Abdominal Pain, severe – lasting longer than 15 minutes

Immediate First Aid

1. Send to health room for evaluation
2. If unable to walk, alert School Nurse or call Emergency Care Team to site of illness
3. Notify parent of need to seek medical attention

Anaphylactic Reactions – may be caused by allergies to foods, insect bites/ stings, medicines, exercise or an unknown substance

1. Call 911, Emergency Care Team and parents
2. Give prescribed meds on hand at school for this student

<u>Signs and Symptoms of Severe, Life-threatening Reaction</u> (can happen even without a history of anaphylaxis in the past)

- Flushed (red) skin
- Facial swelling
- Hives - red, raised, warm whelps
- Trouble breathing, swallowing, talking (hoarseness)
- Sneezing, persistent coughing, or wheezing
- Generalized swelling
- Nausea, vomiting, diarrhea, dizziness, confusion, weakness, loss of consciousness

Student does not have to have all symptoms, just 2-3 symptoms usually signals trouble is coming!

Asthma – Characterized by coughing, clearing of throat, wheezing. Child may complain of tightness/pain in chest, shortness of breath.

Emergency warning signs

- Difficulty walking or talking (not talking in complete sentences)
- Hunched over, struggling to breathe
- Retractions(skin sucking in) at base of neck or between ribs
- Nail beds/lips blue or purple (911 emergency)

Immediate First Aid

1. Remove to another location (to remove local trigger if present) Can be as close as into hallway or beside open door/window
2. Determine if student has meds at school and allow to use per individual health plan
3. Offer sips of water if no meds available, observe for status of symptoms
4. Call School Nurse or Emergency Care Team to site to evaluate if no improvement within 5 minutes, or condition is rapidly worsening
5. Call 911/parent at request of Emergency Care Team

Bleeding – more than 1 ounce of blood present, gapping wound, spurting blood

Immediate First Aid

1. Place thick, clean dressing material directly over wound using gloved hand
2. If bleeding is severe and continuous, apply pressure directly over the wound until bleeding stops
3. Elevate wound above student's heart level if possible
4. Call for School Nurse or Emergency Care Team.
5. Notify parent.

Blisters – newly formed at school, regardless of cause

Immediate First Aid

1. Protect unopened blisters with clean, dry dressing to prevent breaking blister. Chance of infection increases when blister is open
2. If blister is open, wash with antibacterial soap and water, apply clean, dry dressing.
3. Call for School Nurse or Emergency Care Team if blister is caused by a burn.

Broken Bones – Simple fractures are much more common than compound fractures (where bone is visible through an open wound) **Generally the only way to rule out a fracture is by x-ray.**

Signs and Symptoms of possible fracture:

- Edema, swelling
- Discoloration/bruising
- Pain (with or without motion)
- Tenderness to the touch
- Deformity and possible shortening of the limb
- Inability to bear weight, inability to move independently

Immediate First Aid

1. Even if doubt exists as to presence of fracture, provide first aid as if known fracture to prevent further injury
2. Keep student quiet, treat for shock (see **Shock**) if indicated.
3. Do NOT move injured limb, do NOT move student unless in danger in current location.
4. Alert School Nurse or Emergency Care Team to site of injury.
5. Notify parent as directed by Emergency Care Team
6. Call 911 at direction of Emergency Care Team

First Aid in the Classroom
Union County Public Schools

Burns -

First Degree Burn - superficial, skin turns red (sunburn, scalding).

Immediate First Aid

1. Remove rings, bracelets, etc. before swelling begins
2. Place burned area under cold running water or put cold compresses on area
3. Do NOT apply any ointments or creams
4. Continue cold water therapy until pain stops
5. Call School Nurse or Emergency Care Team to evaluate further treatment needs.

Second Degree Burn – deeper than first degree, blisters, cracking open

Immediate First Aid

1. Remove rings, bracelets, etc. before swelling begins.
2. Place burned area under cold running water or put cold compresses on area until pain subsides.
3. Alert School Nurse or First Responder Team to evaluate further treatment needs.
4. Do NOT apply ointments, break blisters, or attempt to remove any tissue/debris from burn site.
5. If arms or legs are burned, elevate above heart.
6. Notify parent of need to seek medical attention.

Third Degree Burn – destroys all layers of the skin, blackens flesh, painless

Immediate First Aid

1. Call 911 immediately, notify School Nurse and Emergency Care Team and parents
2. Remove rings, bracelets, etc before swelling begins
3. Do NOT attempt to remove articles of clothing
4. Do NOT apply cool compresses
5. Apply clean, dry dressing to area
6. If arms or legs are burned, elevate them above heart
7. Keep student warm, calm and reassured

Chemical Burns - Skin

Immediate First Aid

1. Call 911, notify School Nurse or Emergency Care Team and parents
2. If possible, immediately remove contaminated clothing
3. Run water over are for at least 15 minutes
4. Cover burn area with clean dry dressing

Chemical Burns – Eyes

Immediate First Aid

1. Flush eye with tap water for **15 minutes**.
2. Call 911. Alert School Nurse or Emergency Care Team and parents
3. Immobilize eyes by covering both eyes (eyes move together, so if only one eye is covered, both eyes continue to move with uncovered eye

Diabetes Mellitus – Type I & Type II– may face 2 serious emergencies

1. Low Blood Sugar
2. High Blood Sugar

Signs of Low Blood Sugar

- Excessive sweating or faintness
- Headache
- Hunger
- Pounding of heart; trembling; impaired vision
- Irritability
- Personality change
- Inability to awaken

Immediate First Aid

1. Give fast, simple sugar (juice, candy, cola, etc.)
2. Check blood sugar with glucometer
3. If student becomes unconscious, call Diabetes Care Manager to site to assist in administration of Glucagon.
4. Notify parents when crisis subsides
5. Recheck Blood Sugar every 15 min. until within normal range (80 – 120ml/dl), then as needed and requested by student

Signs of High Blood Sugar

- Increased thirst and urination
- Weakness; abdominal pains, centralized aches
- Loss of appetite, nausea and vomiting
- Sweet smelling breath
- Irritability, angry, objectionable

Immediate First Aid

1. Check blood sugar to determine current level
2. Offer water as tolerated
3. Contact Diabetes Care Manager if insulin needs to be administered
4. Recheck blood sugar every 15 minutes until blood sugar returns to normal range (80-120 ml/dl)

Ear - Foreign Body

Immediate First Aid

1. Notify parent of need to seek medical attention
2. Do NOT attempt to remove object, rinse or flush ear, or put anything into ear

Eye injury

Immediate First Aid

1. If eye sustains a severe blow, cut or perforating wound, do NOT attempt to open eye; put clean dry dressing to both eyes (to limit motion)
2. Do NOT apply pressure
3. Call School Nurse or Emergency Care Team to site of incident
4. Notify parent of need for immediate medical attention
5. Treat bruises immediately with cool compresses

Eye – Foreign Body

Immediate First Aid

1. Flush eye several times with warm water. Tilt head so that water runs from inner aspect to outer aspect of eye
2. Notify First Responder Team to assess further first aid needs if object is not removed by above efforts
3. Notify parent as requested by First Responder Team
4. Patch both eyes with clean, dry dressing

Fainting

Immediate First Aid

1. Have student lie on back with feet slightly raised (on a stack of books or seat of desk)
2. Call School Nurse or Emergency Care Team to site for evaluation

Fall – severe

Immediate First Aid

1. Keep student lying down, warm and quiet
2. Call School Nurse or Emergency Care Team to site for evaluation
3. Do NOT move child is any of the following signs are present
   - Severe headache
   - Inability to move extremities
   - Numbness or tingling in any extremity
   - Severe neck or back pain
   - Altered mental status
4. Call 911. Alert School Nurse or Emergency Care Team.
5. Call parent.

Fractures – (See Broken Bones)

Headache – may represent the onset of illness, stress, vision concerns, exposure to allergens/toxin, classroom avoidance or have unknown causes. Refer to Health Room for evaluation and referral for needed follow-up care.

Immediate First Aid – sudden, severe headache

1. If headache is described as “worst pain ever”, is accompanied by behavioral changes, altered mental status, vomiting , etc.
2. Call 911
3. Alert School Nurse or Emergency Care Team to site of illness
4. Notify parent of need for immediate emergency attention

Head Injury – results from blunt trauma to head

Signs and Symptoms of Possible Head Injury:

- Excessive drowsiness (cannot stay awake)
- Nausea, persistent vomiting following known injury
- Unequal pupils on exam with light
- Slurred speech/unable to speak
- Double vision
- Seizures
- Unsteady gait, dizziness
- Lack of coordination of arms or legs
- Numbness, tingling of arms or legs
- Behavioral changes with or without altered mental status

Immediate First Aid

1. Keep student lying down
2. Do NOT give liquids by mouth
3. Do NOT move student unless in danger in current location
4. Call School Nurse or Emergency Care Team to site of injury
5. Call 911 at the direction of Nurse or Emergency Care Team.
6. Notify parent.

Heat Emergencies

Heat Cramps – usually caused by sodium depletion after prolonged or excessive exercise during periods of high temperature/humidity outside

Signs and Symptoms of Heat Cramps:

- Profuse sweating
- Severe muscle cramps
- Normal or slightly elevated body temperature
- Alert and Oriented

Immediate First Aid

1. Remove from heat and provide fluids
2. Notify School Nurse or Emergency Care Team.

Heat Exhaustion – May be caused by heat exposure and excessive sweating without necessary fluid replacement.

Signs and Symptoms of Heat Exhaustion:

- Normal body temperature
- Pale and clammy skin
- Profuse perspiration
- Anxiety, tiredness, and weakness
- Headache
- Cramps and muscle spasms
- Nausea, dizziness and possibly fainting

Immediate First Aid

1. Remove from heat
2. Have student lie down with feet elevated
3. Apply cool compresses, wet clothes and fan student
4. If conscious may give sips of water,
5. Call School Nurse or Emergency Care Team to site
6. Call parent/911 as indicated.

Heatstroke/Sunstroke - occurs when body systems are overwhelmed by heat and are unable to compensate. Condition can be immediate and life threatening.

Signs and symptoms of Heatstroke/Sunstroke:

- High body temperature
- Hot, red, and dry skin
- No sweating
- Rapid and strong pulse
- Unable to eat, nausea and vomiting
- Headache and fatigue
- Confusion and disorientation
- Can progress to coma and death

Immediate First Aid

1. Call 911 and School Nurse or Emergency Care Team.
2. Move to cool location, sponge with cold water or wrap in wet, cold sheets
3. Notify parent of need for emergency medical attention

Human Bites – wounds from human bites, especially if deep and penetrating are extremely dangerous because of risk of bacterial/viral infections and thus may require physician evaluation and testing for Bloodborne Pathogens.

School nurse should be notified to come evaluate and implement Exposure Control Plan

Immediate First Aid

1. If bleeding, allow to bleed freely for 5-10 seconds, then rinse out with running water
2. Wash with antibacterial soap and water as soon as possible
3. Apply direct pressure to bite site with gauze pad if bleeding continues
4. Contact Emergency Care Team for proper follow up

Insect Bites/Stings

Immediate First Aid

2. Remove stinger, without pinching the site, scrape with fingernail
3. Determine if student has history of anaphylaxis to stings and has meds carried by student/in health room at school; give meds if indicated and available
4. Wash sting site with soap and water
5. Apply ice or cool cloth

Signs and Symptoms of Severe, Life-threatening Reaction to stings (can happen even without a history of anaphylaxis in the past)

- Flushed (red) skin
- Facial swelling
- Hives - red, raised, warm whelps
- Trouble breathing, swallowing, talking (hoarseness)
- Sneezing, persistent coughing, or wheezing
- Generalized swelling (more than just at the site of the sting)
- Nausea, vomiting, diarrhea, dizziness, confusion, weakness, loss of consciousness

If even a few of these symptoms occur, especially if breathing is compromised, call 911 immediately and alert Emergency Care Team

Lacerations – Can be minor, major or puncture.

Minor lacerations – include minor cuts, scratches, abrasions and rug burns

Immediate First Aid

1. Gently clean wound with antibacterial soap
2. Rinse well , dry gently with paper towel
3. Apply clean, dry dressing

Major lacerations – bleeding is increased, question need for stitches?

Immediate First Aid

1. Stop bleeding with pressure (see **Bleeding**)
2. Protect wound from further contamination
3. Call First Responder Team to provide care
4. Notify parent of need for immediate medical attention

Puncture Wound – can be serious because of the risk of tetanus

Immediate First Aid

1. Let wound bleed freely for 5-10 seconds to remove deep debris
2. Wash area with antibacterial soap and water
3. Flush wound itself with running water
4. Dry and apply clean, dry dressing
5. Notify parent and remind of need to assess current Tetanus immunization status (needs vaccine if greater than 5 years since last booster).

Nosebleed

Immediate First Aid

1. Have student sit with head bent forward (chin toward chest) to prevent blood from entering airway or being swallowed
2. With gloved hands, apply firm but gentle pressure where bone turns to cartilage in the nose for a MINIMUM of 10 minutes (allow student to do this if age appropriate)
3. Apply cold compress to nose above and below area of pressure
4. When bleeding stops, deter student from blowing or picking at nose
5. If bleeding does not stop, call Emergency Care Team to evaluate
6. Notify parent at direction of Emergency Care Team member

Nose – Foreign Object present

Immediate First Aid

1. Do NOT attempt to remove object from nose
2. Encourage student to gently blow nose, applying gentle pressure to opposite nostril
3. Deter student from sniffing as may move object farther into sinuses
4. Contact Emergency Care Team to evaluate
5. If breathing difficulty occurs, call 911and notify parent.

Seizures- Grand mal, complex partial or absence A seizure is an atypical, sudden burst of electrical energy that can alter consciousness, motor activity, sensory phenomena, or appropriate behavior. A seizure disorder is a condition of chronic, unprovoked recurring seizures.

Signs and Symptoms of Seizure Activity

- Vary depending on type and location in brain of seizure activity
- May involve movement of specific parts of the body or the entire body
- May involve hallucinations, or dream-like state
- May exhibit signs of fear or anxiety
- Sudden, brief contractions of a muscle or muscle group
- Loss of consciousness, followed by rhythmic contractions of entire body (grand mal seizure)

Immediate First Aid

1. Note the time of day.
2. Protect student from injury to self or others
3. Do NOT put anything in mouth or try to restrain
4. Call Emergency Care Team to evaluate needed steps
5. Reference to Individual Healthcare Plan for treatment specifics
6. Call 911 as indicated on IHP or if seizure state lasts greater than 5 minutes if not indicated on Seizure Plan.
7. Contact parent to notify of seizure, pick up and leaving school may not always be necessary students with known seizures.

Shock

Signs and symptoms of shock:

- Weakness
- Moist, clammy and pale skin
- Rapid and weak pulse
- Increased respiratory rate, which may be shallow, labored and/or irregular
- Dilated pupils
- Possible anxiety and disorientation that may progress to unresponsiveness and loss of consciousness

Immediate First Aid

1. Call Emergency Care Team to location of incident
2. Elevate feet 6-12 inches unless contraindicated.
3. Loosen tight clothing
4. Keep student warm
5. Call 911 and/or parent at direction of Emergency Care Team

Sprains – Occurs when ligaments, muscles, tendons and blood vessels are stretched or torn. Differentiation of sprain from fracture is impossible without x-ray. Treat the injury as a possible fracture (see **Broken Bones**)

Tick Bites – Can transmit bacteria of several diseases (Lyme Disease, Rocky Mountain Spotted Fever, etc.)

Immediate First Aid

1. Carefully and quickly remove tick with tweezers or gloved fingers in one motion grasping close to the skin, using care to remove all parts of tick.
2. Flush tick down the toilet. It is not necessary to save the tick for testing.

3. Gently scrub bite site with antibacterial soap and water.

4. Ticks should be removed as soon as possible since the risk of transmission of disease increases between 24-72 hours after the tick attaches to the skin
5. Notify parent and educate them regarding disease transmission and signs of infection to be reported to the health care provider.

Tooth Injury – Tooth is loosened in place or knocked from mouth

Immediate First Aid

1. Call Emergency Care Team to site of injury
2. Notify parent.
3. Gently wash dirt and debris from tooth, touching only the crown of the tooth (the enamel part of tooth, not the root).
4. Save the tooth in a container of cool water or possibly in the socket of the missing tooth for an older child without severe trauma.