

**Massachusetts Department of Public Health, Bureau of Environmental Health**  
**Pediatric Asthma/Diabetes Survey Worksheet – 2021-2022**  
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School Name: \_\_\_\_\_ DESE School Code (8-digits): \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Check all grades at this school: ☐ K ☐ 1<sup>st</sup> ☐ 2<sup>nd</sup> ☐ 3<sup>rd</sup> ☐ 4<sup>th</sup> ☐ 5<sup>th</sup> ☐ 6<sup>th</sup> ☐ 7<sup>th</sup> ☐ 8<sup>th</sup> **TOTAL K-8 ENROLLMENT** \_\_\_\_\_

**STUDENT CITY/TOWN OF RESIDENCE:** \_\_\_\_\_

Main city/town only; no separation by village, neighborhood or zip code; e.g. Dorchester, Roslindale, East Boston, etc. are all Boston; Lenoxdale with Lenox

**Instructions:**

- Provide the total number of K-8 students in each category in the tables or check the box to indicate that no students in the student city/town have asthma and/or diabetes.
- Student gender identity designations are: M for male, F for female, and N for non-binary (as found on the DESE Student Information Form).
- Contact the school's business office for student race and ethnicity information, as needed.

Note that this worksheet is intended for preparation of school data and/or as a record of the data for the survey. It is not meant for delivery of the survey to MDPH. Survey delivery to MDPH is via electronic survey, found at this link:

**ASTHMA** ☐ Check box if there are NO students with asthma

Grade	M	F	N
K			
1			
2			
3			
4			
5			
6			
7			
8			
<b>Sub Totals</b>			
<b>Total</b>			

Of the total number of students with asthma, how many have an **Asthma Action Plan (AAP)** on file?

\_\_\_\_\_

Race, Ethnicity	M	F	N
White, NH <sup>1</sup>			
White, H <sup>2</sup>			
Black, NH			
Black, H			
Asian, NH			
Asian, H			
AI/AN <sup>3</sup> , NH			
AI/AN, H			
PI/HN <sup>4</sup> , NH			
PI/HN, H			
Multi-Racial, NH			
Multi-Racial, H			
Unknown			
<b>Sub Totals</b>			
<b>Total</b>			

<sup>1</sup> Non-Hispanic

<sup>2</sup> Hispanic

<sup>3</sup> American Indian/Alaskan Native

<sup>4</sup> Pacific Islander/Hawaiian

**Note: The sub totals on each table should match.**

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**DIABETES** ☐ Check box if there are NO students with diabetes for the student city/town of residence

**Type 1 Diabetes**  
☐ Check box if no Type 1

Grade	M	F	N	Race, Ethnicity	Total
K				White, NH <sup>1</sup>	
1				White, H <sup>2</sup>	
2				Black, NH	
3				Black, H	
4				Asian, NH	
5				Asian, H	
6				AI/AN <sup>3</sup> , NH	
7				AI/AN, H	
8				PI/HN <sup>4</sup> , NH	
				PI/HN, H	
				Multi-Racial, NH	
				Multi-Racial, H	
				Unknown	
<b>Sub Totals</b>				<b>Total</b>	
<b>Total</b>					

<sup>1</sup> Non-Hispanic

<sup>2</sup> Hispanic

<sup>3</sup> American Indian/Alaskan Native

<sup>4</sup> Pacific Islander/Hawaiian

**Note: The totals on each table should match.**

**Type 2 Diabetes**  
☐ Check box if no Type 2

Grade	M	F	N	Race, Ethnicity	Total
K				White, NH <sup>1</sup>	
1				White, H <sup>2</sup>	
2				Black, NH	
3				Black, H	
4				Asian, NH	
5				Asian, H	
6				AI/AN <sup>3</sup> , NH	
7				AI/AN, H	
8				PI/HN <sup>4</sup> , NH	
				PI/HN, H	
				Multi-Racial, NH	
				Multi-Racial, H	
				Unknown	
<b>Sub Totals</b>				<b>Total</b>	
<b>Total</b>					

<sup>1</sup> Non-Hispanic

<sup>2</sup> Hispanic

<sup>3</sup> American Indian/Alaskan Native

<sup>4</sup> Pacific Islander/Hawaiian

**Note: The totals on each table should match.**