Children take longer to adjust to hot environments than adults do, and their bodies reach core temperature much faster. Children’s bodies have greater surface area to body mass ratio, so they absorb more heat on a hot day (and lose heat more rapidly on a cold day). Also, children have considerable lower sweating capacity than adults, and so they are less able to dissipate body heat by evaporative sweating and cooling.

Children are less likely to feel thirsty during prolonged play and exercise, and sometimes they just don’t want to be interrupted. They need to be reminded to drink water or another beverage.

The Orange County Department of Education in collaboration with the Orange County Health Care Agency have created the following guidelines for schools to increase student safety during periods of hot weather.

* When outdoors, stay in the shade whenever possible. Limit time outdoors when temperatures and UV radiation are most intense, between 11 a.m. and 4 p.m.

* Ensure children are well hydrated. Provide or encourage frequent drinks to ensure adequate hydration. Plain water is the liquid of choice.

* Monitor children in wheelchairs and check the temperature of metal and vinyl parts.

* Check the temperature of metal and plastic playground equipment.

* Staff should be aware of the signs and symptoms of heat cramps, heat exhaustion, and heat stroke. Follow first aid procedures promptly.

* Limit strenuous activity outdoors

* Check regularly on young children and those children who are physically challenged or in wheelchairs and those who have chronic illnesses such as asthma.
Heat Illness
Signs and Symptoms

Sunburn: Redness, pain, swelling of skin, blisters, fever and headaches.
Treatment: leave water blisters intact to speed healing and avoid infection. If blisters break, apply a dry sterile dressing. Refer serious cases to a physician.

Heat Cramps: heavy sweating can cause painful muscle cramps, usually in the legs, but possibly in the abdomen.
Treatment: apply firm pressure on cramping muscles or gently massage to relieve spasm; give sips of water, if nausea occurs discontinue sips of water, move person to a cooler place to rest. Observe the person carefully for changes in condition.

Heat Exhaustion: heavy sweating, weakness, cold, pale and clammy skin; weak pulse, fainting and vomiting.
Treatment: get person out of sun, move person to a cooler environment, lay person down and loosen clothing, apply cool wet cloths, give sips of water. If nausea occurs, discontinue sips of water; if vomiting continues, seek immediate medical attention.

Heatstroke: severe medical emergency, hot, dry skin, rapid and strong pulse, possible unconsciousness.
Treatment: Call 911, if unable to get person to medical help immediately, do the following:
* Move person to a cooler environment
* Remove outer clothing
* Reduce body temperature using lukewarm (not cold) water to bathe/spoon the person
* Do not give fluids

Activity Guidelines

Fluid breaks should be scheduled for all practices and become more frequent as the heat and humidity levels rise.

Add 5°F to the temperature between 10:00 a.m. and 4:00 p.m. from mid-May to mid-September on bright, sunny days.

A. Children should receive a 5-10 minute rest and fluid break after every 25 to 30 minutes of activity.

B. Children should receive a 5-10 minute rest and fluid break after every 25 to 30 minutes of activity. Children should be in shorts and t-shirts (with helmet and shoulder pads only, not full equipment, if worn for activity).

C. Children should receive a 5-10 minute rest and fluid break after every 15 to 20 minutes of activity. Children should be in shorts and t-shirts only (with all protective equipment removed, if worn for activity).

D. Cancel or postpone all outdoor practices/games. Practice may be held in an air conditioned space.