

CHRONIC HEALTH CONDITION EMERGENCIES

DURING TRANSPORTATION:

1. ENSURE THE SAFETY OF ALL STUDENTS ON THE BUS & NOTIFY THE BUS GARAGE OF THE EMERGENCY USING ESTABLISHED CODES. THE BUS GARAGE WILL NOTIFY 9-1-1.
2. ASSESS THE EMERGENCY, LOOK FOR MEDIC ALERT NECKLACE OR BRACELET. SEE IF THE STUDENT IS IDENTIFIED TO HAVE A CHRONIC CONDITION. DETERMINE IF IMMEDIATE FIRST AID IS NEEDED. PROVIDE THAT FIRST AID TO THE BEST OF YOUR ABILITY.
3. KEEP ALL STUDENTS SAFE UNTIL EMERGENCY MEDICAL ASSISTANCE ARRIVES.



ANAPHYLAXIS: DESIGNATE SOMEONE TO CALL 911



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|--|------------------------|---|------------|
| SWELLING IN THE THROAT, CAUSING DIFFICULTY SWALLOWING OR BREATHING | BLUE/GRAY SKIN COLOR! | FAST PULSE RATE | CHEST PAIN |
| FAINTESS OR UNCONSCIOUSNESS | CRAMPING STOMACH PAINS | AN SWELLING –ESPECIALLY OF FACE OR NECK AREA | |
| WHEEZING & COUGHING | “NETTLERASH” OR HIVES | TINGLING IN THE LIPS OR MOUTH IF THE CAUSE WAS FOOD | DIARRHEA |

1. Ask the student if they are having trouble breathing
2. Ask the student if they are having trouble swallowing
3. Ask the student if they have an Epi-pen with them

If YES: *Help the student to find their pen if they cannot*

- Instruct the student to use the Epi-pen
- If the student becomes physically or mentally unable to use the Epi-pen, follow the directions on the pen and assist the student to use the Epi-pen

If NO:

- Instruct the student to “breathe in through your nose, and out through your mouth –slowly.” This will help to calm the student and will increase airflow.
- Tell the student that help is on the way and they will be okay.



ASTHMA ATTACK: DESIGNATE SOMEONE TO CALL 911 IF THEIR RESCUE MEDICATION IS NOT IMMEDIATELY EFFECTIVE



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|-----------------------|------------------------------------|------------------|
| DIFFICULTY BREATHING | NOISY BREATHING—RATTLING/ WHEEZING | GASPING FOR AIR |
| CAN NOT STOP COUGHING | COMPLAINTS OF CHEST PAIN | “TURNING COLORS” |

1. Ask the student if they are having trouble breathing.
2. Ask them if they have an inhaler with them.

If YES: *Help the student to find their inhaler if they are upset and cannot.*

- Instruct the student to use the inhaler.
- Instruct the student to “breathe in through your nose, and out through your mouth –slowly.” This will help to calm the student and will increase airflow.
- Tell the student that help is on the way and they will be okay.

If NO:

- Instruct the student to “breathe in through your nose, and out through your mouth –slowly.” This will help to calm the student and will increase airflow.
- Tell the student that help is on the way and they will be okay.



CHRONIC HEALTH CONDITION EMERGENCIES



DIABETIC (LOW BLOOD SUGAR) CRISIS:

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|-----------|----------------|----------|--------------|-----------|-----------|-------------|
| SHAKING | FAST HEARTBEAT | SWEATING | FATIGUE | DIZZINESS | HEADACHE | HUNGER |
| CONFUSION | ALTERED VISION | ANXIOUS | FEELING WEAK | | IRRITABLE | MOOD SWINGS |

1. Ask the student if they are okay. Are they hungry, are they feeling “funny?”
2. Instruct the student to eat or drink. It is safe to give food or sugar treatment to any diabetic who is acting different from normal. Fast acting sugars such as regular coke, orange juice, glucose tablets, cake icing is okay— anything that the body can rapidly use for sugar.

IF A STUDENT WITH DIABETES IS EVER UNABLE TO EAT, DRINK, TALK IN A NORMAL MANNER, WALK, ETC...

- **Designate someone to call 911** 
- The student may look comatose or have a seizure. The student must receive a glucagon injection immediately.
- Place the student on their side in the rescue position. 
- Stay with and monitor the student until EMS arrives.



SEIZURES:

- **CONVULSIVE** Tonic-Clonic seizures or “grand mal” (loss of consciousness, stiffening of body, jerking of limbs)
- Simple Partial seizures (uncontrolled body movements, brief changes in sensory perceptions)
- Complex Partial seizures (confusion, loss of awareness, aimless movements)

If there is no history of seizure, OR--If any seizure lasts longer than five minutes or if another starts right after the first, **DESIGNATE SOMEONE TO CALL 911**



Keep the Student Safe!

1. **Ease the student to the floor** (unless harnessed securely in wheelchair and breathing is not restricted).
2. **Remove hazards in the area, such as sharp or hard objects**
3. **Cradle the student’s head to ensure it does not bounce on the floor or into any object**
4. **Stay clam and reassure others.**
5. **Try to time the seizure**
6. **Loosen any tight clothing at the neck**
7. **Never force anything between the teeth or put anything in the mouth**
8. **Place something soft under the student’s head to cushion**
9. **Turn the student onto his/her side when the seizure stops to allow saliva to drain and prevent the tongue from blocking the airway.**

THE STUDENT MAY HAVE EMERGENCY MEDICATION—DIASTAT OR VERSED

MAKE SURE YOU ARE TRAINED TO ADMINISTER THE EMERGENCY MEDICATION



**DURING ANY EMERGENCY, STAY CALM
WHILE YOU WAIT FOR HELP TO ARRIVE!**

