

Health Care Plan- Anxiety Disorder

Name:

Date of Birth:

Emergency Contact:

Goals of school care:

To provide student with interventions for coping with anxiety disorder while in school setting, and to be aware of conditions so that we may best support student.

Anxiety presents differently in each individual, signs can include: crying, racing heartbeat, panic, difficulty concentrating, pacing, shallow breathing, stomachache, and avoidance of situations.

Symptoms of anxiety specific to this student:

Action Required:

Allow student to take break to health office or advisor

Give medication as directed

Allow student to contact therapist or parent as needed

Medication to be administered at school

I approve this care plan for my child

Parent Signature

date

Physician Signature

date

School Nurse Consultant

date
