

FIRST AID

Introduction

The health and well-being of the student should be of paramount concern in the school program. The school, acting in loco parentis, must assume certain responsibilities when accidents or sudden illness occur. Each situation will determine the action to be taken, based on the individual circumstances of each accident or illness. Since first aid is the immediate care given to an injured or ill person before the services of physician can be secured, caution needs to be exercised in all emergency care. First aid includes knowing what not to do as well as what to do. The school personnel must be able to respond quickly and provide first aid to minimize further injury to the student while present in the school environment.

The following are first aid guidelines for the care of sick or injured students:

1. Each school must have a minimum of three staff members certified in first aid and CPR who are designated to assume responsibilities in first aid situations. Their names should be posted clearly and visibly to include expiration date of certification (F.A.C. 64F-6).
2. Parents should be notified in all cases of accidents or sudden illnesses. Notification should be done in such a manner as not to create undue panic.
3. A responsible person should remain with the student until the parent assumes responsibility. **NEVER LEAVE A STUDENT UNATTENDED IN THE CLINIC.**
4. If the parent/guardian or emergency contact persons cannot be reached, the school administrator should assume responsibility for the disposition of the case.
5. Appropriate documentation must be made on school clinic records.

After immediate care in the school clinic, the decision will be made whether the student should stay in school. Some guidelines to follow are:

- will it interfere with learning (pain, eye injury, abdominal pain, malaise)?

- will it be a hazard to the health of classmates (communicable disease)?
- will it interfere with the student's mobility (sprained ankle)?

Medical care is the responsibility of the parent/guardian. The hospital, medical clinic, or health department will not treat a student who is not accompanied by a parent/guardian. Follow your school's policy for releasing a student to the parent/guardian.

GUIDELINES

A Serious Medical Emergency Includes:

1. Difficulty breathing or stopped breathing.
2. Bleeding which appears difficult to control.
3. State of shock due to:
 - Excessive bleeding.
 - Severe pain.
 - Insulin reaction or diabetic coma.
 - Physical or emotional trauma.
 - Allergic reaction.
4. Unconsciousness (beyond fainting).
5. Excessive burns.
6. Drug/alcohol overdoses.
7. Poisonings.
8. Fractures.
9. Complication of pregnancy/labor and delivery.
10. Animal bites.

Emergency Procedures to remember are:

1. Someone should remain with an ill or injured student until the situation is corrected or the parent/guardian has come for the student.
2. All serious accidents and illnesses must be reported to the school administrator.
3. If **911** is called, the school administrator, the parent (if possible), school nurse and school health coordinator must be notified. This can be done after the student has been given emergency care.

Action to be taken:

1. Call **911** and begin first aid/CPR as situation indicates.
2. Contact the parent/guardian or emergency contacts.
3. Do not move the student if there is suspected injury to the neck or spine unless necessary to prevent further injury.
4. Maintain open airway. If bleeding from mouth or jaw, or if vomiting, turn head to the side.
5. If possible, raise feet 8-12 inches. If this causes problems with breathing or additional pain, lower feet.
6. Place a blanket over student to prevent chilling. Do not allow student to overheat.
7. Do not give fluids or food.
8. If unconscious, do not place anything under the head.
9. Record extent and duration of unconsciousness.

Additional Instructions:

1. If parent/guardian cannot be contacted, call emergency contact person listed on emergency card.
2. If unable to contact either parent/guardian or their emergency designee, notify the school administrator and then the school nurse for assistance.
3. If student is to be transported via ambulance and the parent is unavailable, an appropriate school representative should accompany the student to the hospital. Be sure to take a copy of the emergency card giving permission to hospital personnel for treatment.
4. In case of an injury occurring at school, a Student Injury Report, SCS Form 447 should be completed by school administration clerical staff. School health staff treating the student should share the pertinent (what, when, where, how and time) information to assure accuracy in reporting.

EMERGENCY PROTOCOL

Immediate treatment and mobilization of emergency medical services are required for the following:

1. Acute Airway Obstruction
2. Severe Chest Pain or Shortness of Breath
3. Unconsciousness
4. Near Drowning
5. Massive External and/or Internal Hemorrhage
6. External or Internal Poisoning
7. Severe Allergic Reaction/Anaphylaxis
8. Suspected Neck, Back, or Head Injury
9. Severe Wounds of the Eye
10. Heat Stroke
11. Penetrating/Crushing Chest Wounds/Multiple Trauma
12. Chemical Burns, Second/Third Degree Burns

School Emergency Plan

1. Call **911** and begin first aid/CPR as situation indicates
2. Call Parent/Guardian
3. Call School Nurse
4. Notify School Administrator
5. Call School Health Coordinator after event unless needed for immediate assistance

Telephone Numbers

1. Local Fire/Rescue **911**
2. Poison Control 1-800-282-3171
3. Animal Control 227-1115 (sheriff's department)

These emergency procedures may be reproduced and posted in the clinic for easy reference. Post the names of staff members certified in first aid and CPR, in health room, administration, cafeteria and gymnasium (F.S. 743.064, 381.0056, F.A.C. 64F-6)