

EMERGENCY TREATMENT: 3418P

Staff are encouraged to become trained and/or maintain skills in recognized first aid procedures, especially through American Heart Association or Red Cross certified providers. Staff have the affirmative duty to aid an injured student and act in a reasonable and prudent manner in obtaining immediate care. The staff member who exercises his/her judgment and skills in aiding an injured person during the school day or during a school event is protected by the district's liability insurance except when the individual is operating outside the scope of his/her employment or designated duties.

Any child who appears to be very ill or who has received a serious injury should be either sent home or to a physician or hospital as quickly as possible. The nurse, health services assistant, or principal/designee shall make the appropriate decision. In the event the principal or nurse is not available, the staff member designated by the principal to take charge in emergency situations shall be responsible for the decision. For a life-threatening emergency (severe bleeding, shock, breathing difficulty, heart attack, head or neck injuries), call for an aid car. The principal, nurse, responsible designated person, or involved staff member should contact the parent as quickly as possible to determine whether the child should:

- A. Be sent to a hospital; or
- B. Be sent to a doctor; or
- C. Be sent home; or
- D. Remain at school.

If the parent cannot be contacted, call the emergency number listed on the child's enrollment card to determine the next course of action.

If a seriously injured or ill student requires transportation to a hospital by Emergency Medical personnel or a private ambulance, and a parent or guardian is not available to accompany that student, a member of the school staff should accompany the student either in the vehicle or following in their private vehicle. That person shall remain with the student until the parent or guardian arrives.

If a seriously ill or injured child is sent home or to the hospital by private automobile, be sure that someone trained in first aid accompanies the child. This is in addition to the driver of the vehicle. Transportation by private vehicle would be a last resort if emergency responders are not available. Do not let a child walk home if he/she has a high fever (102+), has a head injury, or is likely to go into shock from injury. Even if the parent says to send the child, do not send a child home unaccompanied if the way home is not likely to be a safe route.

If illness or injury is not life-threatening, the parent should arrange transportation. If ambulance service is required, ask the parent to call the ambulance or secure permission from the parent to call one. The child should be sent to the hospital of the parent's choice. Be sure to notify the hospital that the child is on the way.

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If the injury is deemed to be minor, the trained staff member should:

- A. Administer first aid to the child as necessary (following flip chart in nurse's office or standard American Heart Association/Red Cross procedure);
- B. Notify the nurse, principal or responsible designated person. The nurse may be consulted by phone if not in the building;
- C. Remain with the child until released by the principal, nurse, responsible person, or the parent;
- D. The nurse, principal or other responsible person so designated should make the decision whether an ill or injured child who has received first aid should return to class. If there is any doubt the parent should be consulted.

If a serious injury occurs during a physical education class or during an athletic team practice or game, emergency procedures shall be conducted in the following manner:

- A. **Stop** play immediately at first indication of possible injury or illness;
- B. **Look** for obvious deformity or other deviation from the athlete's normal structure or motion;
- C. **Listen** to the athlete's description of his complaint and how the injury occurred;
- D. **Act**, but move the athlete only after serious injury is ruled out.

The teacher or coach should avoid being hurried into moving an athlete who has been hurt. He/she should attempt to restore life-sustaining functions, (e.g., stop/repair uncontrolled bleeding, suffocation, cardiac arrest) before moving the athlete to an emergency facility. An athlete with a suspected head, neck or spinal injury should not be moved. If no physician is available, call 911 and proceed with caution according to first aid procedures. If he/she must accompany the student to a doctor, the activity or event should cease.

An accident report must be completed by the activity director, as soon as possible, from information provided by the person at the scene of the accident. The written report should include a description of the circumstances of the illness or injury and procedures followed in handling it at school. The original should be sent to the Risk Management office.

School staff may not accept and may not agree to comply with directives to physicians that would withhold or withdraw life-sustaining treatment from students.