mail, email or hand deliver the following letter to: radio/television program directors or public service directors.

Dear **(Name)**:

A cough. Wheezing. Shortness of breath. Sneezing or itchy eyes.

Anyone who has these symptoms – whether they happen frequently, seasonally, just at night or during exercise – might be at risk for asthma or nasal allergies.

Allergists from the American College of Allergy, Asthma and Immunology (ACAAI) will offer free screenings for asthma and nasal allergies at about 100 locations across the country to help adults and children find out if these conditions might be causing their symptoms. **(City)**-area allergists will conduct free screenings on **(date and time)** at **(location)** as part of the national public service campaign.

The Nationwide Asthma Screening Program also includes a special initiative to reach people who have difficulty breathing during or immediately after exercise and may have a condition called exercise-induced bronchoconstriction (EIB).

We hope you can help us raise awareness of this important public service campaign. More information on asthma, allergies and EIB is available at www.AllergyAndAsthmaRelief.org. The site also offers an online self-test for those who cannot make it to a screening.

Enclosed are 30- and 15-second public service announcements for your use. I will contact you soon to determine your interest in airing a public service announcement about asthma and the free screening program. In the meantime you can reach me at **(your phone number)**.

Thank you,

(Doctor's name)
Screening Coordinator

**TELEVISION OR RADIO PUBLIC SERVICE ANNOUNCEMENT
30-SECOND ANNOUNCER-READ SCRIPT**

SPONSOR: AMERICAN COLLEGE OF ALLERGY, ASTHMA & IMMUNOLOGY

TOPIC: FREE ASTHMA AND ALLERGY SCREENING

LENGTH: 30 SECONDS

ANNOUNCER:

ADULTS AND CHILDREN WITH SYMPTOMS OF ASTHMA SUCH AS WHEEZING, COUGHING OR SHORTNESS OF BREATH CAN FIND OUT IF THEY ARE AT RISK FOR THE CONDITION THROUGH THE NATIONWIDE ASTHMA SCREENING PROGRAM. YOU ALSO CAN SEE IF A RUNNY NOSE OR ITCHY EYES MIGHT BE NASAL ALLERGIES. ALLERGISTS WILL HOLD FREE SCREENINGS ON **(DATE)** FROM **(TIME)** TO **(TIME)** AT **(LOCATION)**. FOR MORE INFORMATION, CALL **(LOCAL TELEPHONE NUMBER)**.

**TELEVISION OR RADIO PUBLIC SERVICE ANNOUNCEMENT
15-SECOND ANNOUNCER-READ SCRIPT**

SPONSOR: AMERICAN COLLEGE OF ALLERGY, ASTHMA & IMMUNOLOGY

TOPIC: FREE ALLERGY AND ASTHMA SCREENING

LENGTH: 15 SECONDS

ANNOUNCER:

ARE YOU OR YOUR CHILD SNEEZING OR WHEEZING? FREE ASTHMA AND NASAL ALLERGY SCREENINGS ARE BEING OFFERED BY AREA ALLERGISTS ON **(DATE)** FROM **(TIME)** TO **(TIME)** AT **(LOCATION)**. FOR MORE INFORMATION, CALL **(LOCAL TELEPHONE NUMBER)**.

ASTHMA FACTS

- Asthma is a chronic inflammation of the lung airways that causes coughing, chest tightness, wheezing or shortness of breath.
- More than 26 million Americans have asthma; 7 million are under 18.
- Asthma mortality is almost 4,000 deaths per year.
- Patients with asthma reported 13.9 million visits to a doctor's office and 1.4 million visits to hospital outpatient departments.
- Asthma results in 456,000 hospitalizations and 2.1 million emergency room visits annually.
- Asthma is the most common chronic illness in childhood, accounting for 10.5 million missed school days each year. It also accounts for 14.2 million lost work days for adults.
- The estimated economic cost of asthma is \$20.7 billion annually.
- Direct medical expenditures associated with asthma, including hospital care, physicians' services and medications, are estimated at \$15.6 billion annually.
- Indirect medical expenditures, including decreased worker productivity and lost work days for adults suffering from asthma or caring for children with asthma, and other losses total \$5.1 billion annually.
- The greatest rise in asthma rates is among black children with an almost 50 percent increase from 2001 through 2009.
- Triggers that can initiate an asthma attack include allergens such as pollen, dust, animal dander, drugs and food additives, as well as viral respiratory infections and physical exertion.
- Asthma is often hereditary.
- Weather conditions such as extremely dry, wet or windy weather can worsen an asthma condition.
- Effective asthma treatment includes monitoring the disease with a peak flow meter, identifying and avoiding allergen triggers, using drug therapies including bronchodilators and anti-inflammatory agents, and developing an emergency plan for severe attacks.
- There are two types of asthma medications: long-term control and quick-relief medications. Long-term control medications are preventive, taken daily to achieve and maintain control of asthma symptoms. Quick-relief medications are used to treat asthma attacks. They relieve symptoms rapidly and are taken on an as-needed basis.
- One of the most effective medications for controlling asthma is inhaled corticosteroids, which are anti-inflammatory medications. Taken early and as directed, these well-tolerated and safe medications can improve asthma control and normalize lung function.
- Immunotherapy or allergy shots should be considered if asthma is triggered by exposure to unavoidable allergens, or if symptoms occur three days a week and more than two nights a

month. The shots are especially helpful when symptoms occur year-round or are not easily controlled with medication.

- Allergists are the medical specialists with the most expertise in treating asthma. An allergist can find the source of your suffering and stop it. To find an allergist, visit <http://www.AllergyAndAsthmaRelief.org>.

NASAL ALLERGY FACTS

- Allergic rhinitis, often called hay fever, is a common condition that causes symptoms such as sneezing, stuffy nose, runny nose, watery eyes and itching of the nose, eyes or the roof of the mouth.
- These nasal allergies are estimated to affect approximately 50 million people in the United States, and its prevalence is increasing affecting as many as 30 percent of adults and up to 40 percent of children.
- 16.9 million adults and 6.7 million children have been diagnosed with hay fever in the last year.
- More than 13.4 million visits to physician offices, hospital outpatient departments and emergency departments were due to allergic rhinitis.
- Allergic rhinitis can be seasonal or perennial. Symptoms of seasonal allergic rhinitis occur in spring, summer and/or early fall. They are usually caused by allergic sensitivity to pollens from trees, grasses or weeds, or to airborne mold spores. People with perennial allergic rhinitis experience symptoms year-round. It is generally caused by sensitivity to house dust mites, animal dander, cockroaches and/or mold spores. Underlying or hidden food allergies rarely cause perennial nasal symptoms.
- Once diagnosed, allergic rhinitis treatment options are: avoidance, eliminating or decreasing your exposure to the irritants or allergens that trigger your symptoms, medication and immunotherapy (allergy shots).
- Immunotherapy (allergy shots) helps reduce hay fever symptoms in about 85 percent of people with allergic rhinitis.
- Allergic diseases, which include asthma, are the fifth most prevalent chronic diseases in all ages, and the third most common in children.

NEWSPAPER CONTACT WORKSHEET

PLEASE RECORD ALL CONTACTS ON THIS SHEET

NAME/ADDRESS OF NEWSPAPER	PERSON CONTACTED TITLE/DATE	PHONE	RESPONSE

TELEVISION CONTACT WORKSHEET

PLEASE RECORD ALL CONTACTS ON THIS SHEET

NAME/ADDRESS OF TELEVISION STATION	PERSON CONTACTED TITLE/DATE	PHONE	RESPONSE

RADIO CONTACT WORKSHEET

PLEASE RECORD ALL CONTACTS ON THIS SHEET

NAME/ADDRESS OF RADIO STATION	PERSON CONTACTED TITLE/DATE	PHONE	RESPONSE

PROCLAMATION



- WHEREAS:** Despite advances in medical treatment, asthma prevalence in the U.S. has increased significantly in persons of all ages; and
- WHEREAS:** Asthma has emerged as the most common chronic illness of childhood, and the leading cause of hospitalization and school absenteeism in children; and
- WHEREAS:** The hardest hit are the medically underprivileged who seek their care episodically in the emergency rooms and hospitals, thereby stretching the community's healthcare delivery system; and
- WHEREAS:** Jacksonville has not escaped this rise in asthma and our hospitalization rate exceeds the Florida average; and
- WHEREAS:** It is estimated that in excess of 60,000 persons with asthma live in the greater Jacksonville area, 10,000 are uninsured; and
- WHEREAS:** The uninsured account for 27% of ER visits for asthma pointing to utilization of the emergency room as the main if not the only facility for the care of their emergent asthma; and
- WHEREAS:** The Community Asthma Partnership (CAP), Jacksonville, a grass roots community-based coalition of individuals and organizations, formed in 1992 to address this rising problem and initiate a countywide coordinated response; and
- WHEREAS:** CAP's mission is to help Jacksonville establish a model cooperative community effort that enhances asthma education and care; and
- WHEREAS:** CAP's goal is to improve the quality of life of persons affected by asthma by improving asthma awareness, education, access and standard of care in the community; and
- WHEREAS:** The group is hosting an event at the Gateway Mall on Saturday, May 4 to kick off **ASTHMA AND ALLERGY AWARENESS MONTH**. Screening and testing will be available for children and adults.

NOW, THEREFORE, I, JOHN A. DELANEY, by virtue of the authority vested in me as Mayor of Jacksonville, Florida, do hereby proclaim the month of May, 2002 as

ASTHMA AND ALLERGY AWARENESS MONTH

and urge citizens to join me in supporting the outstanding efforts of The Community Asthma Partnership and in learning more about asthma and allergies in order to improve the quality of life of those afflicted with these illnesses.



IN WITNESS THEREOF, this 30th day of May
in the year Two Thousand Two


MAYOR

CITY OF JACKSONVILLE, FLORIDA



Governor
Bobby Jindal

Proclamation

WHEREAS, more than 19 million Americans suffer from asthma and/or allergic diseases and the medical, social, and economic burdens of these conditions; and

WHEREAS, asthma causes more than 100 million days of restricted activity annually, and the number of hospitalizations and deaths from asthma is increasing in the United States; and

WHEREAS, over four million children in the United States suffer from asthma, making it the most common chronic illness of childhood; and

WHEREAS, the public should be informed that the significant consequences of asthma and allergic diseases can be prevented by the initiation of appropriate medical care; and

WHEREAS, new methods of treatment currently available can greatly improve the quality of life for both parents and their families.

NOW,
THEREFORE, I, Bobby Jindal, Governor of the State of Louisiana, do hereby proclaim May, 2011 as

ASTHMA AWARENESS MONTH
in the State of Louisiana.



Attest By
The Governor


Secretary of State

*In Witness Whereof, I have hereunto set
my hand officially and caused to be affixed the
Great Seal of the State of Louisiana, at the
Capitol, in the City of Baton Rouge, on this*
the 1st day of May
A.D., 2011


Governor of Louisiana



City of Fountain Valley

Proclamation

Asthma Screening Month

WHEREAS, asthma is a chronic inflammation of the lung airways that causes coughing, chest tightness, wheezing or shortness of breath; and

WHEREAS, an estimated 17 million Americans have asthma, of whom 4.8 million are under the age of 18; and

WHEREAS, the prevalence of asthma is increasing, having risen sixty percent since 1979, affecting all ages, races and gender groups and causing upward to 5,000 deaths per year; and

WHEREAS, asthma is often hereditary and such allergens as pollen, dust, animal dander, drugs, food additives, viral respiratory infections and physical exertion can trigger an asthma attack. Weather conditions, such as extreme dryness, dampness or wind, can intensify an asthma condition; and

WHEREAS, though a cure for asthma remains elusive, there are effective treatments that include the identification and avoidance of allergens, the usage of drug therapy and the development of emergency plans in case of severe attacks. Immunotherapy or allergy vaccinations are options when symptoms occur year-round or during the majority of the year; and

NOW, THEREFORE, I, Larry Crandall, Mayor of the City of Fountain Valley, on behalf of the City Council, do hereby proclaim May 2001 as Asthma Screening Month and urge all citizens of Fountain Valley to join us in promoting greater awareness of the importance of combating this debilitating condition.



Larry Crandall
Larry R. Crandall, Mayor
May 12, 2001

Office of the Mayor
City of Orlando

Proclamation

WHEREAS, more than 12 million Americans suffer from asthma and/or allergic diseases and the medical, social and economic burdens of these conditions; and

WHEREAS, asthma causes more than one hundred million days of restricted activity annually, and the number of hospitalizations and deaths from asthma is increasing in the United States; and

WHEREAS, over four million children in the United States suffer from asthma, making it the most common chronic illness of childhood; and

WHEREAS, informing the public that the significant consequences of asthma and allergic diseases can be prevented by the initiation of appropriate medical care; and

WHEREAS, new methods of treatment currently available can greatly improve the quality of life for both patients and their families;

NOW, THEREFORE, I, **GLEND A E. HOOD**, Mayor of the City of Orlando, hereby do Proclaim the month of May, 1997, as

"ASTHMA AND ALLERGY AWARENESS MONTH"

in the City of Orlando.

IN WITNESS WHEREOF, I herewith have set my hand and caused the Seal of the City of Orlando to be affixed this 23rd day of April, 1997.

Glenda E. Hood

Mayor of Orlando
Glenda E. Hood



Doctor urges asthma awareness

LEWISTON — Dr. Andrew Carey, Lewiston allergist, conducted free asthma screenings on May 16 and 17 at the Auburn Mall.

Of the 89 adults and children screened, approximately half had abnormal pulmonary function tests and 53 participants were referred for an asthma diagnosis.

Gov. Angus King has proclaimed that May is Asthma and Allergy Awareness Month. The free screenings were conducted as part of the Nationwide Asthma Screening Program to promote early detection and effective treatment of asthma. This screening program was sponsored by the American College of Allergy, Asthma and Immunology and Carey.

"Asthma is a disease that affects more than 12 million Americans and kills at least 5,000 each year," Carey said. "The screening program is an important step to help people realize they don't have to make lifestyle compromises if they have asth-



Lewiston allergist Dr. Andrew Carey, right, receives a proclamation from Gov. Angus King that May is Asthma and Allergy Awareness Month. Carey did free asthma screenings recently at the Auburn Mall.

ma. By informing people about the symptoms of asthma and advances in treatment, we can help improve the quality of their lives."

Asthma is characterized as a chronic inflammation of the lung airways that causes coughing, chest tightness, wheezing or shortness of breath. Its exact

cause is unknown, but an asthma attack can be triggered by allergens such as pollen, dust and animal dander, certain drugs and food additives, viral respiratory infections or physical exertion.

More information about asthma is available by calling 782-2420.

V. SCREENING PROGRAM MATERIALS

To support your screening, the College has developed educational and support materials for adults and children including posters, fliers, a patient education video and other materials. These materials are available to download via email after you send in your registration form.

Screening Program banners are provided for your Teva sales representative to deliver to you. If you do not receive a banner, please contact your local Teva sales representative or the College at info@acaai.org or 847-427-1200 at least one week prior to your event.

Materials available to download include:

Posters. Color and black and white posters promote screening program awareness. General, EIB and children's' posters are available. Information about your local screening can be added to the bottom of the poster.

Asthma and Allergy Screening Program Registration Forms. Each person attending an asthma screening must complete the asthma and allergy screening program registration form before being screened by an allergist. Page 1 of the form gathers demographical information and serves as a release form to be signed by the individual being screened. If the participant is under the age of 18, the release section of the form should be signed by a parent or guardian. Page 2 is a questionnaire that asks participants about their breathing problem or asthma and allergies. There are three versions of Page 2, each targeted to a different age group: adults 15 and over, kids 8-14, and children 7 and under.

“Allergist” Brochure. The brochure provides an overview of allergists, what conditions they treat and what to expect from a consultation. ACAAI members can order free copies of this brochure in the [ACAAI Member Store](#) by clicking on the Allergist Public Education Brochures icon.

“LQ Test” and “Kids’ Asthma Check” Fliers. The College’s *LQ Test* should be available for distribution to adults 15 and over at the screening program. The *LQ (Life Quality) Test* is a series of “yes” or “no” questions about breathing and can be self-administered by screening program participants. Two versions of *Kids’ Asthma Check* brochures also can be provided for children attending the screenings – one for children ages 8 through 14 to answer themselves, and one for parents of children up to age 7 to complete on behalf of their children.

“Running Into Breathing Problems” Flier. A flier for screening program participants who may be at risk for exercise-induced bronchoconstriction is available. The flier describes the causes, symptoms, treatments and the allergist’s role in treating asthma and exercise or EIB.

“Advice from Your Allergist on Rhinitis” Brochure. A brochure discussing rhinitis, including information about the condition and treatment, can be provided for those at risk for nasal allergies. Order copies of this brochure in the [ACAAI Member Store](#) by clicking on the Allergist Public Education Brochures icon.

Patient Education video. Participants waiting to be screened and other passers-by can view this video to learn more about asthma symptoms and treatment, and allergists as specialists in asthma care.

Children’s Activity Sheet. Color or black and white activity sheets can be given to children.

VI. EXERCISE-INDUCED BRONCHOCONSTRICTION (EIB)

An estimated 80 percent to 90 percent of the 26 million Americans with asthma have exercise-induced bronchoconstriction (EIB). In addition, 10 percent of the general population without asthma has EIB.

In an effort to increase EIB awareness through the screening program, this section offers tips and tools on how to reach people at risk. You can do this by:

- Bringing your screening to fitness and sports-related sites, events and groups;
- Using these outlets to promote screenings at other locations.

Materials include:

- [Background information on EIB](#)
- [Tips for identifying fitness and sports-related sites, events and groups](#)
- Instructions for publicity including [sample letters](#), [articles](#) and enclosures to promote a screening
- [Slides for a presentation on EIB](#) (full PowerPoint slide show can be downloaded from this disk)
- A sample [thank-you letter](#)

EIB OVERVIEW

The screening program offers an excellent opportunity to reach people who may be at risk for EIB. Many people who attend your screening may have heard of “exercise-induced asthma” or if they have been previously diagnosed with asthma, they may know if exercise is one of their triggers. Others, though, may not realize they may be at risk for EIB or that it’s possible to have the condition with or without asthma. The following provides an overview on EIB and includes key messages to share with screening program participants that might be at risk.

- **Prevalence.** An estimated 80 percent to 90 percent of the 26 million Americans with asthma, including 7 million children, have EIB. In most cases, EIB is a symptom of asthma and, sometimes it can be asthma’s only symptom. But the condition also can affect people who don’t have asthma. About 10 percent of the general population without asthma has EIB. EIB is more common in elite athletes who exercise strenuously over prolonged periods of time. EIB alone may be reported in up to 50 percent of elite athletes, particularly those who participate in strenuous cold weather sports such as cross country skiing or hockey. Many of these athletes may not even realize they have the condition.
- **Exercise-Induced Asthma.** While more people are probably familiar with the term “exercise-induced asthma,” it’s not accurate. While exercise can trigger asthma, it does not cause it. EIB also can affect people who don’t have asthma but still have breathing problems during or after exercise.
- **Causes.** Rapid breathing during exercise can cause the airways to dry out and become irritated. People with EIB also may be very sensitive to changes in the air’s temperature and humidity. The condition is often worse when exercising in cold air, which is drier than warm air. Also, breathing through the mouth, which does not warm and humidify the air like the nose, can make the symptoms worse.
- **Symptoms.** EIB symptoms may start after a few minutes of hard, non-stop exercise, or may not appear until several minutes after stopping exercise. Symptoms may include:
 - difficulty breathing
 - a tight feeling in the chest
 - coughing
 - wheezing

Avoidance of exercise, especially in children, may also be a sign of EIB.

- **Diagnosis and Treatment.** It is important that people with EIB or EIB with asthma be diagnosed and treated early to help prevent damage to the lungs. When EIB is the only symptom of asthma, it may be hard to diagnose, since coughing or shortness of breath during exercise may have many causes. An allergist has special

expertise in diagnosing EIB or EIB with asthma. To make a diagnosis, the allergist will:

- **Take a medical history.**
- **Ask about symptoms, such as when they occur,** how often they happen and what seems to trigger them. The National Heart, Lung and Blood Institute’s National Asthma Education and Prevention Program “Expert Panel Report 3: Guidelines for the Diagnosis and Management of Asthma” states that a 15 percent decrease in PEF or FEV₁ (with measurements taken before and after exercise at 5-minute intervals for 20-30 minutes) is compatible with EIB.
- **Do a physical exam.**
- **Measure how the lungs are working.**

Treatment will depend on how serious the symptoms are and whether a person has EIB with or without asthma. There are two main types of these medicines:

- **Quick Relief.** Quick-relief inhalers are used to stop symptoms and should be carried at all times. To prevent EIB symptoms, patients may take these medicines 15 minutes to 20 minutes before exercise to open the lungs’ airways.
 - **Long-term Control.** There are several medicines that people with asthma take regularly – sometimes twice a day – to help prevent symptoms and attacks. These work by treating the inflammation – reducing swelling – and build-up of mucus in the lungs.
- **Prevention.** In addition to medications, these steps also can prevent or reduce EIB symptoms:
 - warm up at least 10 minutes before exercise
 - breathe through the nose
 - use a face mask or scarf when in cold weather
 - limit exercise if a viral infection, such as a cold, is present or when air temperatures are cold
 - cool down after exercise; and
 - use a quick-relief inhaler shortly before exercise

People who have EIB with asthma and allergies should avoid exercising outside when pollen counts are high or around pets if these are allergy triggers.

Teva Respiratory recently conducted a survey on EIB. Key findings include:

- Four of five asthma patients report experiencing symptoms after sports, exercise, play or other physical activity, but less than a quarter have been diagnosed with EIB.
- Less than a quarter of asthma patients with exercise-related symptoms take quick-relief medicine, like albuterol, always or most of the time prior to exercising.

- Patients' understanding of exercise-related symptoms and their management are different than healthcare providers which may lead to miscommunications between physicians and patients regarding proper asthma management.
- Results of the survey suggest that exercise-related symptoms among asthma patients may reflect uncontrolled or improperly managed asthma.
- The problem of EIB is not limited to persons with asthma with more than a quarter of the adult cross-section reporting respiratory symptoms during or after sports, exercise, play or other physical activities, while less than one in five have been diagnosed with EIB.

IDENTIFYING FITNESS AND SPORTS-RELATED SITES, EVENTS AND GROUPS

Sporting events, such as marathons, 5K races or tournaments, often attract large crowds and can provide an opportunity for increasing awareness of asthma, EIB and nasal allergies. Fitness centers, YMCAs, park districts, recreational sporting leagues and youth sports programs also are potential outlets that can serve as screening sites or venues you can contact to help spread the word about a screening at another location.

There are a variety of ways you can research and identify these events and groups in your community:

- Contact your local park district, the city department of recreation, chamber of commerce or tourism bureau to see what fitness or sporting events are scheduled. These groups may be able to tell you about recreational softball, basketball and other sports leagues, as well as special events like 5K runs, walk-a-thons and similar activities.
- Reach out to local chapters of national nonprofit organizations that may offer local fitness events. For example, some local chapters of the American Cancer Society offer Relay for Life events, a 24-hour walk/run, and the American Lung Association conducts Asthma Walks in some communities. Other national organizations, like the YMCA, sponsor sporting events. Also check with allergy and asthma patient support groups about events they may be involved with.
- Consider local nonprofit groups that serve your community and may offer fitness events or tournaments. Schools also may conduct fund-raising fitness-related events.
- Contact fitness centers and health clubs in your community. The phone book will have a listing. Or, visit healthclubs.com for a list of nearby centers.
- Contact local sports teams. Screening program coordinators have offered programs at baseball stadiums, hockey arenas and soccer fields.
- Review local publications and websites to check for event listings in your area. Craigslist.com and scout.me are two sites that offer places for people to post events, and there may be other sites that serve your area.
- Reach out to school nurses, gym teachers and coaches at area schools to ask for their help in alerting kids and parents to the screening.
- Use national organizations to find resources for local sports, fitness and recreation leagues. Many offer information on their websites about finding local chapters:

- Little League Baseball organizes baseball and softball leagues for children ages 5-18 throughout the U.S. and around the world. Information on finding a local team can be accessed at this site:
[http://www.littleleague.org/learn/Start Find a League/LLB League Finder.htm](http://www.littleleague.org/learn/Start_Find_a_League/LLB_League_Finder.htm)
- YMCA is the largest nonprofit community service organization in America, working to meet the health and needs of 21 million men, women and children. Local YMCAs often bring together people of different backgrounds and frequently offer sporting events or exercise equipment and instruction. Find your local YMCA by visiting <http://ymca.net/>.

PUBLICITY

Whether you are conducting a screening with a fitness or sports-related site, event or group or some other location, you can still use these outlets to increase EIB awareness and publicize your screening.

Newsletter Article. Many health clubs and sports leagues provide a newsletter to their members that may include health information and note community events such as a screening. You can provide copy for an article on EIB, asthma, allergies and the upcoming screening.

Website Posting. Websites offer a quick and simple way for a group to help promote your screening. You can provide the newsletter article or a shorter [news brief](#) as suggested copy they can post along with a link to the ACAAI public website at acaai.org/nasp which lists all the screening program locations.

Email. If the group regularly communicates by email with its members, you can ask if they would be willing to include information about your screening.

Posters/Fliers. EIB-focused posters and a flier can be downloaded from the online toolkit. Use these to help promote EIB awareness and publicize a screening. Ask if you can display the poster or distribute fliers.

EIB PowerPoint Presentation. The PowerPoint slides provide an overview for the public on the condition, who is at risk and how to treat it. You can use the presentation to promote your screening in advance to fitness and sports-related groups or you can use it on-site at the event.

Samples of the above promotional materials are included in this section.

If you are conducting a screening at fitness or sports site, you can talk to your contact at the organization to determine the most appropriate publicity opportunities. If you want to reach out to other health, fitness or sports-related groups not affiliated with your screening program site, a suggested cover letter for contacting them is also provided in this section.

SAMPLE NEWSLETTER ARTICLE FOR FITNESS, SPORTS-RELATED PUBLICATIONS

The following article can be provided for publication in a fitness center, sports-related athletic event newsletter.

Don't let exercise take your breath away Get checked out at free screening

Running into breathing problems when you exercise? If your chest feels tight, you have trouble catching your breath or you cough during or after exercise, you might have a condition called exercise-induced bronchoconstriction or exercise-induced bronchospasm, also called EIB.

EIB is a condition in which the linings of the lung's airways become inflamed and swollen during exercise. Muscle spasms limit airflow to the lungs, making it hard to breathe. In most cases, EIB is a symptom of asthma and, sometimes, it can be asthma's only symptom.

Find out if your breathing problems might be asthma or EIB by visiting a free screening at **(name of fitness center/sports group/event)** at **(time)** on **(date)**. If you've already been diagnosed with asthma or EIB, the screening can help you make sure your condition is under control. The screening also will determine if you are at risk for nasal allergies.

"Often people who get short of breath when they exercise don't think of themselves as being at risk for asthma or some other problem like EIB," said **(your name)**, the allergist coordinating the free screening for **(name of fitness center/event)**. "It's important to talk with an allergist about your symptoms so you can get back to the activities you enjoy and not put yourself at risk for uncontrolled disease which can result in emergency room visits, hospitalizations and even death."

Nationally, more than 26 million people have asthma, including 7 million children. Although the exact cause of asthma is unknown, an estimated 80 percent to 90 percent of those with asthma have EIB. About 10 percent of the general population without asthma has EIB, and EIB is more common in elite athletes who exercise strenuously over a long time.

When people exercise, they often breathe rapidly through their mouth instead of their nose which warms and humidifies air. As a result, the cold, dry air that reaches the

bronchial tubes can trigger asthma symptoms. These symptoms typically occur within five to 15 minutes from the start of exercise and may occur for several minutes after exercise has stopped.

During a screening, adults complete a *Life Quality (LQ) Test*. Children under the age of 15 take the *Kids' Asthma Check* to answer questions themselves about any breathing problems. Another version of *Kids' Asthma Check* is available for parents of children up to 8 years of age to complete on their child's behalf. KK

In addition to the *LQ Test* or *Kids' Asthma Check*, participants take a lung function test that involves blowing into a tube and meet with a physician to determine if they should seek a thorough examination and diagnosis.

"This is a completely painless test that takes just a few minutes," said (**your name**). "Getting your condition under control, though, can make a huge difference in your life. I urge anyone who has breathing problems during or after exercising or at any other time, to stop by the free screening."

If you have questions about the asthma screening program, please call (**your name**).

SAMPLE NEWS BRIEF FOR FITNESS WEBSITE

The following article can be provided for a fitness center or athletic event website.

Workout leaving you winded? Get it checked out at free screening

Running into breathing problems when you exercise? If your chest feels tight, you have trouble catching your breath or you cough during or after exercise, you might have a condition called exercise-induced bronchoconstriction or exercise-induced bronchospasm, also called EIB.

EIB is a condition in which the linings of the lung's airways become inflamed and swollen during exercise. Muscle spasms limit airflow to the lungs, making it hard to breathe. In most cases, EIB is a symptom of asthma and, sometimes, it can be asthma's only symptom.

To help you learn if breathing problems might be asthma and to help those already diagnosed find out if their disease is under control, the American College of Allergy, Asthma and Immunology will conduct a screening of the Nationwide Asthma Screening Program at **(place)**, **(time)** on **(date)**. The free screening includes answering questions about your breathing, taking a lung function test which involves blowing into a tube and meeting with an allergist to discuss your results. The screening also determines if you might be at risk for nasal allergies. It is painless and takes about 10 minutes.

SAMPLE LETTER TO APPROACH FITNESS OR SPORTS-RELATED SITE, EVENT OR GROUP ABOUT PROMOTING A SCREENING

The following letter can be sent on your letterhead to approach outlets about publicizing a screening program.

Dear **(Name)**:

A good workout can leave anyone winded, but coughing, wheezing, or shortness of breath during or right after exercise can be a sign of something more serious.

Exercise-induced bronchoconstriction (EIB) is a condition in which the linings of the lung's airways become inflamed and swollen during exercise. Muscle spasms limit airflow to the lungs, making it hard to breathe. In most cases, EIB is a symptom of asthma and, sometimes, it can be asthma's only symptom. It also can affect people who don't have asthma.

To help **(your members, players, students, etc.)** learn if their breathing problems might be asthma or EIB, and to help those already diagnosed find out if their condition is under control, we are offering a free screening at **(time)** on **(date)**. The screening also will determine if you are at risk for nasal allergies.

The screening is part of the American College of Allergy, Asthma and Immunology's Nationwide Asthma Screening Program. Almost 135,000 people have been screened through the program during the last 17 years.

I would like to work with **(name of group)** to promote the availability of this free screening by displaying posters and fliers and including an article or a brief about the program in your newsletter and on your website.

I will give you a call shortly to discuss your interest in these ideas or other opportunities to promote this important public service campaign. In the meantime, please don't hesitate to call me at **(your phone number)**.

Sincerely,

(Doctor's name)

Local Screening Coordinator



Running into breathing problems?

ACAAI American College of Allergy, Asthma & Immunology
Follow the Leader Into the Future

allergist
Find an allergist. Find relief.

This program is supported by



Exercise and Breathing Problems

During or after exercise, do you have:

- shortness of breath
- wheezing or noisy breathing
- coughing
- trouble getting a breath
- chest tightness
- unusual fatigue

You may have exercise-induced bronchoconstriction (EIB)



allergist
Find an allergist. Find relief.
www.AllergyAndAsthmaRelief.org

Exercise and Breathing Problems

EIB vs. Exercise-Induced Asthma

- exercise does not cause asthma but can trigger symptoms
- EIB can affect people who don't have asthma

Exercise and Breathing Problems

Who has EIB?

- 80 percent to 90 percent of people with asthma, including children
- 10 percent of the general population
- 50 percent of elite athletes
- Many don't realize it



Exercise and Breathing Problems

What causes EIB?

- Rapid breathing which irritates and dries out airways
- Changes in temperature and humidity
- Breathing through mouth which does not warm and humidify air



Exercise and Breathing Problems

How do I find out if I have EIB?

See an allergist who will:

- Take medical history
- Ask about symptoms
- Do an exam
- Measure how lungs work



Exercise and Breathing Problems

How is EIB treated?

Your allergist develops treatment plan, medicines might include:

- Quick-relief medicine taken 15 minutes to 20 minutes before exercise to open airways, also carried while exercising
- Long-term control medicine taken every day to treat the inflammation of the airways and help prevent symptoms



allergist
Find an allergist. Find relief.
www.AllergyAndAsthmaRelief.org

Exercise and Breathing Problems

What else can I do to prevent EIB?

- Warm up at least 10 minutes before exercise
- Breathe through the nose
- Use a face mask or scarf in cold weather
- Limit exercise in cold weather or if you have a virus



allergist
Find an allergist. Find relief.
www.AllergyAndAsthmaRelief.org

Exercise and Breathing Problems

What else can I do to prevent EIB?

- Cool down after exercise
- Avoid exercising outside when pollen counts are high if you have allergies



Exercise and Breathing Problems

What type of exercise triggers EIB?

- Endurance sports
 - running
 - soccer
 - biking
 - basketball
 - cross-country skiing
 - ice hockey



Exercise and Breathing Problems

What type of exercise should I do?

- Sports less likely to cause problems
 - Walking
 - Hiking
 - Golf
 - Baseball
 - Football
 - Gymnastics
 - Shorter track and field events
 - Swimming



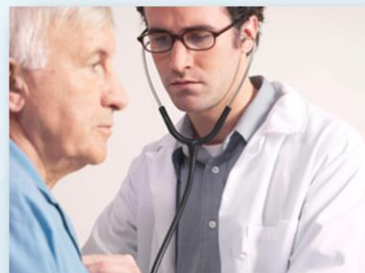
allergist
Find an allergist. Find relief.
www.AllergyAndAsthmaRelief.org

Exercise and Breathing Problems

When should I see an allergist?

Your allergist can help you find relief, especially if breathing problems:

- Stop you from exercising
- Decrease your quality of life
- Include warning signs of asthma



allergist
Find an allergist. Find relief.
www.AllergyAndAsthmaRelief.org

Exercise and Breathing Problems



For more information and to find
an allergist, visit:
www.AllergyAndAsthmaRelief.org

PROGRAM FOLLOW-UP

After you have conducted a screening at a fitness or sports-related group or center, follow up with a thank you-letter and summary of the program results, including how many people were screened and referred. A [sample letter](#) is included in this section.

SAMPLE THANK YOU LETTER

The following letter can be sent on your letterhead to a fitness, sports-related site, event or group contact after your screening at that location.

Dear **(Name of Fitness Center or Event Contact)**:

Thank you for your help with the American College of Allergy, Asthma and Immunology's 2014 Nationwide Asthma Screening Program.

A total of **(number screened)** people were screened and **(percentage)** referred for a professional diagnosis.

We appreciate your assistance in raising awareness about asthma, nasal allergies and exercise-induced bronchoconstriction (EIB). We hope we've helped educate your **(clients/participants)** and staff, and applaud your commitment to improving the quality of their lives.

Please let me know if you have any questions about the screening program results or the program. We hope to work with you again in the future.

Sincerely,

(Your Name)

VII. INNOVATIVE PROGRAM SITES

The Nationwide Asthma Screening Program continues to look at ways to expand the reach of the screening program to help even more individuals who may suffer from asthma, nasal allergies or EIB.

This section details some innovative program sites and is designed to help you bring your screening into the workplace and a special kind of workplace, the state legislature. It includes information on:

- [Screenings](#) in the workplace – scheduling, coordinating and publicizing
- [Screenings](#) at the state capital – scheduling, coordinating and publicizing
- [Program follow-up](#)

SCREENINGS IN THE WORKPLACE

Workplace screenings offer a “win-win” for employers by providing a convenient and valuable service to their employees and, at the same time, keeping them healthy and on the job.

Coordinating and Scheduling

A workplace screening can be conducted with an existing wellness and health fair or as a separate event. Here’s what to keep in mind when planning the event.

- **Staffing.** The company size and type of event will determine the number of volunteer allergists and allied health professionals you will need. For example, if you are working with a large company to conduct an asthma and nasal allergy screening as part of a wellness fair that includes other health information and screenings, the traffic at the screening may be somewhat diluted compared to a stand-alone event. Ask your contact at the company about the expected employee turnout. Will employee spouses and dependents be invited? Sufficient staffing is important since employees may have limited time away from their job and cannot afford to spend too much time waiting to be screened.
- **Appointments.** Some workplace screenings are conducted with scheduled appointments. The appointment schedule is usually coordinated by the employer who announces the screening and invites interested employees to schedule an appointment for the date of the event. Some employers prefer this format, particularly if time away from the job is a concern. If you and the employer decide to schedule appointments, make sure you discuss the time allotted for each, based on the number of volunteers staffing the event.
- **Family Members.** If the employer hasn’t already thought of it, you may want to suggest that family members, particularly children, also be invited to attend the screening.
- **Equipment Needs.** Review your equipment and space needs with the employer to determine what the company will be able to provide and what you will need to bring on the day of the screening. Typically an employer can be expected to provide basic equipment such as tables and chairs, a television/DVD player, easels, clipboards and pens.

PUBLICITY

You will need to coordinate with the employer about how to notify employees. The following provides an overview of the typical opportunities to publicize a workplace screening.

- **Newsletter Articles.** Many companies have an internal newsletter that is periodically distributed to staff. You can provide suggested copy for an article on the importance of the proper diagnosis and treatment of asthma, nasal allergies and EIB, and the upcoming screening. A [sample article](#) is included in this section.
- **Memorandum/Letter/Email.** A company memorandum, letter or email from a member of upper management demonstrates the importance the company places on the event. The correspondence may be accompanied by a copy of the *LQ Test* flier to help employees determine if they should attend the screening.
- **Posters/Fliers.** The posters and fliers included in the electronic screening program support kit promote asthma and allergy awareness and can help publicize the screening. Ask the employer to post the information a few weeks in advance of the screening in high-traffic locations such as a lunchroom, restrooms, employee entrances, etc.
- **Media Coverage.** Since the screening is not open to the general public, advance newspaper, radio and television publicity probably won't be appropriate. However, the employer may welcome on-site or post-event coverage of the screening program and how the company is contributing to its employees' health and well-being. Additional information on securing media coverage is provided in Section IV ([PUBLICITY](#)).

SAMPLE NEWSLETTER ARTICLE

The following article can be provided for publication in a company newsletter.

Don't let asthma, allergies make you wheeze and sneeze

If you are extremely winded during your work out, coughing a night, struggling to take a good, deep breath, or plagued with a runny nose or itchy eyes, you may be experiencing symptoms of asthma, allergies or exercise-induced bronchoconstriction (EIB).

(Name of company) will offer a free screening at **(time)** on **(date)** at **(location)** to help employees learn if they might be at risk for these conditions.

“Too many people suffer unnecessarily,” said **(your name)**, MD, the allergist coordinating the free screening for **(name of company)**. “These conditions are serious, but with the right diagnosis and treatment you can still be active all day and sleep well at night. Don't accept anything less. An allergist can put you on the path to relief. ”

Nationally, more than 26 million people have asthma, including 7 million children. Although the exact cause of asthma is unknown, it can occur at any age. Between 40 million and 60 million have allergies. EIB affects about 10 percent of the population and 80 percent to 90 percent of those with asthma experience the symptoms of difficulty breathing during or after exercise.

During a screening, adults complete a health assessment questionnaire, take a breathing test and meet with a physician to determine if they should seek a thorough examination and diagnosis.

“This is a completely painless test that takes just a few minutes,” said **(your name)**. “Getting your condition under control, though, can make a huge difference in your lifestyle. I urge anyone who thinks they might have asthma or allergies or thinks their disease could be better managed to stop by the free screening.”

If you have questions about the asthma screening program, please call **(employer contact)**.

SCREENINGS AT THE STATE CAPITAL

Your state capital provides a good venue to not only screen for asthma and allergies, but also raise awareness among legislators.

Coordinating and Scheduling

Here's what to keep in mind when planning this special type of screening.

- **Forming Partnerships.** If you are considering a state capital screening, you may want to partner with your local chapter of the American Lung Association (ALA). ALA chapters are often very involved with legislative activities and can be a valuable resource in coordinating an event. They also may be interested in expanding the screening program into an Asthma Awareness Day to help advocate asthma-related issues. Local AAN Outreach Service Coordinators and AAFA chapters also can be contacted. Additional information on working with the ALA and other groups is provided in Section II ([PATIENT SUPPORT GROUPS](#)). If there is a state legislator who has been active in asthma issues or who has asthma, you may want to contact his or her office to inquire about partnering with you as you plan your event.
- **Getting Started.** The first step to holding a state capital screening is to identify the best person to serve as your contact at the capital. If you don't already have such a contact, call the main number at your state capitol building and ask for the person who is in charge of special events. This person often works under the Secretary of State.
- **Invitations.** It is important to determine with your state capital contact if your event will be open to the general public or limited to legislators and staff members. This may be determined by evaluating available space, volunteer staffing and security concerns. Other groups to consider inviting to the event are local asthma coalitions and patient support groups. They may be interested in providing educational information or a display booth.

Work with your contact to determine the most effective way to invite all of the legislators and their staff members. You also may want to suggest inviting family members of state capital staff, particularly children.

- **Event Agenda.** In addition to the screening, you may want to consider a presentation or press conference to further raise awareness of asthma and allergies. In some cases, state capital screenings have been used as an opportunity to present position statements for respiratory-related issues and funding. You also can present information on the Nationwide Asthma Screening Program and allergists' role in early diagnosis and treatment of asthma and allergies. [Suggested message points](#) for a presentation on the program are included in this section.
- **Equipment Needs.** Review your equipment and space needs with the state capital contact to determine what equipment is available and what you will need to bring on

the day of the screening. Typically the state capital can provide basic equipment such as tables and chairs, a television/DVD player, easels, clipboards and pens.

SUGGESTED MESSAGE POINTS FOR STATE CAPITAL PRESENTATION

The following message points can be used in a presentation on the Nationwide Asthma Screening Program.

- The American College of Allergy, Asthma and Immunology is proud to be a part of this event and to lead one of the largest public service campaigns in respiratory care by finding those at risk for asthma and by making sure those who are diagnosed take control.
- The Nationwide Asthma Screening Program has helped adults and children with breathing problems get the help they need through free screenings. Today's event is one of more than 100 at locations across the country.
- The screening program also reaches those who may have nasal allergies as well as those who have difficulty breathing before or after exercise. This condition is called exercise-induced bronchoconstriction or EIB.
- Supported by Teva Respiratory, the program has screened almost 135,000 people and more than half have been referred for a professional diagnosis.
- This would not be possible without the help of thousands of allergists, pulmonologists, nurses, respiratory therapists and allied health professionals who generously volunteer their time and skills to provide the screenings in local communities.
- And yet, we know our work is not done. We know there are still many more people who suffer from undiagnosed and untreated asthma and allergies and we look forward to continuing our campaign to help people breathe easier.
- Asthma and allergies are serious diseases and they should be treated that way. Allergists, who are experts at diagnosing and treating asthma and allergies, can help patients find the source of their suffering and stop it. You should be able to feel good all day and sleep well all night. No one needs to accept anything less.
- I want to thank all of you here today for your interest and support. Please tell others about the free program so we can continue to increase awareness. Encourage those with symptoms to be screened. And stop by the screening yourself. Together we can make a difference.

PUBLICITY

When publicizing your screening, the most important thing to consider is whether the event will be open to the public. If your event will not be open to the general public, you won't use the mass media for publicity. You will need to coordinate with your state capital contact to notify the legislators and staff. The following provides an overview of the typical opportunities to publicize a state capital screening.

- **State Capital Daily Update/Newsletter.** Most state capitals have an internal newsletter that is periodically distributed to staff and posted on bulletin boards. You can provide a brief article on the importance of the proper diagnosis and treatment of asthma and allergies and the upcoming screening. A [sample article](#) is included in this section.
- **Memorandum/Letter/Email.** A memorandum, letter or email from a member of the legislature demonstrates the importance placed on the event. Work with your state capital contact to see if there is a legislator who would be willing to work with you on developing and distributing a letter. A copy of the *LQ Test* flier can help state capital employees determine if they should attend the screening.
- **Posters/Fliers.** The posters and fliers included in the electronic screening program support kit promote asthma and allergy awareness and can help publicize the state capital screening. Ask your state capital contact to post the information a few weeks in advance of the screening in high-traffic locations such as entrances, staff lounges and restrooms.
- **Media Coverage.** If your screening is open to the public or if you plan to hold a press conference, you will want to alert the media. Information about securing media coverage is provided in Section IV ([PUBLICITY](#)).
- **Gubernatorial Proclamation.** A gubernatorial proclamation can be used to focus attention on the screening. Your state capital contact may be able to advise you on the best way to proceed with your request. Most governors have a press secretary or assistant who will be happy to arrange for publicity for the proclamation. Additional information on securing a gubernatorial proclamation is provided in Section IV ([PUBLICITY](#)).

SAMPLE NEWSLETTER ARTICLE

The following article can be provided for publication in the state capital daily update/ newsletter.

Don't let asthma, allergies make you wheeze and sneeze

If you are extremely winded during your work out, coughing a night, or struggling to take a good, deep breath, or plagued with a runny nose or itchy eyes, you may be experiencing symptoms of asthma, allergies or exercise-induced bronchoconstriction (EIB).

A free screening will be offered at **(time)** on **(date)** at **(location)** to help staff and visitors learn if they might be at risk for these conditions.

“Too many people suffer unnecessarily,” said **(your name)**, MD, the allergist coordinating the free screening for at the capital. “These conditions are serious, but with the right diagnosis and treatment you can still be active all day and sleep well at night. Don't accept anything less. An allergist can put you on the path to relief. ”

Nationally, more than 26 million people have asthma, including 7 million children. Although the exact cause of asthma is unknown, it can occur at any age. Between 40 percent and 60 million have allergies. EIB affects about 10 percent of the population and 80 percent to 90 percent of those with asthma experience the symptoms of difficulty breathing during or after exercise.

During a screening, adults complete a health assessment questionnaire, take a breathing test and meet with a physician to determine if they should seek a thorough examination and diagnosis.

“This is a completely painless test that takes just a few minutes,” said **(your name)**. “Getting your condition under control, though, can make a huge difference in your lifestyle. I urge anyone who thinks they might have asthma or allergies or thinks their disease could be better managed to stop by the free screening.”

If you have questions about the asthma screening program, please call **(state capital contact)**.

PROGRAM FOLLOW-UP

After you have conducted a workplace or state capital screening, follow up with a thank-you letter and summary of the program results including how many people were screened and referred. A [sample letter](#) is included in this section.

Also consider keeping in regular contact with the employer/state capital contact to provide information on asthma and allergies, give presentations to groups or submit periodic newsletter articles on allergies and asthma. Suggest that a screening become an annual event.

SAMPLE THANK YOU LETTER

The following letter can be sent on your letterhead to your employer/state capital contact.

Dear **(Name of Employer or State Capital Contact)**:

Thank you for your help with the American College of Allergy, Asthma and Immunology Nationwide Asthma Screening Program.

A total **(number screened)** people were screened and **(percentage)** referred for a professional diagnosis.

We appreciate your assistance in raising awareness about the importance of the proper diagnosis and treatment of asthma and allergies. We hope we've helped educate your employees/staff, and we applaud your commitment to improving the quality of their lives.

Please let me know if you have any questions about the screening program results or the program. We hope to work with you again in the future.

Sincerely,

(Your Name)

VIII. HISPANIC COMMUNITIES/CULTURAL AND ETHNIC GROUPS

Each year, about 10 percent of the participants in the Nationwide Asthma Screening Program are Hispanic, the nation's largest minority population. Other cultural and ethnic groups also may have a special interest in learning more about asthma and allergies, and you can expand your screening by reaching out to specific groups in your community.

This section provides additional background and resources for reaching these groups. It includes information on:

- [The Hispanic community and geographic distribution](#)
- [The importance of culture](#)
- [Overcoming language barriers](#)
- [Hispanic and special interest media](#)
- [Community outreach](#)

HISPANIC COMMUNITY OVERVIEW

About 17 percent of residents in the United States are of Hispanic origin, and the number of Hispanics – about 53 million – is larger than the entire population of Canada. The Census Bureau projects that there will be 102.6 million Hispanics in the United States by 2050.

If you are considering including the Hispanic community for your screening, it may be helpful to have background on this growing and diverse population. The following provides an overview of the characteristics of the Hispanic community.

- **Ethnic Subgroups.** There are five major ethnic subgroups within the Hispanic population: Mexican, Central or South American or other Hispanic or Latino origin, Puerto Rican, Cuban and Dominican.
- **Hispanics and Health.** Hispanics have lower mortality rates than the overall population, but are at greater risk for a number of chronic diseases. The population, as a whole, has a number of positive health factors including balanced diet, low levels of smoking and illicit drug use and a strong family culture. However, these positive attributes tend to weaken as the population assimilates and adopts negative characteristics of the general population.

Hispanics have one of the lowest rates of health insurance coverage of all racial and ethnic groups and are the least likely to see a physician or have a usual source of medical care. They also are the most likely to underutilize available health care services because of cultural barriers.

THE IMPORTANCE OF CULTURE

Culture plays an important role in how people approach their health and health care. For example, in some populations, people may be reluctant to mention symptoms they believe to be insignificant – unless they are asked about those symptoms.

In screening people of Hispanic communities and other cultural and ethnic groups, you want to keep in mind:

- Perception of illness, disease, causal factors and treatment vary by culture.
- Diverse belief systems may exist with respect to health, healing and wellness.
- Culture influences help-seeking behaviors and attitudes toward health care providers.
- Individual preferences and culture affect traditional and non-traditional approaches to health care.
- Communications between the patient and health care provider must be clear.
- Patients have personal experiences of biases within health care systems.

It's important not to assume that an individual will follow the cultural values or behavior patterns of an ethnic heritage. However, you will want to be familiar with these common cultural characteristics of the Hispanic community:

La familia. The family is integral to many Hispanics, extending to not only parents and siblings, but grandparents, aunts, uncles, cousins, close friends and godparents of the family's children. Family members often accompany one another to medical visits and are consulted when someone is sick or injured.

Respeto. Respect dictates the appropriate behavior used with others based on age, sex, social position, economic status and authority. For example, older adults expect respect from youngsters, women from men, men from women, adults from children, teachers from students, employers from employees.

As a physician, you will be afforded a high level of *respetos* with most Hispanic patients valuing your direction and services. *Respeto* also is mutual, and patients will expect you to treat them with returned respect. To assure the respect of Hispanic patients, you should:

- Be more formal in interactions with older patients. You may want to address Hispanic adults as *Señor* (Mr.), *Don* (Sir), *Señora* (Mrs.) or *Doña* (Madam).

- Even if you do not speak Spanish, you may want to greet the patient in Spanish with “*Buenos días*” (Good morning) or “*Buenos tardes*” (Good afternoon) indicating your positive attitude toward Hispanics
- Always use the formal *usted* (you) rather than the informal *tú* (you), unless a patient suggests that you use the informal.
- Encourage the screening participant to ask questions.

Personalismo. Personal or warm and friendly relationships are expected by Hispanics to convey that you are interested in the patient as a person. This approach also puts the patient at ease before the screening.

Confianza. Trust is often developed with Hispanic patients who have a long-term relationship with their physicians.

OVERCOMING LANGUAGE BARRIERS

Language and communications issues are frequently cited as reasons Hispanics do not access health care or medical treatment. These barriers also are seen in other cultural and ethnic groups. Here are some tips to help you overcome these barriers during your screening.

Bilingual/bicultural physicians. If you are reaching out to Hispanics or other ethnic and cultural groups that may not speak English, it's ideal to have bilingual/bicultural physicians and staff that speak the same language as the participants in your screening. This helps create a connection between the screening program participant and staff. If the participant and the physician are from the same culture, there may be a mutual understanding of beliefs and health practices.

Keep in mind that a few years of a language course in high school or college probably isn't enough to discuss health matters with a screening participant. It's also important to avoid using two languages in one sentence, which may be confusing or change the meaning of what you are trying to say.

Interpreters. If you are not bilingual/bicultural, you may need to rely on the family members of the screening program participants or others to interpret for you. It's important to note that "ad hoc" interpreters or people who are not trained as medical interpreters may not provide an accurate interpretation.

Unfortunately, ad hoc interpreters can sometimes editorialize instead of providing a direct interpretation. This can occur by omitting, substituting or incorrectly using words or phrases. If you have an ad hoc interpreter at your screening, encourage the interpreter to translate everything the screening participant says rather than trying to summarize.

Another option you may consider for an interpreter are community-based organizations representing various cultural and ethnic groups. These organizations may have a staff member who is willing to volunteer as an interpreter at your event.

In instances when no interpreter is available, follow these tips:

- Speak slowly and clearly
- Use simple words and short sentences
- Use hand gestures as much as possible

Written Materials. Whenever possible, provide written public education materials to reinforce the information you discussed during the screening.

Some screening program coordinators also have had materials translated in other languages for screenings targeting cultural and ethnic groups. It's important to remember that translating materials is complex and may require the services of a

professional who can take into account cultural considerations and appropriate reading levels.

HISPANIC AND SPECIAL INTEREST MEDIA

Hispanic and special-interest media provide one of the most effective ways to reach the Hispanic community and other cultural and ethnic groups with information about your screening.

These media, which are often very receptive to information about public service programs targeting their audiences, may require translated materials. Some media may translate the media materials for you.

Sample Spanish-language media materials, including a [news release](#), [public service announcements](#) and [fact sheet](#), are included in this section. You can use the materials according to the instructions outlined in Section IV ([PUBLICITY](#)).

Keep in mind when you follow up with the media that they may request an interview with someone who speaks the language, so you will want to be ready with a bilingual spokesperson who can discuss asthma and the program.

SAMPLE SPANISH-LANGUAGE NEWS RELEASE

Mail, email or hand deliver the following news release to: radio/television talk show producers, health reporters, newspaper medical writers/editors and radio/television news reporters.

comunicación

Persona contacto del medio de

(Your Name)

(Your Phone Number)

Evaluaciones de asma y de alergias nasales gratis ofrecidas a nivel nacional *Nuevas herramientas brindarán alivio contra la moquera, el estornudo y el resuello para más estadounidenses*

(Your City, State, Date) – Los adultos y niños con síntomas tales como respiración sibilante (resuellos), tos o falta de aliento pueden determinar si están en riesgo de sufrir asma a través del 18º Programa Nacional de Exámenes de Evaluación del Asma. Y, como algo nuevo este año, los participantes podrán ver si su moqueo nasal o su comezón en los ojos son debidos a alergias nasales.

La evaluación gratis se realizará en **(hour, date, place)**, una o más de 100 [evaluaciones gratis de asma y alergias](#) a través de la campaña de servicio público del Colegio Americano de Alergia, Asma e Inmunología (American College of Allergy, Asthma and Immunology's - ACAAI) que ayuda a aquellos con dificultades respiratorias que podrían ser asma. El programa del 2014 también ofrecerá exámenes para detectar alergias nasales, frecuentemente conocidas como fiebre del heno, y la broncoconstricción inducida por el ejercicio (EIB, por sus siglas en inglés), problemas de respiración que ocurren durante o después de hacer ejercicio.

“El asma y las alergias muy frecuentemente están conectados, y nosotros ofrecemos las herramientas y los recursos, ambos disponibles en las evaluaciones y en línea, para darle la oportunidad a las personas de ver si están en riesgo y guiarlos para que obtengan alivio”, indicó el alergista **(Your Name, Your Practice)**. “La evaluación es rápida, sin dolor y gratuita, y ahora verifica tres condiciones que podrían afectar tu calidad de vida”.

Hay herramientas en línea disponibles en [AllergyAndAsthmaRelief.org](#), incluyendo una lista de los lugares donde se realizan las evaluaciones y la herramienta interactiva [MyEIBJournal.org](#) que les permite a aquellos que sufren de broncoconstricción inducida por el ejercicio (EIB) seguir sus síntomas y actividades de

ejercicio y compartirlos con su alergista. Más de 26 millones de estadounidenses, incluyendo 7 millones de niños, padecen de asma. La enfermedad ocasiona casi 3,500 muertes al año. Los ataques de asma a menudo son causados por alérgenos tales como el polen, el polvo y la caspa de animales, ciertos medicamentos y aditivos de alimentos o infecciones respiratorias. No obstante que se desconoce la causa exacta del asma, hay disponibles muchos tratamientos para controlar esta inflamación crónica de las vías respiratorias en los pulmones.

Las alergias nasales afectan de un 10 por ciento a un 30 por ciento de los adultos y hasta un 40 por ciento de los niños. La rinitis alérgica puede ser estacional, donde los síntomas aparecen por la sensibilidad al polen de los árboles, hierbas o malas hierbas, o a las esporas de moho en el aire. A veces, la sensibilidad a los ácaros del polvo doméstico, la caspa de los animales o las cucarachas pueden provocar una reacción, conocida como rinitis alérgica perenne.

Entre un 80 por ciento y un 90 por ciento de las personas con asma también tienen broncoconstricción inducida por el ejercicio (EIB) y la condición afecta a un 10 por ciento de estadounidenses que no tienen asma. Cuando las personas hacen ejercicio, con frecuencia ellos respiran rápidamente a través de la boca en lugar de permitir que su nariz caliente y humidifique el aire. El aire frío y seco que llega a los tubos bronquiales puede causar dificultades respiratorias dentro de cinco a quince minutos después de iniciar el ejercicio y podría ocurrir durante varios minutos después de detener el ejercicio.

“Las alergias y el asma son enfermedades graves y por tanto, hay que prestarles mucha atención. Los diagnósticos equivocados y los tratamientos inadecuados pueden tener graves consecuencias para la salud”, sostuvo (**Your Name**). “Los alergistas certificados para ese fin son los profesionales de salud mejor capacitados para realizar exámenes de alergia y tratar enfermedades alérgicas efectivamente para que las personas con asma, alergias o broncoconstricción inducida por el ejercicio (EIB) puedan trabajar, hacer ejercicio y dormir toda la noche sin síntomas”.

Los alergistas trabajan conjuntamente con otros profesionales de atención médica para conducir evaluaciones gratuitas en centros comerciales, centros cívicos, ferias asistenciales y otros lugares a través del país. Las evaluaciones también ofrecen a las personas que ya han sido diagnosticadas la oportunidad de conocer si su condición está bajo control.

Durante la evaluación, los adultos completan una *Prueba de Calidad de Vida* desarrollada por el ACAAI. Los niños menores de 15 años de edad completan la *Verificación de Asma para Niños* que les permite contestar por sí mismos preguntas acerca de problemas respiratorios, y hay otra versión disponible para los padres de niños de hasta 8 años de edad que ellos pueden rellenar a nombre del niño. La evaluación también incluye preguntas sobre alergias.

Para detectar el asma y la broncoconstricción inducida por el ejercicio (EIB), los participantes se someten a una prueba de función pulmonar en la cual ellos soplan en un tubo. Todos los participantes se reúnen con un alergista para determinar si ellos deben someterse a una evaluación y diagnóstico rigurosos para cualquiera de las condiciones.

Teva Respiratory apoya el Programa Nacional de Exámenes de Evaluación del Asma.

Acerca del ACAAI

El ACAAI es una organización médica profesional con sede en Arlington Heights, Ill., que promueve la excelencia en la práctica de la subespecialidad de alergias e inmunología. El Colegio, compuesto por más de 6,000 alergistas-inmunólogos y profesionales de atención médica relacionada, fomenta una cultura de colaboración y simpatía en la cual sus miembros trabajan conjuntamente y con otros para los objetivos comunes de atención al paciente, educación, defensa de los pacientes e investigación.

Para aprender más sobre alergias y el asma, someterse a una prueba de alivio y buscar a un alergista, visite www.AllergyAndAsthmaRelief.org

En resumen

- Hay evaluaciones gratuitas de asma y alergias disponibles para aquellos que aún no han sido diagnosticados o que no están seguros del control de su condición.
- La rinitis alérgica afecta de un 10 por ciento a un 30 por ciento de los adultos y hasta un 40 por ciento de los niños.
- 27 millones de estadounidenses, incluyendo 7 millones de niños, padecen de asma.
- Mayo es el Mes Nacional para la Concientización sobre el Asma y las Alergias. Visite AllergyAndAsthmaRelief.org para informarse sobre lugares de evaluación cercanos.

#

**SPANISH-LANGUAGE TELEVISION OR RADIO PUBLIC SERVICE ANNOUNCEMENT
30-SECOND ANNOUNCER-READ SCRIPT**

**ANUNCIO DE SERVICIO PÚBLICO A TRAVÉS DE RADIO Y TELEVISIÓN
GUIÓN DE 30 SEGUNDOS LEÍDO POR UN ANUNCIADOR**

PATROCINADOR: EL COLEGIO AMERICANO DE ALERGIA, ASMA E
INMUNOLOGÍA

TEMA: EXÁMENES GRATUITOS DE EVALUACIÓN DEL ASMA

DURACIÓN: 30 SEGUNDOS

ANUNCIADOR:

LOS ADULTOS Y NIÑOS CON SÍNTOMAS DE ASMA TALES COMO RESPIRACIÓN SIBILANTE (RESUELLOS) TOS O FALTA DE ALIENTO PUEDEN DETERMINAR SI ESTÁN EN RIESGO DE SUFRIR ASMA A TRAVÉS DEL PROGRAMA NACIONAL DE EXÁMENES DE EVALUACIÓN DEL ASMA. COMO ALGO NUEVO ESTE AÑO, USTED TAMBIÉN PODRÁ VER SI SU MOQUEO NASAL O SU COMEZÓN EN LOS OJOS SON DEBIDOS A ALERGIAS NAsALES. ALERGISTAS DE LA LOCALIDAD ESTARÁN OFRECIENDO EXÁMENES GRATUITOS DE EVALUACIÓN EL PRÓXIMO **(DATE)** DE **(START TIME)** A **(END TIME)** EN **(PLACE)**. SI DESEA MÁS INFORMACIÓN, LLAME AL **(YOUR PHONE NUMBER)**.

**SPANISH-LANGUAGE TELEVISION OR RADIO PUBLIC SERVICE ANNOUNCEMENT
15-SECOND ANNOUNCER-READ SCRIPT**

**ANUNCIO DE SERVICIO PÚBLICO A TRAVÉS DE RADIO Y TELEVISIÓN
GUIÓN DE 15 SEGUNDOS LEÍDO POR UN ANUNCIADOR**

PATROCINADOR: EL COLEGIO AMERICANO DE ALERGIA, ASMA E
INMUNOLOGÍA

TEMA: EXÁMENES GRATUITOS DE EVALUACIÓN DEL ASMA

DURACIÓN: 15 SEGUNDOS

ANUNCIADOR:

¿ESTÁ USTED O SU NIÑO ESTORNUDANDO O RESOLLANDO? ALERGISTAS DE LA LOCALIDAD ESTARÁN OFRECIENDO EXÁMENES GRATUITOS DE EVALUACIÓN DEL ASMA Y ALERGIAS EL PRÓXIMO **(DATE)** DE **(START TIME)** A **(END TIME)** EN **(LOCATION)**. SI DESEA MÁS INFORMACIÓN, LLAME AL **(YOUR PHONE NUMBER)**.

SPANISH-LANGUAGE ASTHMA FACTS

DATOS SOBRE EL ASMA

- El asma es una inflamación crónica de las vías respiratorias que causa tos, congestión en el pecho, respiración sibilante (resuellos) o falta de aliento.
- Aproximadamente 26 millones de estadounidenses padecen de asma; 7 millones son menores de 18 años.
- El asma es causa de la muerte de 3,500 personas al año.
- El asma resulta en 456,000 hospitalizaciones y en 1.75 millones de visitas a la sala de urgencias.
- El asma es la enfermedad crónica de mayor frecuencia entre la niñez, y es la causa de 10.5 millones de días de ausencia en la escuela cada año. Además es la causa de 14.2 millones de días de ausencia en el trabajo.
- El costo económico aproximado del asma es de \$20,700 millones (en EEUU \$20.7 billones) anuales.
- Los gastos médicos directos asociados con el asma, incluso la atención de hospital, los servicios de médicos y los medicamentos, se calculan en \$15,600 millones (en EEUU \$15.6 billones) anuales.
- Los gastos médicos indirectos, incluso los días de ausencia en el trabajo para los adultos que sufren de asma o que cuidan a niños con asma, totalizan \$5,100 millones (en EEUU \$5.1 billones) al año.
- Los desencadenantes que pueden iniciar un ataque de asma incluyen alérgenos tales como el polen, el polvo, la caspa de animales, los medicamentos y aditivos de alimentos, lo mismo que infecciones respiratorias virales y el esfuerzo físico.
- A menudo, el asma es hereditaria.
- Las condiciones climatológicas extremas como las sequías, humedad o vientos fuertes pueden empeorar una afección de asma.
- El tratamiento eficaz del asma incluye la monitorización de la enfermedad con un flujómetro, la identificación y prevención de los desencadenantes alérgenos, la utilización de terapias de medicamentos tales como los broncodilatadores y los agentes antiinflamatorios, y el desarrollo de un plan de emergencia para los ataques graves.
- Existen dos tipos de medicamentos para el asma: Medicamentos de control de largo plazo y de alivio rápido. Los medicamentos de control de largo plazo son preventivos, y se toman diariamente para lograr y mantener el control de los síntomas del asma. Los medicamentos de alivio rápido se utilizan para el tratamiento de los ataques de asma. Estos alivian los síntomas rápidamente y se toman según la necesidad.
- Algunos de los medicamentos más eficaces para el control del asma son los corticosteroides inhalados, los cuales son medicamentos antiinflamatorios. Al tomarlos tempranamente y según las indicaciones, estos medicamentos bien tolerados y seguros pueden mejorar el control del asma y normalizar la función pulmonar.

- Se debe considerar la inmunoterapia o las vacunas antialérgicas si el asma se desencadena por exposición a alérgenos inevitables, si los síntomas ocurren todo el año o durante la mayor parte del mismo, o si fuese difícil controlar los síntomas con medicamentos.

COMMUNITY OUTREACH

Community-based organizations are often helpful in assisting cultural and ethnic groups gain access to health care and medical treatment. Outreach to these community groups can add to the success of your screening and provide partnership opportunities.

Organizations

To help you identify community-based organizations that will help you reach Hispanics and other ethnic and cultural groups for your screening, ask your patients, staff and others who are a part of these communities the names of key respected organizations. Your local Chamber of Commerce also may be able to direct you to organizations.

Some community-based organizations are affiliated with national organizations that have local chapters throughout the United States. Listed below is information on several key groups.

- League of United Latin American Citizens (LULAC) is the largest and oldest Hispanic organization with members throughout the United States and Puerto Rico. The organization advances the economic condition, educational attainment, political influence, health and civil rights of Hispanic Americans through community-based programs operating at almost 900 LULAC councils nationwide. Links to local councils can be accessed at LULAC.org. You also can contact the national headquarters of LULAC at 202-833-6130 to be directed to a local council in your community.
- National Council of La Raza (NCLR) is the largest national constituency-based Hispanic organization established to reduce poverty and discrimination and improve life opportunities for Hispanic Americans. Health is one of NCLR's key strategic priorities. NCLR has field offices in Chicago, Los Angeles, New York, Phoenix, and San Antonio and a formal network of affiliates in more than 300 Hispanic community-based organizations that serve 41 states, Puerto Rico and the District of Columbia. Visit the NCLR website at nclr.org to find more information on community-based organizations by using the affiliate network.
- National Association for the Advancement of Colored People (NAACP) helps insure the political, educational, social and economic equality of minority groups and citizens. The NAACP has a health division that is designed to inform and educate the community about health care costs, quality and access and disease prevention. Visit the NAACP website at naacp.org to find local branches.
- YMCA is the largest not-for-profit community service organization in America, working to meet the health and social service needs of 21 million men, women and children in communities across the United States. Local YMCAs often bring together people of all backgrounds and, depending on your community, may help you reach different ethnic and cultural groups. You can find the YMCA nearest you by visiting YMCA.net.

Partnerships

After identifying community-based organizations, you may want to consider forming a partnership to help plan, publicize and implement your screening program. The organization may:

- Assist with or provide a suggested screening site.
- Help plan event logistics.
- Publicize the screening by publishing newsletter items, displaying posters and distributing fliers.
- Provide volunteer staffing and interpreters for the day of the event.

IX. PROTOCOL AND GUIDELINES

The following are ACAAI's suggested protocol and guidelines for conducting a screening program.

Central to the screening program are:

- **Asthma and Allergy Screening Program Registration Form.** Each person attending a screening must complete the asthma and allergy screening program registration form before being screened by an allergist. Page 1 of the form gathers demographical information and serves as a release form to be signed by the individual being screened. If the participant is under the age of 18, the release section of the form should be signed by a parent or guardian. Page 2 is a questionnaire that asks participants about their breathing problem or asthma, and allergy symptoms. There are three versions of Page 2, each targeted to a different age group: adults 15 and over, kids 8-14, and children 7 and under.
- **Physician Staffing.** An ACAAI-member allergist must be on site to coordinate the program. Only allergists or other physicians can conduct the actual screening. Other volunteers can assist in the organization and execution of the program, but must not provide or interpret screening results.
- **Volunteer Staffing.** Volunteers, including staff members from allergists' offices, members of the Asthma and Allergy Foundation of America, members of the Allergy & Asthma Network and others, can assist with the screening program by greeting participants, distributing the Asthma and Allergy Screening Program Registration Form and public education materials, and managing traffic flow. Only people with appropriate training should be allowed to perform spirometer testing.

The screening process typically has these steps:

- **Greeting and Registration.** Volunteers at the screening program registration table welcome each participant to the screening and provide Page 1 and the appropriate Page 2 of the Asthma and Allergy Screening Program Registration Form on a clipboard. Participants will bring the completed form to the allergist for review.
- **Public Education Materials.** While waiting to be screened, participants should be offered public education materials on asthma, allergies and EIB. Copies of fliers can be displayed at the registration table and other areas around the screening site. In addition to literature, the DVD "Breathe Easy: Keep Asthma in Check" can be shown. The coloring activities can be provided to children who are waiting to be screened.

- **Screening.** The registration and report form serves as a basis for the screening of each participant. The form, in combination with a discussion of the participant's symptoms and spirometer results, can help the allergist decide whether to refer the participant for a professional diagnosis for asthma, nasal allergies or EIB.
- **Spirometer Test.** Spirometry is a recommended, but optional, test. The spirometer test can be given to every person completing an Asthma and Allergy Screening Program Registration Form or just to those who report having had breathing problems.
- **Referral.** All participants with suspected asthma, allergies or EIB should be encouraged to schedule a follow-up examination. A list of allergists in the area can be provided at the screening. Those who are Board certified may be so identified on the list. You also can refer people to the ACAAI website AllergyAndAsthmaRelief.org and tell them to use the Allergist Locator. Allergist staff members should not distribute their business cards or suggest themselves as the physician of choice.
- **Public Assistance Programs.** Information about sources of care for the indigent or medically indigent should be available and provided to referred participants who are uninsured or have no way to be private-pay patients.
- **Asthma and Allergy Screening Program Registration Form.** After the screening is completed, the allergist should complete the screener portion of the form at the bottom of page two, and make sure the participant has answered all the questions and signed the form.

Screening very young children can be very challenging. Here some tips for working with youngsters:

- **Staffing.** If possible, your screening should be staffed by physicians and allied health professionals who have experience in working with pediatric patients.
- **Spirometry.** Spirometry is very difficult to perform in under children under 5 and some coordinators use peak flow as an alternative. If you have time to work with a child during the screening, you can demonstrate the lung function test several times to coach the child on the technique. Making a game of the test also can be effective.
- **Asthma and Allergy Screening Program Registration Form and Discussion.** Since it is often difficult to perform spirometry on very young children, the Asthma and Allergy Screening Program Registration Form is a very important tool in reviewing symptoms and family history, especially of allergies, and obtaining additional information about the child's breathing problem. You might consider referring all young children attending the screening with symptoms for further diagnosis.