

**RE: [Patient Name]**  
**DOB [DATE OF BIRTH]**  
**COVID-19 School Letter**

To Whom It May Concern:

I am the primary care provider for [PATIENT NAME] who has a history of well-controlled persistent asthma. Since their asthma is well controlled, [PATIENT NAME] should be allowed to attend school when in-person instruction is offered by their school. All possible accommodations should be made per CDC and local health department guidelines to minimize exposure risk while maximizing learning opportunities. Attending school with appropriate accommodations is not believed to pose significant risk to children with well-controlled persistent asthma. Their asthma action plan should be used to address any asthma symptoms that arise while in the school setting. They should be seen by my office if their asthma control worsens.

If you have any further questions, please do not hesitate to contact me.

Sincerely,