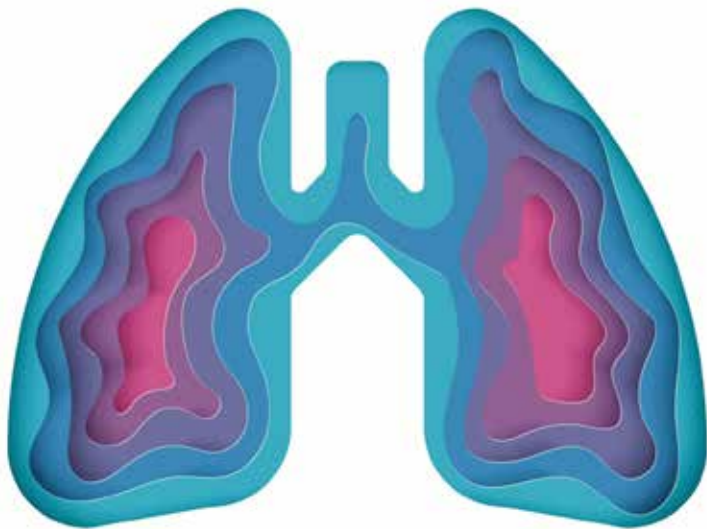


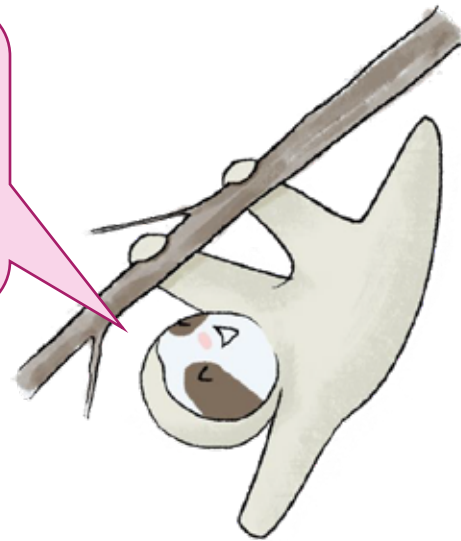
Team-based
Environmental Asthma
Management at
Mount Sinai

TEAM Kids!



TEAM Kids! Environmental Asthma Program

We are pleased to welcome you to TEAM Kids! Our team will work with your family and your child's asthma doctor to help improve asthma symptoms and address things in the environment that make their asthma worse.



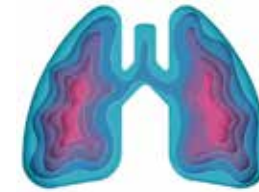
My Child's Asthma Team

	Name	Contact Information
Pediatrician		
Asthma/Lung Doctor		
Allergist		
Environmental Asthma		646-689-0790
Social Work		
Community Organization		

If your child is experiencing worsening asthma symptoms:

- Follow your child's asthma action plan
- Call your child's pediatrician or pulmonologist/allergist
- **Call 911** for emergencies or go to the ER

Table of Contents



What is Asthma?

page 1-2

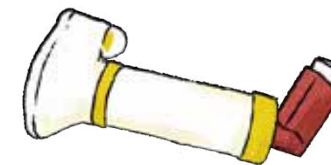
Learn about asthma and asthma symptoms.



Understanding Asthma Medications

page 3-8

Learn about the difference between asthma quick relief ("rescue") and controller medicines.



How to Use an Inhaler

page 9-12

Learn about how to use an inhaler and spacer properly, so the medicine reaches deep into the lungs.



Asthma Action Plan and School Forms

page 13-15

Learn how to work with your doctor to create an individualized plan to manage your child's asthma.



Environmental Asthma Triggers

page 16-24

Learn what things can make your child's asthma worse and how to take steps to get rid of these things from their environment.



Resources in your Community

page 25-29

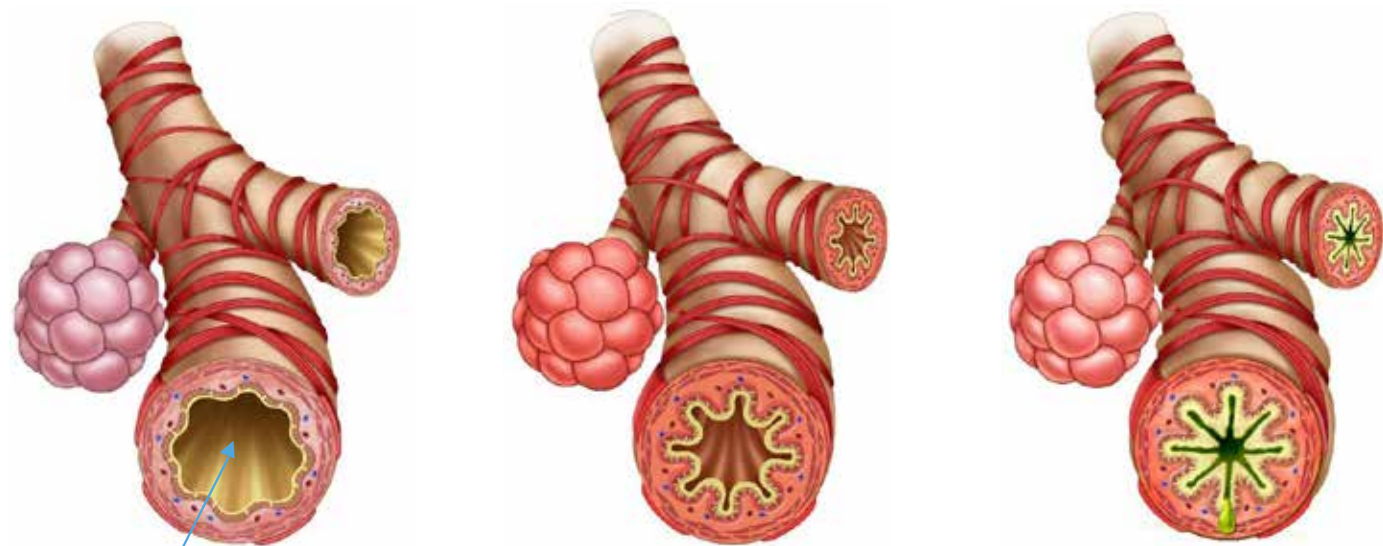
Learn about resources in your community to help manage your child's asthma.

What is Asthma?



- Asthma is a long-term disease of the airways and lungs, which can make it hard to breathe.
- Even though asthma can be life-long, it can be controlled with medications and decreasing triggers in the environment.
- When your child has asthma, a variety of things can cause the airways (air tubes) to become narrow:
 - Airways are irritated easily and can swell ("inflammation")
 - Muscles surrounding the airways can tighten
 - Mucus builds up in the airways

How asthma makes it harder to breathe:



Healthy airway:

Air moves easily through the airways (enters in nose and mouth and travels into and out of the lungs).

In asthma, the airways have swelling/ inflammation:

Airways are sensitive to asthma triggers.

During as asthma attack the airways get narrow:

Swelling, mucus, and squeezing of muscles around airways make it harder to breathe.

What are common symptoms of asthma?

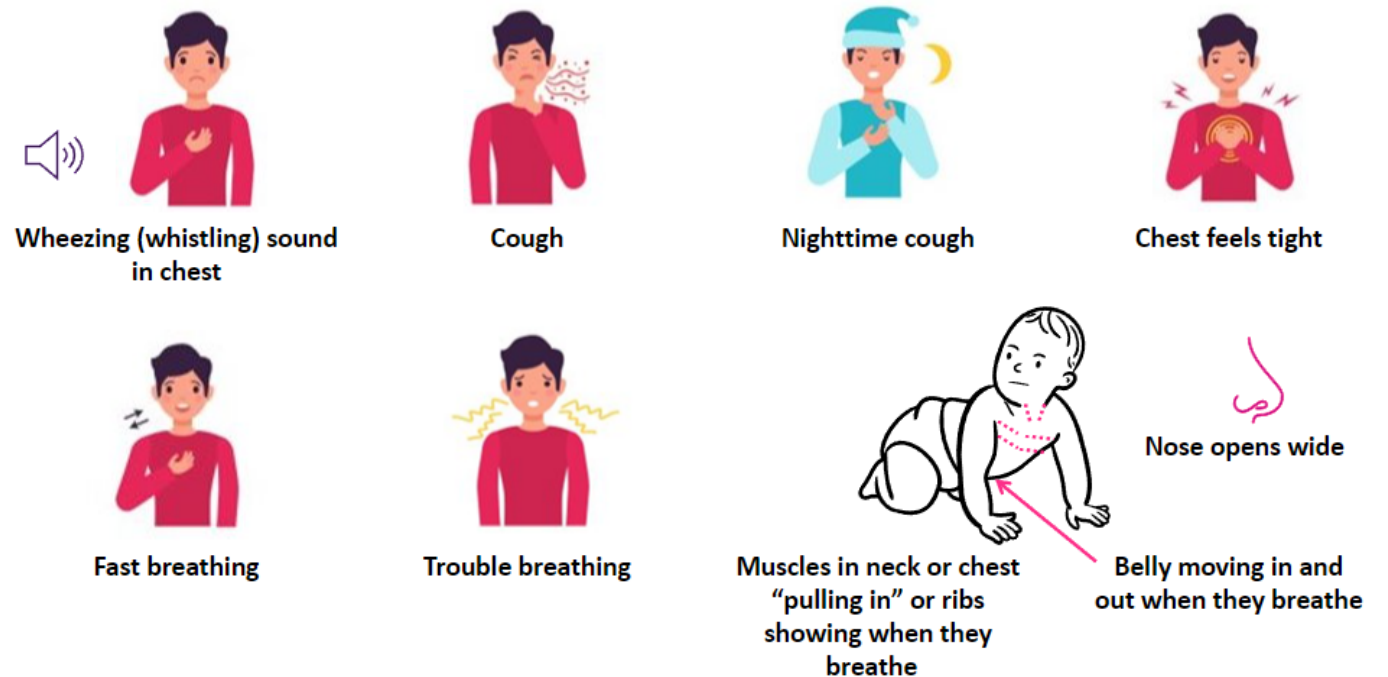
Your child's asthma symptoms are unique – you know your child best and the goal of your child's care team is to treat your child's unique type of asthma.

Common asthma symptoms are:

- Chest tightness or chest pain
- Coughing
- Wheezing (hearing a whistling sound as they breathe)

Symptoms can let you know your child's asthma is getting worse. These include:

- Trouble breathing
- Fast breathing
- Using extra muscles to breathe – this can look like the belly moving in and out, nose opens wide, muscles in the neck or chest "pulling in" or ribs showing more when they breathe
- Rescue inhaler is not helping them breathe better



Recognizing symptoms of an asthma attack is very important so you and your child can follow their Asthma Action Plan, take medications, and prevent it from getting worse.

Understanding Asthma Medications



The 2 main types of asthma medications are:

RESCUE medicine – take when your child has asthma symptoms

CONTROLLER medicine – take every day to reduce the inflammation in the lungs; used to prevent symptoms

Are there side effects from asthma medications?

- Asthma medications are **safe to use** when used as prescribed.
- Talk to your doctor if you have concerns about side effects of medicine.

It is also important to treat your child's allergies.

Did you know?

Many children with asthma also have allergies (hay fever).

Good allergy control is important for good asthma control.

If your child has allergies, it is important to try to reduce allergens in the environment such as dust (when you can). And, if needed, give your child their allergy medications in addition to their asthma medications.

Talk with your child's doctor if you have questions about their allergy or asthma medications.



What are rescue medications?

- Rescue, or “quick relief” medications, should be given **when your child feels like they are having trouble breathing or other signs of an asthma attack (coughing, wheezing).**
- Rescue medications act **very fast** to relax the muscles of the airway to improve breathing.
- They **stop asthma symptoms** once they start!

Here are some examples of rescue medications:



Albuterol Sulfate or
Xopenex
Solution for nebulizer



Ventolin
(Albuterol sulfate)



Proventil
(Albuterol sulfate)



ProAir RespiClick
breath-activated
(Albuterol sulfate)



Xopenex
(Levalbuterol)



Doctors may prescribe **Symbicort** or **Dulera** as a “rescue.”
Follow your prescribed asthma action plan.

What are controller medications?

- Controller medications **decrease inflammation (swelling) of the airways caused by asthma.**
- **They are sometimes taken every day or may be prescribed for prolonged periods of time when asthma is getting worse.** These medications can help whether your child is having asthma symptoms or not. Your asthma doctor will tell you when to take these medications.
- Controller medications can help **reduce the number of asthma attacks and make asthma attacks less severe.**
- **These medications work differently than the rescue medicines and can safely be taken together.** Even though it seems like more medicine they act very differently and can complement each other in controlling asthma.

Here are some examples of controller medication to use with spacer:

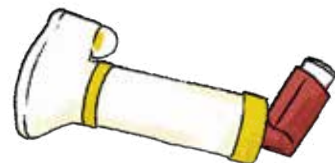


Flovent
(Fluticasone Propionate)



Asmanex
(Mometasone)

The inhalers on this page work best with a spacer!



Symbicort
(Budesonide and Formoterol)



Dulera
(Mometasone and Formoterol)



Advair
(Fluticasone Propionate and Salmeterol)

Doctors may prescribe Symbicort or Dulera as both a controller and a “rescue” as part of “SMART therapy”. Follow your prescribed asthma action plan.

These controller medications are used in the nebulizer machine:



Pulmicort Respules
(Budesonide)



Budesonide Inhalation Suspension

These controller medications are used differently than the regular inhaler. These inhalers are “breath-activated” and should not be used with a spacer:



QVAR Redihaler
(Beclomethasone)



Advair Diskus
(Fluticasone Propionate and Salmeterol)



Flovent Diskus
(Fluticasone Propionate)



Asmanex Twisthaler
(Mometasone)



Pulmicort Flexhaler
(Budesonide)

Check out these asthma videos – to learn how to use these “breath-activated” inhalers:



Boston Children's Hospital

www.childrenshospital.org/conditions/asthma

What is SMART therapy?

- SMART stands for “Single Inhaler for **M**aintenance **A**nd **R**elief Therapy”
- Some children with asthma who are age 5 years and older can benefit from SMART therapy.
- SMART therapy combines two medications in a single inhaler: a controller (maintenance) medication and a rescue medication.
- If your child is prescribed SMART therapy, they will use the SAME inhaler for a daily controller AND for when they need a “rescue” inhaler.
- When using SMART therapy, there is a maximum number of puffs your child can take every day.
 - Age 5 to 11 years: 8 puffs
 - Age 12 and older: 12 puffs
 - Call or go to a doctor if your child needs more than this on any day

There are 2 inhalers that can be used for SMART:

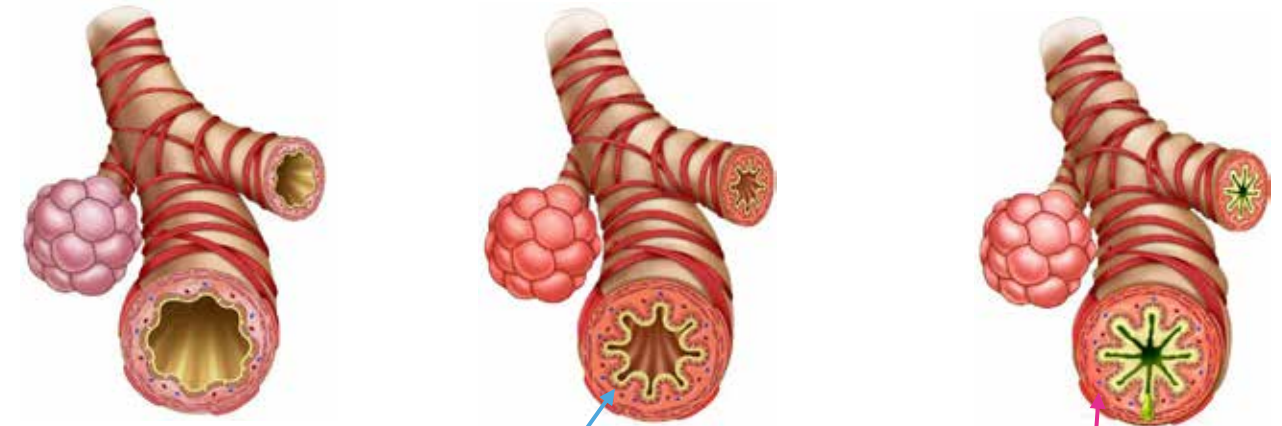
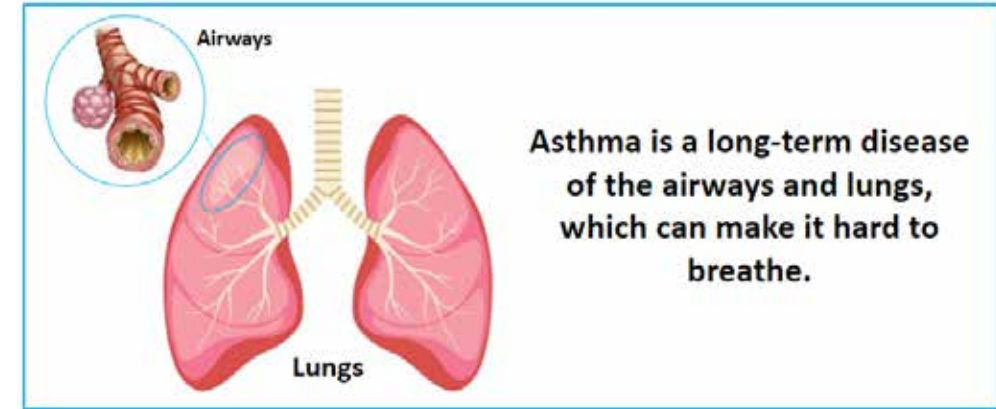
Symbicort
(Budesonide and Formoterol)

Dulera
(Mometasone and Formoterol)

Follow your prescribed Asthma Action Plan.

Pages 9 to 11 have information on how to use inhalers with spacers.

Let's Review!



<p>Healthy airway</p> <p>Air moves easily down into and out of the lungs</p>	<p>In asthma, the airways have swelling/ inflammation:</p> <p>Airway is sensitive to asthma triggers</p>	<p>During an asthma attack the airways get narrow:</p> <p>Swelling, mucus production and squeezing of muscles around airways</p>
---	---	---

Controller Medications

They address underlying changes in the lungs (reduce inflammation and swelling in airways).

They work more slowly and have long-term effects.

Quick-Relief (“Rescue”) Medications

They act quickly to relieve sudden symptoms of an asthma attack by relaxing the airway muscles.

**Some inhalers have both a controller and rescue medication in one (like Symbicort). See page 7.*

Tips for taking asthma medications:

Rescue Medication

Make sure your child has rescue inhaler (and spacer) at all times (home, school, sports practice, etc).

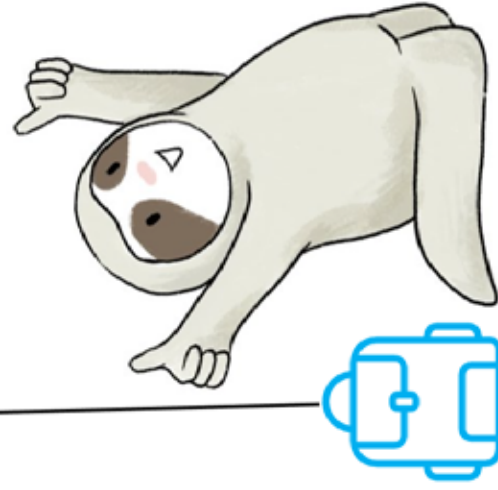


Make sure your child has a Medication Administration Form (MAF) submitted to the school in case they need asthma medication during the school day.

The school cannot give your child their rescue inhaler if a MAF is not completed.

Controller Medication

If you prefer, your child can take their controller medicine at school in the morning. To do this, the doctor should fill out the "Controller Medications for In-School Administration" section of the MAF.

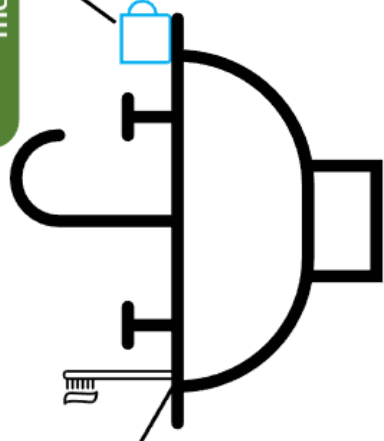


What type of reminders work for you? Write yourself a note or set an alarm on your phone.



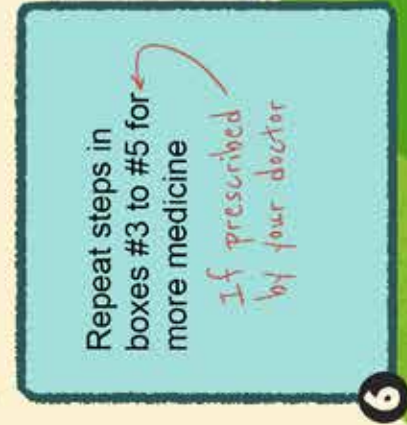
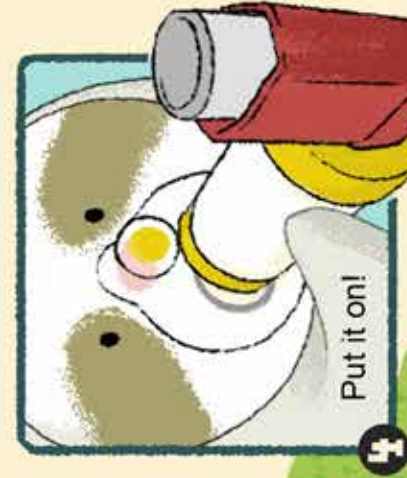
Store controller medicine in a place you will remember to give it to your child, like near their toothbrush.

Rinse mouth and spit out the water after taking controller medication.



HOW TO USE YOUR SPACER

ILLUSTRATED BY AMY ZHONG



This is only an overview of how to use your spacer. Please read the complete instructions that come with the spacer package.



CLEAN YOUR SPACER

Please refer to the manufacturer's instructions to learn whether it is possible to remove both the front and back pieces for cleaning or only the back piece.



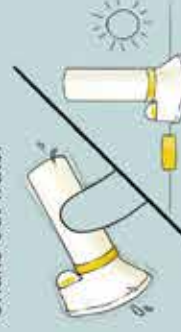
Remove inhaler and separate pieces that are removable.

Soak in soapy water for 15 minutes and rinse.



also dishwasher-safe (top rack only!)

Shake out water



and stand it up to dry.

All clean and ready to use again!



Put pieces back together.

How to Use Your Inhaler

1 Remove inhaler cap

2 Insert inhaler into spacer

3 Shake!!

4 Put spacer in mouth & make a seal with your lips

5 Breathe out. Then press the inhaler once at the beginning of breathing in again.

6 OPTION 1

Inhale deeply & slowly for a full breath
Hold your breath for 5-10 seconds

6 OPTION 2

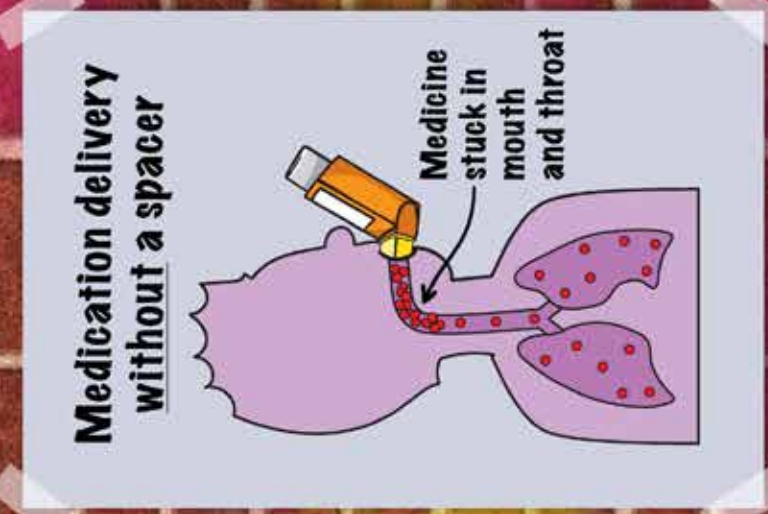
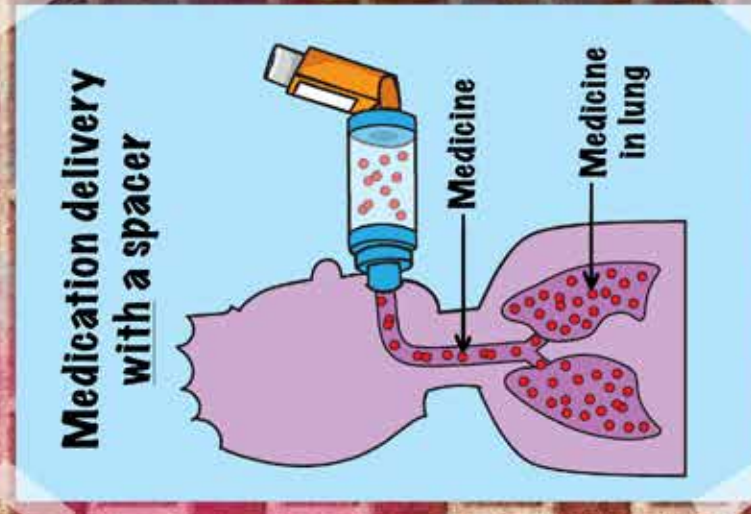
In-out X3
Breathe in & out deeply & slowly for 3 breaths
Keep lips sealed around the mouthpiece until all 3 breaths are complete

SOME SPACERS WILL MAKE A WHISTLING SOUND IF YOU ARE BREATHING IN TOO FAST

REPEAT STEPS 3-6 FOR MORE MEDICINE, IF PRESCRIBED BY YOUR DOCTOR



Using a spacer helps more of your medication travel to your lungs so it can work better!



1 Remove inhaler and separate pieces

2 Soak in soapy water for 15 minutes & rinse

Also top-rack dishwasher safe!

3 Shake off water and stand up to dry.

When fully dry, reassemble!

Clean your spacer!

Your spacer can be used right out-of-package and then cleaned weekly.



What is an Asthma Action Plan?

An asthma action plan is something you make with your child's doctor that **helps manage your child's asthma and prevent asthma attacks.** It helps you **decide what to do if your child's breathing changes.**

Talk to your child's doctor if they do not have an asthma action plan or if you have questions.

What are the three zones on the asthma action plan?

Zone 1 (Green): Doing well!

Your child is **feeling well and not having asthma symptoms:**

- Breathing is easy with no coughing or wheezing
- Playing and sleeping normally

What to do? Continue taking the controller medicine to stay in this zone – this is where we want your child to be every day!

Zone 2 (Yellow): Caution!

Your child is **not feeling great and is having some asthma symptoms:**

- Some trouble with breathing with coughing and/or wheezing
- Trouble sleeping or playing compared to normal

What to do? Continue taking the controller medicine every day and add a rescue medicine as needed to treat symptoms.

Zone 3 (Red): Emergency!

Your child is **feeling bad and having severe asthma symptoms:**

- Short of breath
- Medicine not helping
- Nose is wide open, belly breathing and/or seeing their ribs as they breathe

What to do? Give rescue medicine and contact your child's doctor immediately. If you can't reach them, call 911 or go to the emergency room!

CALL 911 or SEEK EMERGENCY CARE NOW if child has: difficulty talking or crying because of breathing, symptoms worsening quickly, blue lips, dizziness, or is confused or passed out.

Here is an example of an Asthma Action Plan:

Asthma Action Plan

Medical Record #: _____ Updated On: _____

[To be completed by health care provider]

Name: _____ Date of Birth: _____
 Address: _____ Emergency Contact/Phone: _____
 Health Care Provider Name: _____ Phone: _____ Fax: _____

Asthma Severity: Intermittent Mild Persistent Moderate Persistent Severe Persistent

Asthma Triggers: Colds Exercise Animals Dust Smoke Food Weather Other

If Feeling Well (Green Zone) **Take Every Day Long – Term Control Medicines**

You have all of these:

- Breathing is good
- No cough or wheeze
- Can work / play
- Sleeps all night

Peak flow in this area: _____ to _____

MEDICINE:	HOW MUCH:	WHEN TO TAKE IT:

5-15 minutes before exercise use this medicine

If Not Feeling Well (Yellow Zone) **Take Every Day Medicines and Add these Quick-Relief Medicines**

You have any of these:

- Cough
- Wheeze
- Tight chest
- Coughing at night

Peak flow in this area: _____ to _____

MEDICINE:	HOW MUCH:	WHEN TO TAKE IT:

Call doctor if these medicines are used more than two days a week.

If Feeling Very Sick (Red Zone) **Take These Medicines and Get help from a Doctor NOW!**

Your asthma is getting worse fast:

- Medicine is not helping
- Breathing is hard and fast
- Nose opens wide
- Can't walk or talk well
- Ribs show

Peak flow reading below: _____

MEDICINE:	HOW MUCH:	WHEN TO TAKE IT:

SEEK EMERGENCY CARE or CALL 911 NOW if: Lips are bluish, Getting worse fast, Hard to breathe, Can't talk or cry because of hard breathing or has passed out

Make an appointment with your primary care provider within two days of an ER visit or hospitalization

Health Care Provider Signature: _____ Date: _____

Patient/Guardian Signature [I have read and understood these instructions]: _____ Date: _____

Citywide Asthma Initiative
Adapted from Finger Lakes Asthma Action Plan and NHLBI
Revised 10/13

WHITE - PATIENT COPY
PINK - SCHOOL/DAY CARE COPY
YELLOW - PROVIDER COPY

COPY FOR PATIENT HPD X46041 09 08

Here is an example of the first page of a “Medication Administration Form” (MAF).

Attach student photo here

ASTHMA MEDICATION ADMINISTRATION FORM

PROVIDER MEDICATION ORDER FORM | Office of School Health | School Year 2022-2023

Please return to school nurse. Forms submitted after June 1st may delay processing for new school year.

Student Last Name: _____ First Name: _____ Middle Initial: _____ Date of birth: _____

Sex: Male Female OSIS Number: _____ DOE District: _____ Grade/Class: _____

School (include: ATS DBN/Name, address, and borough): _____

HEALTH CARE PRACTITIONERS COMPLETE BELOW

Diagnosis	Control (see NAEPP Guidelines)	Severity (see NAEPP Guidelines)
<input type="checkbox"/> Asthma	<input type="checkbox"/> Well Controlled	<input type="checkbox"/> Intermittent
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Not Controlled / Poorly Controlled	<input type="checkbox"/> Mild Persistent
	<input type="checkbox"/> Unknown	<input type="checkbox"/> Moderate Persistent
		<input type="checkbox"/> Severe Persistent
		<input type="checkbox"/> Unknown

Student Asthma Risk Assessment Questionnaire (Y = Yes, N = No, U = Unknown)

History of near-death asthma requiring mechanical ventilation	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> U	
History of life-threatening asthma (loss of consciousness or hypoxic seizure)	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> U	
History of asthma-related PICU admissions (ever)	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> U	
Received oral steroids within past 12 months	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> U	_____ times last: _____
History of asthma-related ER visits within past 12 months	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> U	_____ times last: _____
History of asthma-related hospitalizations within past 12 months	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> U	_____ times last: _____
History of food allergy or eczema, specify: _____	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> U	
Excessive SABA use?	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> U	

Home Medications (include over the counter) None

Reliever: _____ Controller: _____ Other: _____

Student Skill Level (select the most appropriate option):

Nurse-Dependent Student: nurse must administer medication

Supervised Student: student self-administers, under adult supervision

Independent Student: student is self-carry/self-administer

I attest student demonstrated ability to self-administer the prescribed medication effectively during school, field trips, and school-sponsored events. Practitioner's Initials: _____

Quick Relief In-School Medication

Albuterol [Only generic Albuterol MDI w/ individual spacer is provided by school]

Standard Order: Give 2 puffs q 4 hrs PRN for coughing, wheezing, tight chest, difficulty breathing or shortness of breath. Monitor for 20 mins or until symptom-free. If not symptom-free within 20 mins may repeat ONCE.

Symbicort (budesonide with formoterol) Strength: _____ Dose: _____ puffs Frequency: every _____ hours

Other Albuterol Dosing: Name: _____ Strength: _____ Dose: _____ puffs Frequency: every _____ hours

Albuterol with ICS : Albuterol MDI _____ puffs followed by Flovent (fluticasone) Strength: _____ puffs every _____ hrs

Albuterol MDI _____ puffs followed by Qvar (beclomethasone)) Strength: _____ puffs every _____ hrs

Other ICS Medication: Albuterol MDI _____ puffs followed by ICS (Name) _____ Strength: _____ puffs every _____ hrs

If in Respiratory Distress: call 911 and give albuterol 6 puffs; may repeat Q 20 minutes until EMS arrives

Controller Medications for In-School Administration (Recommended for Persistent Asthma, per NAEPP Guidelines)

Fluticasone [Only Flovent® 110 mcg MDI is provided by school for shared usage] Stock Parent Provided

Standing Daily Dose: _____ puffs ONCE a day at _____ AM

Special Instructions: _____

Other ICS Standing Daily Dose:

Name: _____ Strength: _____ Dose: _____ Route: _____ Frequency: _____ hrs

Health Care Practitioner

Last Name (Print): _____ First Name (Print): _____ MD DO NP PA

NYS License # _____ NPI # : _____ Signature: _____ Date: _____

Completed by Emergency Department Medical Practitioner: Yes No (ED Medical Practitioners will not be contacted by OSH Staff)

Address: _____ E-mail address: _____

Tel: _____ FAX: _____ Cell Phone: _____

CDC and AAP strongly recommend annual influenza vaccination for all children diagnosed with asthma.

FORMS CANNOT BE COMPLETED BY A RESIDENT INCOMPLETE PRACTITIONER INFORMATION WILL DELAY IMPLEMENTATION OF MEDICATION ORDERS. PARENTS MUST SIGN PAGE 2 → | REV 2/22

You must provide MAF (completed by your child’s doctor) to your child’s school every year (or if medications change).

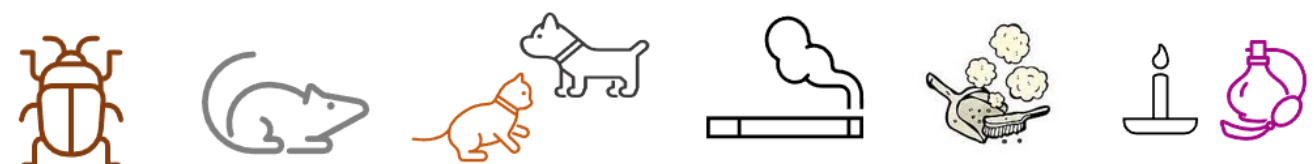
Environmental Asthma Triggers

- Asthma triggers are things in the environment that make your child’s asthma worse.
- Asthma triggers are found indoors and outside.
- Your child can have many different triggers that bother them in different ways.
- Understanding your child’s triggers will help you develop ways to avoid them and prepare for when they are exposed to them.

Some Examples:

- If your child has **allergies** to things in the **environment** (like pollen, pets, or dust), exposure to these things may cause asthma attacks.
- Some children with asthma are sensitive to strong chemicals or **odors** like cigarette smoke and bleach.
- **Certain activities** and behaviors can also be triggers, for example, exercise or stress. Very cold or hot air can also trigger symptoms.


For more information about environmental asthma triggers in the home, visit: nyscheck.org/rx




The next few pages provide information on how to reduce your child's exposure to these common asthma triggers!




Common Outdoor Asthma Triggers




**Tree Pollen
(Spring)**




**Grass Pollen
(Summer)**



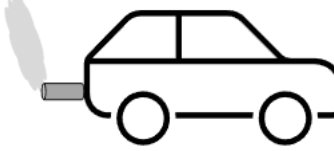
**Ragweed Pollen
(Fall)**



Very Cold




Very Hot




Air Pollution


Common Indoor Asthma Triggers




Roaches




Mice




Mold & Water Leaks




Dust Mites




Furry Pets




Secondhand Smoke



Strong Chemicals



Strong Scents



Gas Stoves

Safer Pest Control

Did you know?
The toxic chemicals in pesticides can harm human beings. Since pests can also affect health, it is important to get rid of pests safely!

Action Plan

- Prevent pests without toxic chemicals:
 - Eliminate water sources by fixing leaks and cleaning up spills.
 - Eliminate food sources by removing crumbs, sealing food containers, and emptying trash.
 - Eliminate places where pests may hide.
 - Get rid of their entry points. Seal cracks with caulk.
- If you must use chemical pesticides:
 - Place bait stations in areas inaccessible to children and pets.
 - Choose pesticides with an EPA "Safer Choice" label.
 - Ventilate your home by opening windows.
 - Never use sprays, foggers, or bug bombs.

Did You Know?

Landlords are required by New York City law to keep your home free of mold and pests. This includes repairing conditions that cause these problems (such as holes/cracks and water leaks).

Call 311 if your landlord does not fix these issues. For more information, visit nyc.gov/health and search "Local Law 55."

Resources

National Pesticide Information Center (NPIC) provides information on safer pest control. Visit their website or call their free hotline:

1-800-858-7378
npic.orst.edu

To learn more about safer pest management:

epa.gov/asthma, select "Asthma Triggers: Gain Control."

health.ny.gov, search "Pesticides" and select "Pests, Pesticides & Repellents" from the search results.

nyc.gov/health, search "Pest control for residents"

nyc.gov, search "IPM Toolkit" and select "Integrated Pest Management Toolkit" from the search results.

For more information, visit: nyscheck.org/rxs





Mold

Did you know?

Mold depends on moisture to grow. Mold can trigger asthma and allergy symptoms.

Action Plan

- Reduce moisture and increase ventilation (airflow): open windows slightly when showering, use exhaust fans.
- Fix water leaks. Renters, report leaks to your landlord.
- If you see mold:
 - Eliminate the source of moisture/water first.
 - Scrub mold from hard surfaces with soap and water, dry completely.
 - Avoid using bleach (unless you are cleaning sewage).
 - Do not paint over mold.
 - Discard moldy objects (like carpets).
- After a flood or water leak: remove wet items and dry the area within 48 hours.
- If mold covers over 3ft x 3ft, hire a professional mold abatement company. If you rent, report mold to your landlord. If conditions are not fixed, ask your local building department or code enforcement official to inspect your home for water damage or leaks.

Resources

Learn more about identifying and getting rid of mold:

[epa.gov/mold](https://www.epa.gov/mold)

[nyc.gov/health](https://www.nyc.gov/health) and search "mold"

Landlords are required by New York City law to keep your home free of mold and pests. This includes repairing conditions that cause these problems (such as holes/cracks and water leaks). Call 311 if your landlord does not fix these issues. For more information, visit [nyc.gov/health](https://www.nyc.gov/health) and search "Local Law 55."

If you live in NYCHA housing and have concerns about mold, visit [nyc.gov](https://www.nyc.gov) and search "NYCHA mold remediation."

For more information, visit: [nyscheck.org/rxs](https://www.nyscheck.org/rxs)



Version: August 2021, New York City

New York State Children's Environmental Health Centers



NYSCHILDREN



@NYSCHILDREN

NYSCHILDREN



Secondhand Smoke

Did you know?

Secondhand smoke increases the risk of asthma, lung infections, ear infections, and Sudden Infant Death Syndrome (SIDS).

Action Plan

- Do not allow smoking inside your home and car.
- Choose a smoke-free childcare setting.
- Reduce smoke drift from your neighbors:
 - Seal cracks or gaps in apartment floors, walls, and around pipes with silicone.
 - Put a weather strip under and around the door.
 - Ventilate your home by opening windows.
 - Wet dust and wet mop regularly to reduce household dust. This might also help to reduce chemical residues from the smoke.

Resources

NYS Quitline: 1-866-NY-QUITS

[nyc.gov](https://www.nyc.gov) and search "secondhand smoke"

Call 311 or visit portal.311.nyc.gov and search "Smoking complaint" to make a complaint about secondhand smoke.

For information on smoking cessation programs, visit [nyc.gov/health](https://www.nyc.gov/health) and search "Guide to smoking and vaping cessation programs in NYC."

For information on smoke-free programs and low-cost nicotine replacement therapy, visit [nysmokefree.com](https://www.nysmokefree.com).

For information on what to do if your neighbor's smoke drifts into your home, visit [lung.org](https://www.lung.org) and search "Secondhand Smoke - Apartment."

For more information, visit [nyscheck.org/rxs](https://www.nyscheck.org/rxs)



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New York State Children's Environmental Health Centers



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Dust Mites

Did you know?

Dust mites are bugs too tiny to see with the human eye and are found in every home. Dust mites can trigger asthma and allergies.

Action Plan

- Dust mites hide in carpets, bedding, upholstered furniture, and stuffed toys:
 - Use zippered dust-proof covers on pillows, mattresses, and box springs.
 - Wash sheets and blankets weekly.
 - Wash stuffed toys regularly. If they cannot be washed, keep them out of the sleeping area.
 - Vacuum floors and fabric-covered furniture regularly. If possible, use a vacuum with a high-efficiency particulate air (HEPA) filter.
- Dust mites thrive with humidity:
 - Use an air conditioner or dehumidifier to decrease humidity in your home.





Green Cleaning

Did you know?

Routine cleaning can reduce dust, allergens, and chemicals in your home. When cleaning, use safer products, which are better for your health and the environment.

Action Plan

- For routine household cleaning of dust and grime: choose safer cleaning products with one of these labels:
- Make your own cleaners with household ingredients such as vinegar and baking soda (see recipes on next page).
- While cleaning, open windows and turn on a fan to increase airflow. Consider wearing gloves to protect your skin.
- Keep all cleaning products away from children and pets.
- If you need to kill germs on household surfaces: Select an EPA-approved disinfectant for COVID-19 using the [EPA Design for the Environment \(DfE\) Program list](#) that contains a safer active ingredient such as hydrogen peroxide, citric acid, L-lactic acid, or ethanol. 3% hydrogen peroxide or properly diluted household bleach can also be used safely.
 - Avoid products with quaternary ammoniums (Quats) like benzalkonium chloride and ammonium chloride.

Resources

To learn more about dust mites, visit epa.gov/asthma and select "Asthma Triggers: Gain Control."

If you have a concern about dust from roadwork, construction, demolition, renovation, or another source, call 311 or visit portal.311.nyc.gov and search "dust complaint."

For more information, visit: nyscheck.org/rxs

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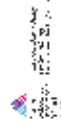


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All-Purpose Household Cleaner

1 cup warm water
3 drops unscented liquid soap
½ cup white vinegar
Optional: add fresh lemon juice

Mix ingredients in an empty spray bottle.
Use to clean various surfaces in your home.

Sink, Tub, & Tile Cleaner

Add water to baking soda to make a paste.
Use paste to scrub surfaces.
Rinse well.

Resources

In New York State, schools are required to use "environmentally-sensitive" cleaning products. For more information, visit greencleaning.ny.gov

For more information about disinfection (to kill germs on surfaces), or how to safely use disinfectants visit: nyscheck.org/covid

For more information visit: nyscheck.org/rxs

Was this information helpful?

Visit bit.ly/GreenCleaningRx to let us know.

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The New York State Office of Environmental Health Assessment
Region 2: N.Y. City (EHS)



Indoor Air

Did you know?

People spend about 90% of their time indoors where the air is usually 2-5 times more polluted than outdoor air.

Action Plan

- Reduce sources of pollution in your home:
 - Do not allow smoking inside.
 - If you smoke, quit: nysmokefree.com
 - Avoid air fresheners, candles, and harsh cleaners.
 - Choose “low-VOC” products (example: paints).
 - Use a stove hood while cooking. With gas stoves, use an exhaust fan vented to the outdoors.
 - Fix water leaks to prevent mold.
- Let the fresh air in! Open your windows regularly.
- Wet dust and wet mop regularly to control dust.
- Install smoke alarms and carbon monoxide detectors.
- Test for radon in the basement, 1st and 2nd floors.



Outdoor Air Quality

Did you know?

Air pollution has many sources including traffic, factories, and power plants. Polluted air can cause health effects, especially in people with asthma, lung disease, or heart disease.

Action Plan

- Check your local air quality report. The Air Quality Index (AQI) provides information on air quality and actions you can take to protect your health (for example, limiting outdoor activity if the air quality is bad).
- If possible, plan outdoor activities away from major air pollution sources like the highway.
- Help reduce air pollution in your neighborhood: take public transportation, walk or bike when possible, and don't idle your vehicle.

Resources

For strategies to improve your indoor air quality, visit:

epa.gov and search “Indoor Air Quality”

nyc.gov and search “Indoor Air Quality”

Check if you qualify for a free home visit from the NY State Healthy Neighborhoods Program: visit health.ny.gov and search “Healthy Neighborhoods.”

Learn more about safe and green cleaning, visit nyc.gov/health and search “Green Cleaning.”

Learn more about carbon monoxide: cdc.gov/co

Learn more about radon testing: epa.gov/radon

For live answers to your radon questions or to purchase a radon test kit, contact:

National Radon Hotline
1-800-SOS-RADON (1-800-767-7236)
sosradon.org

For more information, visit: nyscheck.org/rxs



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Resources

Visit nyc.gov and search “outdoor air quality”

Visit airnow.gov (or download the AirNow app) to find the Air Quality Index, a color-coded scale that shows how clean or polluted the air is:

Good

Moderate

USG

Unhealthy

Very Unhealthy

Hazardous

For any AQI other than “Good”, AirNow will provide guidance on how to take action to protect health (especially for sensitive groups, like children with asthma).

USG = Unhealthy for Sensitive Groups

Ask your child's school to use the “Air Quality Flag Program.” For more information, visit airnow.gov and scroll down to select “Flag Program.”

For more information, visit: nyscheck.org/rxs



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Community Resources

You have a right to a healthy home. There are resources to address common environmental asthma triggers in the home.



NYCHA BUILDINGS

Mold: Call 888-341-7152 to report concerns, or visit ombnyc.com
Pests: Call 718-707-7771 to report concerns or use on.nyc.gov/mynycha
If issues are not being addressed by NYCHA: We can refer you to the Medical Legal Partnership for a free legal consultation.

PRIVATE RENTAL BUILDINGS

Request repairs from the landlord. If problem not addressed:
Mold: Call 311 to report concerns, or visit portal.311.nyc.gov
Pests: Call 311 to report concerns, or visit portal.311.nyc.gov
If issues are not being addressed by the landlord: We can refer you to the Medical Legal Partnership for a free legal consultation.

Community organizations that can help:



littlesistersfamily.org



air-nyc.org



nyc.gov

(search "Healthy Neighborhoods")



www.justfix.org

(Free tools to help with housing)



msmlp.mountsinai.org



nyc.gov

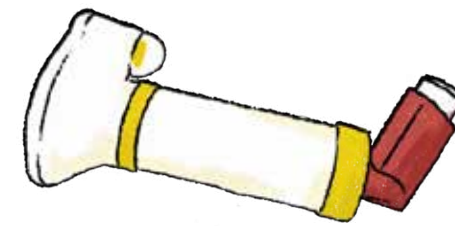
(search "Neighborhood Health Action")
 Brownsville, East Harlem, & Tremont



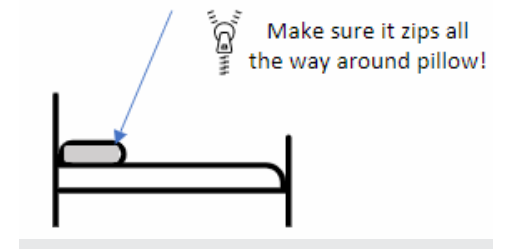
Did you know?

Our program can help connect you with these community resources and navigate the process of addressing your child's asthma triggers!

What is inside my NYC Healthy Home Kit?



Spacer for your inhaler
 Used with an inhaler to help get medicine deep into the lungs.

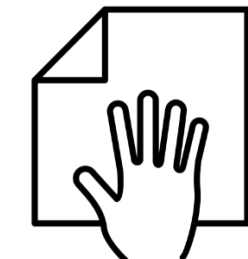


Allergy-proof covers
 Use the pillow and mattress covers to reduce exposure to dust mites.



All-Purpose Cleaner
 1 cup warm water
 1/2 cup white vinegar
 3 drops unscented liquid soap
 Optional: add some fresh lemon juice
 Mix ingredients in empty spray bottle.
 Use to clean various surfaces in your home.

Reusable Spray Bottle for Cleaning
 Use the recipe on the spray bottle for an effective and safer home cleaner.



Cleaning Cloth
 Use a damp microfiber cloth to remove dust from household surfaces.



Food Container
 Use a sealed food container to keep dry foods fresh and away from pests.



Flashlight
 A flashlight is useful for power outages and can also help you look for cracks, leaks, and pests.

What Tenants Should Know About Indoor Allergens (Local Law 55 of 2018)

Allergens are things in the environment that make indoor air quality worse. They can cause asthma attacks or make asthma symptoms worse. Common indoor asthma triggers include cockroaches and mice; mold and mildew; and chemicals with strong smells, like some cleaning products. Environmental and structural conditions, like leaks and cracks in walls often found in poorly maintained housing, lead to higher levels of allergens.

New York City law requires that property owners take steps to keep their tenants' homes free of pests and mold. This includes safely fixing the conditions that cause these problems. Tenants also play a role in preventing indoor allergens.

TENANTS SHOULD:



Keep homes clean and dry.



Avoid using pesticides and chemicals with strong smells (for example, cleaning products, air fresheners).



Place food in sealed containers. Keep counters and sinks clean. Get rid of clutter such as newspapers and paper bags.



Tell property owners or building superintendents (also known as supers) right away if there are pests, water leaks, or holes or cracks in the walls and floors.



Use garbage cans with tight-fitting lids.



Let building staff into homes to make any needed repairs.



Take garbage and recycling out every day, and tie up garbage bags before putting them in compactor chutes.



Call **311** if property owners or supers do not fix the problem or if repair work is being done unsafely.

If you are a tenant and you or your child has moderate or severe persistent asthma, and there are pests or mold in your home, your doctor can request a free home environmental inspection for you through the New York City Health Department's Online Registry. Talk to your doctor or call 311 to learn more.

For more information about property owner responsibilities and safely fixing indoor allergen hazards, see the reverse side of this fact sheet.

For more information about safely controlling asthma, visit nyc.gov/health/asthma.

What Property Owners Must Do to Keep Homes Free of Pests and Mold

New York City law requires all private building owners with three or more apartments to keep their tenants' homes free of pests and mold. The law also applies to property owners of housing units (such as co-ops, condos, shelters or public housing) where a tenant has asthma. This includes safely fixing the conditions that cause these problems.



All property owners must use integrated pest management (IPM) practices to safely control pests and fix building-related issues that lead to pest problems.

- Remove pest nests and thoroughly clean pest waste and other debris using a HEPA vacuum. Make sure to limit the spread of dust when cleaning.
- Repair and seal any holes, gaps or cracks in walls, ceilings, floors, molding, base boards, around pipes and conduits, and around and within cabinets.
- Attach door sweeps to all doors that lead to hallways, basements or outside.
- Remove all water sources for pests by repairing drains, faucets and other plumbing materials that collect water or leak.
- Use pesticides sparingly. If pesticides must be used to correct a violation, they must be applied by a New York State Department of Environmental Conservation-licensed pest professional.



All property owners must safely remove indoor mold and safely fix the problems that cause mold.

- Remove any standing water, and fix leaks or moisture conditions.
- Move furniture away from work areas or cover with plastic sheeting before cleaning.
- Limit the spread of dust. Use methods such as sealing off openings (for example, doorways, ventilation ducts) and gently misting the moldy area with water and soap or a mild detergent, before cleaning.
- Clean moldy areas with water and soap or a mild detergent. Dry the cleaned area completely.
- Clean any visible dust from the work area with wet mops or HEPA vacuums.
- Throw away all cleaning-related waste in heavy-duty plastic bags and seal securely.
- To clean 10 or more square feet of mold in a building with 10 or more apartments, property owners **must** use a New York State Department of Labor-licensed mold assessor and remediator. These licensed workers must comply with New York City Administrative Code section 24-154 and New York State Labor Law Article 32.



Owners of private buildings with three or more apartments must also:

- **Inspect every apartment and the building's common areas** for cockroach and rodent infestations, mold and the conditions that lead to these hazards, at least once a year and more often if necessary. Respond to tenant complaints or requests for an inspection.
- **Provide a copy of this fact sheet** and a notice with each tenant's lease that clearly states the property owner's and tenant's responsibilities to keep the building free of indoor allergens.
- Make sure vacant apartments are thoroughly **cleaned and free of pests and mold** before a new tenant moves in.

For more information about responsibilities and safely fixing indoor allergen hazards, visit nyc.gov/hpd and search for **indoor allergen hazards**.

TEAM KIDS!

Environmental Asthma Program



We look forward to working with your family to make sure you:

- Understand how and when to use asthma medications
- Have an Asthma Action Plan and completed school forms
- Know how to decrease common asthma triggers in your home
- Are connected to resources to help take care of environmental concerns in your home

Continue to follow up with your child's medical doctor for your asthma medications or if you are concerned about symptoms.

TEAM Kids!



The Team-based Environmental Asthma Management (TEAM) Kids at Mount Sinai program was designed to help you with management of your child's asthma and environmental triggers.

Continue to follow up with your child's medical doctor for your asthma medication prescriptions, but we are here to provide an extra level of support for you and your family. Please reach out to us with any questions!

If your child is experiencing worsening asthma symptoms:

- Follow your child's asthma action plan
- Call your child's pediatrician or pulmonologist/allergist
- **Call 911** for emergencies or go to the ER

Additional Resources

Videos on how to use asthma medicines:

www.childrenshospital.org/conditions/asthma

<https://iggyandtheinhalers.com/>

Rx for Prevention – How to get rid of asthma triggers from the environment:

www.nyscheck.org/rx

Cap4Kids NYC – list of community resources available throughout the city:

cap4kids.org/newyorkcity/

NYC Department of Education – asthma information and forms:

www.schools.nyc.gov/school-life/health-and-wellness/staying-healthy/asthma