

Montgomery County Schools
Annual Training

Chronic Conditions and Emergencies at School

**Know: WHO? WHAT? WHEN?
WHERE? AND WHAT DO I DO?**

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Your Responsibility

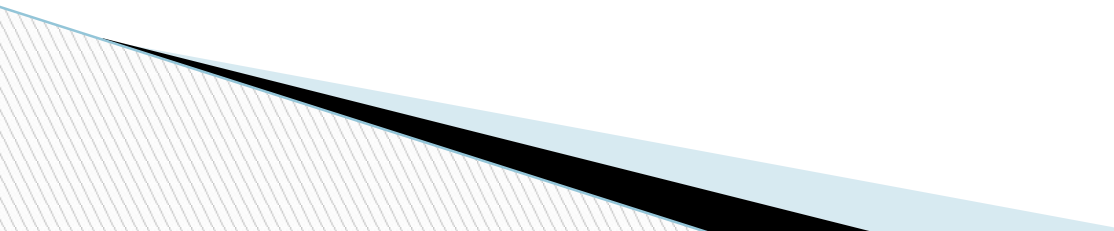
As a staff member of Montgomery County Schools, you must be alert to signs and symptoms that a student or faculty member is having a medical crisis. The following is general information to help you to become aware of the typical symptoms and behaviors associated with such an emergency.

In the absence of an Individual Health Care Plan follow standard procedures.

Severe Allergic Reaction--Anaphylaxis

- Anaphylaxis is a sudden, severe, potentially fatal, systemic allergic reaction that can involve various areas of the body (i.e. skin, respiratory tract, gastrointestinal tract, and cardiovascular system).
- Symptoms may occur within minutes to hours after contact with the allergy-causing substance, but in rare instances may occur up to four hours later. Anaphylactic reactions can be mild to life threatening.
- Anaphylaxis

Staff Members:

- ❑ Our main priority is the safety of the child while they are at school. If the parent tells you of the allergy, make sure the principal and school nurse are aware.
 - ❑ Parents are the greatest source of information. When talking to them, always ask if their child has ever had any “strange reactions” to any food, bee stings, etc... This may indicate the potential for anaphylaxis the next exposure
 - ❑ Take the initiative and make sure every staff member who will be in contact with the child knows they have severe allergic reactions to "x."
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Epi-pen

Anaphylaxis requires prompt medical intervention followed by transport to the nearest emergency room. **The injection is good for approximately 10-15 minutes.**

What if they don't have any EPI?

Know where the School Emergency Epinephrine is located (Health Unit in the big yellow box or with AED in big yellow box.

Asthma

- Asthma is one of the most common chronic diseases in children, and the leading cause of school absences (approximately three times the average of children without asthma).
- Approximately 5 million children have been diagnosed with asthma in the U.S. Asthma is a chronic lung disease characterized by episodes or attacks of coughing, wheezing, chest tightness, and/or shortness of breath.
- Asthma

Asthma

- ❑ **Asthma is characterized by excessive sensitivity of the lungs to various stimuli (or triggers).**
- ❑ **Many students will have identified triggers and may need environmental modifications at school in order to avoid them.**

Each child reacts differently to the factors that may trigger asthma.

Asthma Inhaler



DIABETES: Hypoglycemia: Low Blood Sugar

Causes of Hypoglycemia: too much insulin, missed food, delayed food, too much or too intense exercise, unscheduled exercise.

Responding to Hypoglycemia 2

Hypoglycemia



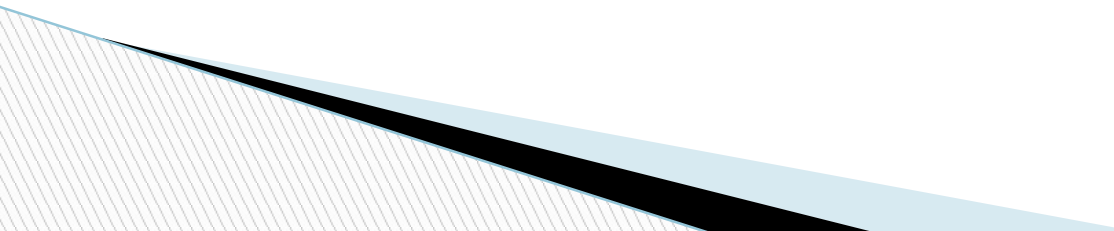
Lows at Other Times:

Unless corrected, hypoglycemia will lead to unconsciousness, convulsions (seizures), and possibly death. Never leave a student experiencing symptoms of hypoglycemia alone. Call for help; send someone for help; or carry the student to the office.

LOW BLOOD SUGAR EMERGENCY

If at any time the student with diabetes becomes physically unable to check his/her blood sugar (With the exception of physically disabled students), becomes unconscious, is having a seizure, becomes unable to communicate normally, or is unable to swallow, **DO NOT GIVE FOOD OR DRINK!**

1. CALL FOR SCHOOL NURSE

- 1. If there is no nurse in your building at this time, or if it occurs after school, Notify Principal of emergency and to call 911. Assign someone to notify parent/guardian.**
 - 2. Get the student's Glucagon Kit—if they have one**
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Glucagon Emergency Kits

- ❑ **A licensed health service provider/ trained staff member must immediately give prescribed glucagon injection as prescribed by the students physician, according to package instructions and training.**
- ❑ **Directions for mixing and injection are included in the kit**

❑ **Glucagon**

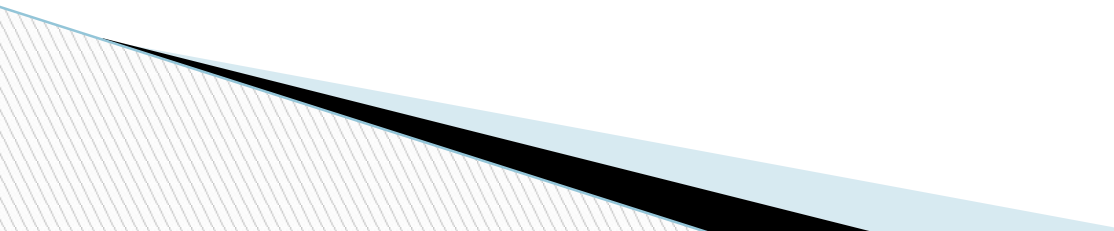
- ❑ **Give the used Glucagon Kit to EMS when they arrive.**

If EMS hasn't arrived, feed the student AS SOON AS HE/SHE IS AWAKE AND ABLE TO SWALLOW

Hyperglycemia

**Hyperglycemia—not an
emergency**

STANDARD SEIZURE RESPONSE:

- ✓ **ENSURE STUDENT SAFETY:** Protect the student's head, roll to left side if possible, speak in calming voice to student
 - ✓ **ENVIRONMENTAL SAFETY:** Remove hazards in the area, such as sharp or hard objects
 - ✓ **DO NOT:** Put anything in the mouth, attempt to hold down, try to waken, move to another location—unless the current location is dangerous, or ask the student sit up or walk before the nurse/EMS has assessed the student.
 - ✓ **Actual Seizure**
 - ✓ **Actual Seizure 2**
 - ✓ **Actual Seizure 3**
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Student Seizure Safety

- ❑ **Ease the student to the floor (unless harnessed securely in wheelchair and breathing is not restricted).**
- ❑ **Assign someone to time the seizure**
- ❑ **Stay calm and reassure others.**
- ❑ **Loosen any tight clothing at the neck**

Convulsive Seizures

Seizure Care

What to do: Seizure Emergency

- ❑ **Do:** Notify EMS according to the Individual Health Plan
- ❑ **Do: Notify 911 immediately if the student has never seized before,** if the seizure lasts longer than 5 minutes or has diabetes.
- ❑ **Do:** Administer emergency medication as ordered—May be oral or rectal medication.
- ❑ **Do:** Turn the student on his/her side when muscle spasms stop
- ❑ **Diastast**

QUESTIONS?

- ❓ IF YOU HAVE ANY QUESTIONS ABOUT ANY OF YOUR STUDENT'S HEALTH, TALK TO YOUR SCHOOL NURSE OR CONTACT SHANDA BREWER.
 - ❓ OUR GOAL IS TO KEEP STUDENTS HEALTHY, SAFE & LEARNING!!!
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