

Simple First Aid and Chronic Condition Information for Teachers and School Staff



ALLERGIC REACTION

Students with life-threatening allergies should be known to appropriate school staff. An emergency care plan should be developed. Staff in a position to administer approved medications should receive instruction, and PA Law does permit students to carry and self-administer epinephrine auto-injectors after determined to be competent by the Certified School Nurse.

Children may experience a delayed allergic reaction up to **2 hours** following food ingestion, bee sting, etc.

Does the student have any symptoms of a severe allergic reaction which may include:

- Flushed face?
- Dizziness?
- Seizures?
- Confusion?
- Weakness?
- Paleness?
- Hives all over body?
- Blueness around mouth, eyes?
- Difficulty breathing?
- Drooling or difficulty swallowing?
- Loss of consciousness?
- Swelling or tingling of lips, tongue, throat

NO

Symptoms of a mild allergic reaction include:

- Red, watery eyes.
- Itchy, sneezing, runny nose.
- Hives or rash on one area.

Adult(s) supervising student during normal activities should be aware of the student's exposure and should watch for any delayed symptoms of a severe allergic reaction (see above) for up to 2 hours.

If student is so uncomfortable that he/she is unable to participate in school activities, contact responsible school authority & parent or legal guardian.

YES

- Check student's airway.
- Monitor the student's breathing.
- **If student stops breathing, start CPR.** See "CPR" section.

Does student have an emergency care plan available?

NO

Follow school policies for students with severe allergic reactions. Continue CPR if needed.

YES

Refer to student's plan.
Administer doctor-and parent/guardian-approved medication as indicated.



CALL EMS 9-1-1.
Contact responsible school authority & parent or legal guardian.

Use the Epi-Pen for Acute Anaphylactic Reaction

Signs:

Acute onset of rapid heart rate, drop in blood pressure, diffuse hives, swelling of the tongue, vomiting, or severe wheezing.

Epi-Pen Jr.:

Use for 60lbs or less.

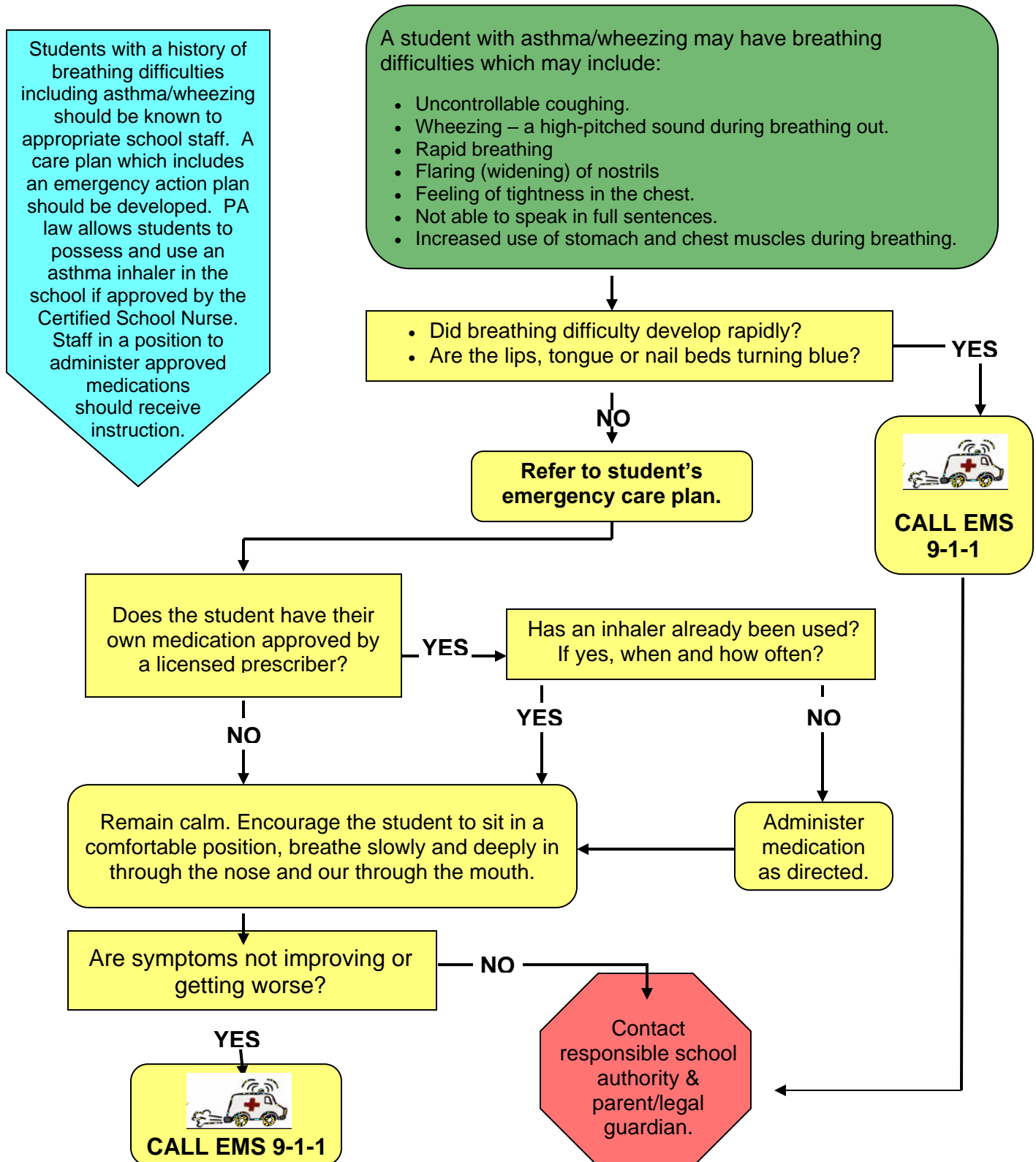
Epi-Pen:

Use for 60lbs or more.

Directions:

1. Take out of the container and remove safety cap.
2. Place tip on thigh at a right angle to leg, support inner thigh and get additional help if necessary. **May be injected through clothing if necessary**
3. Press hard into thigh until auto-injector mechanism functions.
4. Hold in place for 10 seconds. Auto-injector will self-sheath the needle when removed.
5. Call 911 for Advanced Life Support and parent/guardians.
6. Mark time of administration on Epi-Pen
7. Give used Epi-Pen and box to paramedics when they arrive.

ASTHMA & DIFFICULTY BREATHING



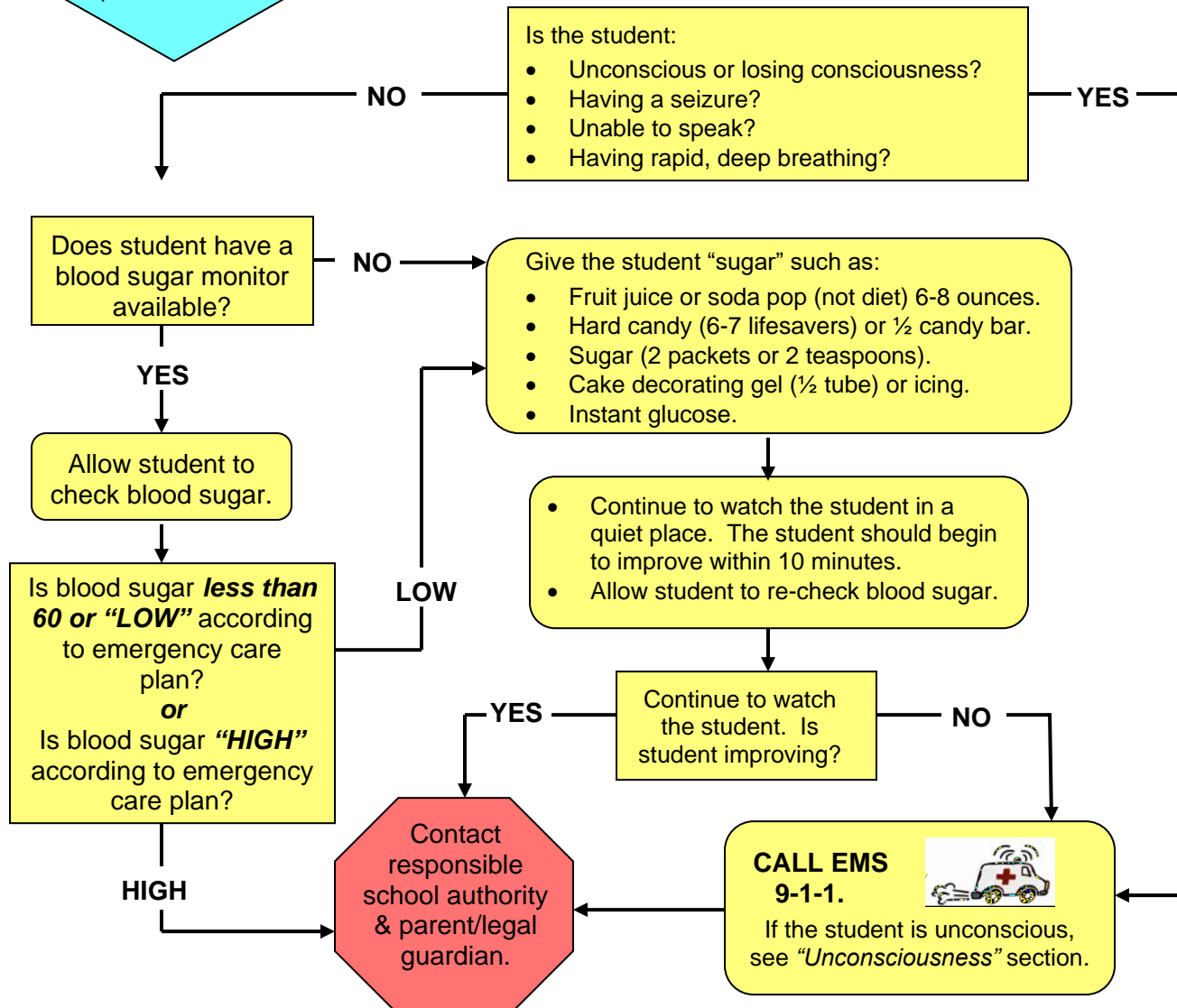
DIABETES

A student with diabetes should be known to appropriate school staff. An emergency care plan must be developed. Only licensed professionals may administer glucagon or insulin in schools. OR implement ALL aspects of Act 86.

A student with diabetes may have the following symptoms:

- Irritability and feeling upset.
- Change in personality.
- Sweating and feeling “shaky.”
- Loss of consciousness.
- Confusion or strange behavior.
- Rapid, deep breathing.

Refer to student’s emergency care plan.



SEIZURES

Seizures may be any of the following:

- Episodes of staring with loss of eye contact.
- Staring involving twitching of the arm and leg muscles.
- Generalized jerking movements of the arms and legs.
- Unusual behavior for that person (e.g., running, belligerence, making strange sounds, etc.).
- If head injury is suspected, do not move the child.

A student with a history of seizures should be known to appropriate school staff. An emergency care plan should be developed, containing a description of the onset, type, duration, and after effects of the seizures.

Refer to student's emergency care plan.

- If student seems off balance, place him/her on the floor (on a mat) for observation and safety.
- **Do NOT restrain movements.**
- Move surrounding objects to avoid injury.
- **Do NOT place anything in between the teeth or give anything by mouth.**
- Keep airway clear by placing student on his/her side. A pillow should *NOT* be used.

Observe details of the seizure for parent/legal guardian, emergency personnel or physician. Note:

- Duration.
- Kind of movement or behavior.
- Body parts involved.
- Loss of consciousness, etc.

- Is student having a seizure lasting longer than 5 minutes?
- Is student having seizures following one another at short intervals?
- Is student *without a known history* of seizures having a seizure?
- Is student having any breathing difficulties after the seizure?

Seizures are often followed by sleep. The student may also be confused. This may last from 15 minutes to an hour or more. After the sleeping period, the student should be encouraged to participate in all normal class activities.

NO

YES

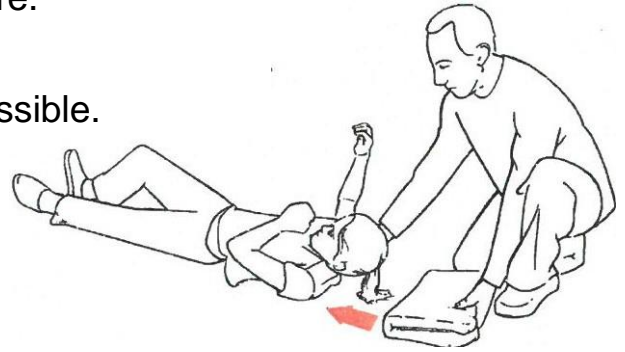
Contact responsible school authority & parent or legal guardian.



CALL EMS 9-1-1.

FIRST AID FOR SEIZURES

1. Stay calm, most seizures only last a few minutes.
2. Prevent injury by moving any nearby objects out of the way.
3. Pay attention to the length of the seizure.
4. Make the person as comfortable as possible.



5. Keep onlookers away.
6. Do **not** hold the person down.
7. Do **not** put anything in the person's mouth.
8. Do not give the person water, pills, or food until the person is fully alert.
9. If the seizure continues for longer than five minutes, call 911.



10. Be sensitive and supportive and ask others to do the same.

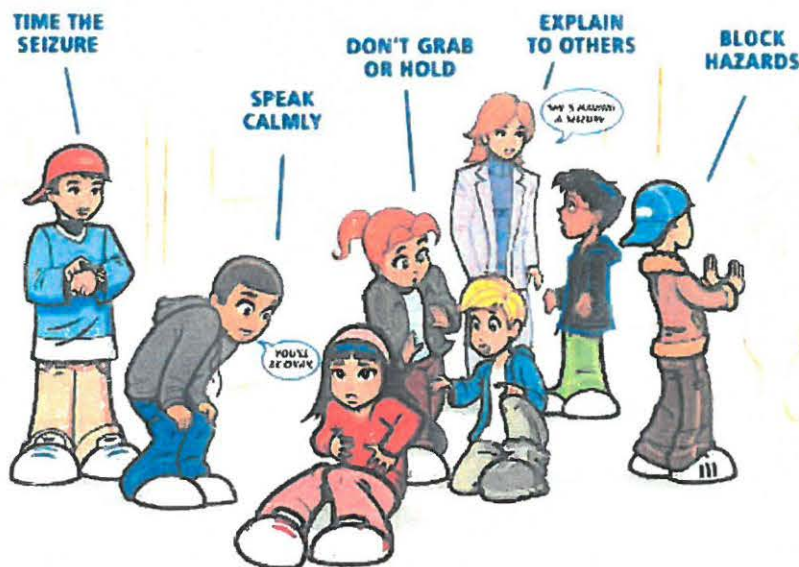
First Aid for Seizures

(Complex partial, psychomotor, temporal lobe)

1. Recognize common symptoms



2. Follow first-aid steps



People who've had this type of seizure should be fully conscious and aware before being left on their own. Make sure they know the date, where they are, and where

they're going next. Confusion may last longer than the seizure itself and may be hazardous. If full awareness does not return, call for medical assistance.



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Seizure First Aid

How to help someone having a seizure

1

STAY with the person until they are awake and alert after the seizure.

- ✓ **Time** the seizure
- ✓ Remain **calm**
- ✓ Check for **medical ID**



2

Keep the person **SAFE**.

- ✓ Move or guide away from **harm**



3

Turn the person onto their **SIDE** if they are not awake and aware.

- ✓ Keep **airway clear**
- ✓ **Loosen tight clothes** around neck
- ✓ Put **something small and soft** under the head



Call
911
if...

- ▶ Seizure lasts longer than 5 minutes
- ▶ Person does not return to their usual state
- ▶ Person is injured, pregnant, or sick
- ▶ Repeated seizures
- ▶ First time seizure
- ▶ Difficulty breathing
- ▶ Seizure occurs in water

Do
NOT

- ✗ Do **NOT** restrain.
- ✗ Do **NOT** put any objects in their mouth.
- ✓ **Rescue medicines can be given** if prescribed by a health care professional

Learn more: [epilepsy.com/firstaid](https://www.epilepsy.com/firstaid)

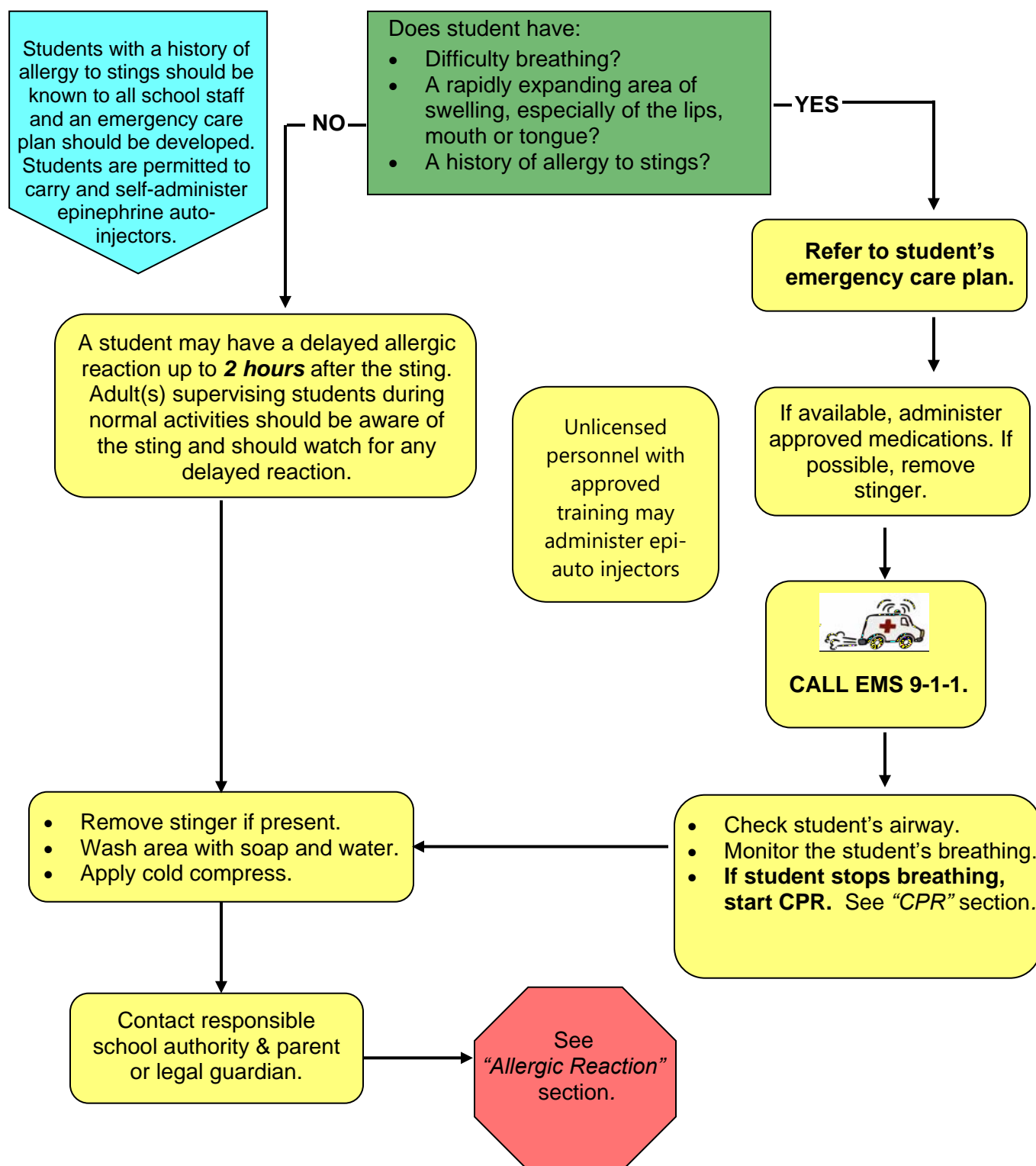


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[epilepsy.com](https://www.epilepsy.com)

24/7 Helpline: 1-800-332-1000

STINGS



UNCONSCIOUSNESS

If student stops breathing, and no one else is available to call EMS, administer CPR for 2 minutes and then call EMS yourself.

Unconsciousness may have many causes including:

- Injuries.
- Blood loss/shock.
- Poisoning.
- Severe allergic reaction.
- Diabetic reaction.
- Heat exhaustion.
- Illness.
- Fatigue.
- Stress.
- Not eating.

If you know the cause of the unconsciousness, see the appropriate guideline.

