

**ILLINOIS DEPARTMENT OF HUMAN SERVICES**

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Superintendent Dr. Glenn W. McGee

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**Division of Community Health and Prevention**

**Office of Family Health**

Associate Director, Stephen E. Saunders, M.D., M.P.H.

**FIRST AID PROCEDURES FOR  
INJURIES AND ILLNESSES**

**EMERGENCY CARD (Sample)**

Name: \_\_\_\_\_ Home Address \_\_\_\_\_ Phone \_\_\_\_\_

Bus Student (Yes or No) \_\_\_\_\_ Gender \_\_\_\_\_ Date of Birth \_\_\_\_\_ Grade \_\_\_\_\_  
Home Room \_\_\_\_\_

Name of Father \_\_\_\_\_ Place of Work \_\_\_\_\_  
Daytime Phone Number \_\_\_\_\_  
Name of Mother \_\_\_\_\_ Place of Work \_\_\_\_\_  
Daytime Phone Number \_\_\_\_\_

Name of responsible adult who will assume responsibility for the child if parent/legal guardian cannot be reached:

- 1. \_\_\_\_\_ Daytime Phone Number \_\_\_\_\_
- 2. \_\_\_\_\_ Daytime Phone Number \_\_\_\_\_

(Please choose someone close to school or bus stop)

Physician Name \_\_\_\_\_ Phone Number \_\_\_\_\_  
Dentist Name \_\_\_\_\_ Phone Number \_\_\_\_\_  
Hospital Name \_\_\_\_\_ Phone Number \_\_\_\_\_

If you and the physician of your choice as indicated above cannot be reached in an emergency, and if in the judgment of the school authorities immediate and/or hospital attention is indicated, do you authorize responsible school authorities to send your child (properly accompanied) to an available hospital or physician? Yes \_\_\_\_\_ No \_\_\_\_\_

Insurance: Yes \_\_\_\_\_ No \_\_\_\_\_ Insurance Provider: \_\_\_\_\_ Policy #: \_\_\_\_\_

Allergies: \_\_\_\_\_ Medications: \_\_\_\_\_

Known Health Problems \_\_\_\_\_  
(See other side)

\_\_\_\_\_  
Signature of Parent/Legal Guardian or Guardian



## **Policies and Procedures Manual to Handle Medical Emergencies on School Property or During School Sponsored Activities**

Schools shall have local board administrative procedures for handling emergencies. Policies should be developed in cooperation with the local medical society, dental society, local health department and parent/legal guardian organizations. These policies shall be shared with parent/legal guardian, staff and local emergency medical services .

1. School authorities are responsible for providing adequate emergency health assistance and first aid in cases of injuries or illness until the parent/legal guardian or his/her representative arrives to assume responsibility.
2. In the absence of a school nurse, responsibility for ill or injured students shall be delegated to a person trained and qualified to administer first aid. School authorities have the obligation to provide adequate facilities and properly trained staff. It is strongly recommended that school staff rendering emergency health assistance and first aid on a daily basis have current first aid emergency medical technician (EMT) and CPR certification.
3. All school personnel shall be trained in emergency treatment of choking. Choke saving posters shall be displayed in prominent areas where food is consumed. (Poster available from Illinois Department of Public Health).
4. Parent/legal guardians are responsible for keeping ill students at home. They are responsible for providing transportation for students who become ill at school.
5. Parent/legal guardian(s) and the school principal shall be notified immediately when a student becomes ill or suffers an injury.
6. When immediate medical attention is needed, call emergency medical care source or student's physician and notify parent/legal guardian.
7. Parent/legal guardian will complete an emergency medical card, updated annually, which is to be kept readily available by the school. (See Sample Student Emergency Card).
8. Students with known medical problems or allergies should wear a MEDIC-ALERT tag.
9. The school shall maintain a list of all students with special health problems, e.g. diabetes, seizure disorders, asthma, allergies, hemophilia, etc.
10. Health care plans shall be written for all students with chronic health conditions and should be readily available in case of emergencies.
11. Written permission of the parent/legal guardian and physician is required for all students who receive daily medication and/or medical treatment.
12. Special provisions shall be provided for students with disabilities.

13. Suspected child abuse shall immediately be reported to proper authorities as required by law. To report child abuse to the Illinois Department of Children and Family Services, call 1-800-252-2873.
14. Any person experiencing an injury to the eye should be seen immediately by an eye doctor (ophthalmologist).

## EMERGENCY PHONE NUMBERS

Rescue Squad	
Paramedics	
Ambulance	
Poison Control Center	
Child Abuse Hotline	
Local Hospital	
Sheriff and/or Police	
Fire Department	
Rape Crisis Center	
Suicide Prevention Hotline	
Violence Prevention Hotline	
Medical Director/School Board Physician	
School Principal	
School Nurse/School Based Health Center	
Infectious Disease	
Disaster Response	
Local Health Department	
(Alternate) Transportation	
Other	

## PRIORITY ACTION FOR ALL EMERGENCIES

1. Keep calm!
2. Assess the situation. Be sure the situation is safe for you to approach.  
Examples of dangers may include:

live electrical wires	traffic
gas leak	violence
building damage	animals (insects, reptiles, dogs,
fire or smoke	spiders, or snakes)
3. Give immediate attention, and call 911 for emergency care for:
  - An unconscious victim
  - A victim with possible injuries to the head, neck or back
  - A victim who has stopped breathing
  - A victim's breathing and heart have stopped
  - Severe bleeding
  - Shock
  - Exposure to chemical irritants
  - Seizures
  - Significant difficulty in breathing. The inability to swallow or speak, and/or severe swelling and generalized hives.
  - Poisoning.
  - Severe psychiatric emergencies, i.e. possible suicide or extremely violent behavior
  - Impending deliveries
4. Notify parent/legal guardian of all emergencies.
5. Notify appropriate school authority.
6. Provide written documentation of event(s).
7. **UNDER NO CIRCUMSTANCES SHOULD A SICK OR INJURED STUDENT BE SENT HOME WITHOUT THE KNOWLEDGE AND PERMISSION OF THE PARENT, GUARDIAN, OR OTHER RESPONSIBLE PERSON!!**

## **UNIVERSAL PRECAUTIONS**

**WHEN CONTACT WITH BLOOD, BODY FLUIDS CONTAINING BLOOD, NON-INTACT SKIN OR MUCOUS MEMBRANES COULD OCCUR, DO THE FOLLOWING:**

### **USE THESE PRECAUTIONS FOR ANYONE AND EVERYONE!**

- C Use barriers, like gloves, to protect your skin from blood or body fluid contact.
- C Clean up all contaminated surfaces properly. Clean area with soap and water and use a disinfectant. (Liquid household bleach, approximately 8 teaspoons bleach per 1 gallon of water. To make a smaller amount in a 16-ounce spray bottle, use 1 teaspoon bleach per 16 ounces water.)
- C Dispose of all clean up materials and waste properly.
- C Wash your hands thoroughly as possible as soon as you can after removing gloves.
- C Know your school's guidelines for care and use of clean up tools and supplies.

### **PROPER HANDWASHING PROCEDURE**

1. Wet hands with soap and warm water.
2. Rub hands for 10-20 seconds. Clean under fingernails.
3. Rinse under warm running water.
4. Dry hands on your own clean towel.
5. Turn off water with paper towel. Throw towel away.

## INTRODUCTION

First aid is defined by the American Red Cross as “The immediate care given to a person who has been injured or has been suddenly taken ill.”

The purpose of this First Aid flipchart is to provide an accessible reference for emergency situations. The procedures outlined are neither a substitute for professional care nor a replacement for First Aid Training. The chart should be available in a convenient area for ready reference.

This flipchart is produced for, and distributed to, all Illinois schools. It should be used as a reference manual by all school personnel.

This flipchart is NOT intended to replace training in First Aid and/or CPR, but to supplement it. It is our strong recommendation that all school personnel become trained in First Aid and CPR.

The maximum benefit of this flipchart will be experienced through periodic review of the contents.

As with all emergency situations, variations in severity, individual needs, and circumstances of occurrences should dictate the exact care provided. The material within this flipchart is intended as a guideline for specific situations and should NOT be considered a substitute for consultation with a licensed health-care professional.

**IN CASE OF INFECTIOUS OR CONTAGIOUS DISEASES AND OUTBREAKS ALERT PROPER AUTHORITIES IMMEDIATELY.**

**ARRANGEMENTS SHOULD BE MADE IN ADVANCE WITH HEALTH CARE FACILITIES FOR THE PROVISION OF EMERGENCY MEDICAL CARE TO STUDENTS AND STAFF.**

## ABDOMINAL PAIN

**Mild pain:** May be due to constipation, menstrual periods, diarrhea, too little/too much food, etc. Usually responds to rest and time. Allow individual to rest 15-20 minutes. Notify parent/legal guardian if no improvement.

**Severe pain:** Pain may be accompanied by vomiting, fever, passage of bloody stools.

1. Have student lie down. DO NOT give anything by mouth DO NOT apply heat or cold.
2. Take temperature.
3. Notify parent/legal guardian if pain persists. If parent/legal guardian cannot be reached contact medical care provider
4. If diarrhea or vomiting, notify parent/legal guardian to take student home
5. If several people become ill at school on the same or successive days, suspect food poisoning. Immediately notify local health department or public health authority.

### **Pain from blow to abdomen:**

1. Lay student on back.
2. Keep quiet, warm and reassured.
3. Check for cold, clammy, pale skin, perspiration on forehead and palms, chills, nausea and vomiting, shallow rapid breathing, or weak pulse. If present see **SHOCK**.
4. Notify parent/legal guardian and appropriate school authority.

## ABDOMINAL WOUNDS

1. Call 911 for immediate medical attention (rescue squad, paramedics, ambulance).
2. Place individual on back with knees bent.
3. **DO NOT** remove foreign object (scissors, knife, etc.)
4. **DO NOT** try to replace protruding intestines or abdominal organs. **DO** cover with sterile dressing or clean, dry towel.
5. **DO NOT** give anything to eat or drink.
6. Control bleeding by direct pressure.
7. Check for cold, clammy, pale skin, perspiration on forehead and palms, chills, nausea and vomiting, shallow rapid breathing, thready pulse. If present see **SHOCK**.
8. Notify parent/legal guardian and appropriate school authority.

## **ABRASIONS - CUTS AND WOUNDS**

### **Small superficial abrasions and cuts:**

1. Cleanse gently with soap and water.
2. Control bleeding.
3. Apply antiseptic cream or powder.
4. Cover with band-aid or sterile dressing.

### **Cuts and wounds:**

1. Apply direct pressure using a sterile dressing, clean dry towel, or cloth. **DO NOT** disturb dressing as it may cause additional bleeding.
2. If bleeding cannot be controlled see **BLEEDING (Severe)**.
3. Check for cold, clammy, pale skin, perspiration on forehead and palms, chills, nausea and vomiting, shallow rapid breathing, or weak pulse. If present see **SHOCK**.
4. Notify parent/legal guardian, appropriate school authority and urge medical care, as needed.

## **BACK INJURY**

1. **DO NOT** move individual with suspected back injury.
2. Keep individual warm and reassured.
3. Obtain information about injury from student or bystander.
4. Call 911 for immediate medical attention (rescue squad, paramedics, ambulance).
5. Notify parent/legal guardian and appropriate school authority.

## **BITES AND STINGS**

### **Animal Bites:**

1. Using gloves, immediately wash wound with soap and running water.
2. Cover with dry dressing.
3. Notify parent/legal guardian and appropriate school authority and urge medical care, as needed.
4. Report to Animal Control Center or local Police/Sheriff's office. **DO NOT** attempt to capture animal!
5. Suspected rabies carrier: Notify proper authorities immediately.

### **Human Bites:**

1. Using gloves, immediately wash wound with soap and water.
2. Cover with dry dressing.
3. Notify parent/legal guardian/appropriate school authority. In case of a child experiencing blood exposure from another student, urge medical care.
4. Check immunization record.

### **Insect Stings:**

1. Determine, if possible, the type of insect.
2. Ask if student is allergic to insect sting. For students with prescribed bee sting kits, follow the school's policy for medication administration.
3. If allergy exists one of the following reactions may occur: hives, rash, pallor, weakness, thick or tingling tongue or lips, nausea, vomiting, or "tightness" in chest, nose or throat (voice change):
  - a. Call 911 for immediate medical attention (rescue squad, paramedics, ambulance).
  - b. Begin mouth-to-mask resuscitation and/or CPR as indicated.
  - c. Remove stinger by scraping with sharp edged object (i.e. fingernail). **DO NOT** use tweezers
  - d. Notify parent/legal guardian and appropriate school authority.
4. If no allergy exists:
  - a. Cleanse with soap and water.
  - b. Remove stinger by scraping with sharp edged object (i.e. fingernail). **DO NOT** use tweezers.
  - c. Apply cold compresses or use bee sting kit, if needed.

**Tick Bites:**

1. Cover the tick with heavy oil (mineral, salad or machine).
2. Immediately grasp tick with tweezers as close to point of attachment as possible and pull slowly to remove all parts.
3. Thoroughly but gently cleanse area with soap and water.
4. Notify parent/legal guardian/appropriate school authority and urge medical care. Instruct the parent/legal guardian to immediately notify the physician if child develops fever, rash, or a “bulls-eye” marking around bite area within two weeks.

**Snake Bites:**

1. If possible, try to identify type of snake by questioning students or bystanders.
2. Wearing gloves, wash wound with soap and water.
3. Immobilize area and keep area lower than the heart
4. **DO NOT** apply ice or ice pack.
5. **DO NOT** attempt to suck out venom.
6. Call parent/legal guardian/appropriate school authority, advise immediate medical attention, and contact poison control center.

**Spider Bites:**

1. If possible, try to identify type of spider by asking students or bystanders. **(If black widow or brown recluse is suspected, transfer patient immediately to Emergency Room, after checking emergency card for permission to transport and give medical assistance.)**
2. Wearing gloves, wash bite with soap and water.
3. Apply ice pack covered with a clean, dry cloth.
4. Observe student for any unusual symptoms.
5. Notify parent/legal guardian, appropriate school authority and contact poison control center, as needed.

## **BLEEDING**

### **Minor:**

1. Wash wound with soap and running water.
2. Apply sterile dressing or band-aid.
3. Notify parent/legal guardian and appropriate school authority and urge medical care, if indicated.
4. If known hemophiliac, immediately call parent/legal guardian or medical care provider.

### **Severe:**

1. Apply direct pressure using a sterile dressing, clean dry towel or cloth.
2. If bleeding does not stop, call 911 for immediate medical attention (rescue squad, paramedics, ambulance).
3. If bleeding does not stop quickly, apply pressure over a pressure point above site of bleeding.
4. **DO NOT** use a tourniquet unless all other measures have failed. If a tourniquet is applied a "T" and time applied shall be marked on student's forehead.
5. Notify parent/legal guardian and appropriate school authority.

### **Nose Bleed:**

See "nose".

## **BREATHING DIFFICULTIES**

### **Known Asthmatic:**

1. Encourage student to relax, usually in a sitting position, and breathe deeply.
2. Refer to student's medical card for medication use.
3. Follow instructions on file regarding use of medication ordered by student's physician (in accordance with school policy).
4. Keep student in health office until symptoms are relieved.
5. If student returns to class, advise parent/legal guardian of asthma attack and any medication given.

### **Call 911 for Emergency Medical Care IMMEDIATELY if any of the following are present:**

1. Significant difficulty with breathing while talking.
2. Inward movement of the muscles of the neck, chest, or ribs, or flaring of the nostrils is present.
3. The skin or lip color changes to gray or blue.
4. Medications to reverse symptoms have failed and the student's symptoms are worsening.
5. Unable to notify parent/guardian and the student has not responded to the medication given.

### **Allergic Reaction:**

#### **Signs and Symptoms:**

1. Wheezing or difficulty breathing with or without other signs.
2. "Tightness" in chest
3. Thick tongue or lips
4. Nausea and/or vomiting
5. Flushed or pale face

#### **Treatment:**

1. Identify and remove the cause, if possible.
2. Call 911 for immediate medical attention (rescue squad, paramedics, ambulance).
3. Follow instruction on file regarding use of medications ordered by student's physician (in accordance with school policy for providing emergency assistance to students).
4. If unconscious, check pulse and respiration. If indicated, institute CPR by trained personnel.
5. Notify parent/legal guardian and appropriate school authority.

## **Hyperventilation:**

### **Signs and Symptoms:**

1. Rapid breathing
2. Rapid pulse
3. Numbness of extremities
4. Prickly feeling of skin
5. Cramps in muscles
6. Redness of skin

### **Treatment:**

1. Be calm and firm.
2. Instruct student to breathe more slowly.
3. If no improvement, have student breathe for a few minutes into a paper bag held tightly around mouth and nose.
4. Notify parent/legal guardian and urge medical care, if necessary.

## **BRUISES**

1. If child is known hemophiliac, immediately notify parent/legal guardian of any bruise.
2. Rest and apply cold compress.
3. If severe swelling or deformity is present:
  - a. **DO NOT** permit use of limb.
  - b. Notify parent/legal guardian, appropriate school authority and urge immediate medical care.
  - c. Transport as appropriate for injury.

## **BURNS**

**IN CASE OF ELECTRICAL BURN, DO NOT TOUCH PERSON UNTIL ELECTRICAL CONTACT IS BROKEN (see Electrical Shock)**

### **First Degree Burn:**

Least severe. This burn involves the outermost layer of skin. The symptoms include redness, mild swelling and pain. They are frequently caused by sunburn, brief contact with hot objects, steam or chemicals.

### **Second Degree Burns:**

More severe. This burn involves the lower layers of skin. The symptoms include redness, mottling, blisters. It may be wet or oozing. This is often the most painful burn due to intact nerve endings. Causes include longer contact with hot objects, deep sunburns, or hot liquids.

### **Third Degree Burns:**

Most severe. This burn extends through all skin layers, possibly into underlying muscles and bones. It may look white or charred. The nerve endings may be destroyed, therefore, little pain may occur.

## **WHAT TO DO:**

### **First and Second Degree Burns:**

1. Identify source of the burn and remove source (i.e. chemical, physical).
2. Immerse area in cold water immediately (depending on type of burn).
3. Apply dry sterile dressing or band-aid with antiseptic ointment.
4. Notify parent/legal guardian and appropriate school authority.

### **Moderate/Severe (Large Area)**

1. Call 911 for immediate medical attention (rescue squad, paramedics, ambulance).
2. Cover burned area with clean dry sheet, towel or pillow case.
3. Keep student quiet and reassured.
4. **DO NOT** attempt to remove adhered clothing from burned area, however, try to loosen clothing in surrounding area.
5. **DO NOT** give fluids by mouth.
6. Check for cold, clammy, pale skin, perspiration on forehead and palms, chills, nausea and vomiting, shallow rapid breathing, or weak pulse. If present, see **SHOCK**.

7. If breathing stops or no pulse is felt, begin CPR.
8. Notify parent/legal guardian and appropriate school authority.

**Chemical:**

1. Flush burned area with *large* amounts of cold water for 15 minutes.
2. Follow steps outlined for Moderate/Severe Burns.

**Chemical Burn of Eye:**

Refer to Eye/Chemical

## DENTAL PROBLEMS

### TOOTHACHE:

1. Clean the area around the sore tooth. Have the student rinse his/her mouth with warm salt water to loosen any trapped food.
2. A cold compress may be placed on the face to decrease swelling.
3. Notify the parent/legal guardian and urge them to seek dental care.

### CUT OR BITTEN TONGUE, LIP OR CHEEK:

1. Apply direct pressure to bleeding area with a clean cloth or gauze.
2. Apply cold compress to face next to injured part to reduce swelling.

### BROKEN BRACES AND WIRES:

1. If a broken appliance can be **easily** removed, do so, wearing gloves, and place in an envelope to send home to the parent/legal guardian or to the dental provider.
2. If it cannot be easily removed, cover the sharp area with cotton balls, gauze or chewing gum and notify the parent/legal guardian/appropriate school authority.
3. If a wire is stuck in the student's gum or cheek, **do not** try to remove it. Notify the parent/legal guardian immediately and advise to take the child to a dentist or orthodontist.
4. Broken or loose appliances which do not bother the student usually do not require immediate attention. Notify parent/legal guardian.

### BROKEN OR DISPLACED TOOTH

1. Place tooth or broken tooth in cool water or clean wet cloth.
2. **DO NOT** clean or rinse tooth or mouth.
3. Place cold compress on the face next to injured area.
4. Notify parent/legal guardian/appropriate school authority to seek immediate dental care and send tooth with student to dentist.

## DIABETES

### **Insulin Reaction:** (Rapid onset)

Sign and Symptoms:

1. Paleness
2. Moist, clammy skin
3. Profuse perspiration
4. Dizziness, trembling, confusion (may lose consciousness)

If any of the above are present:

1. **Before loss of consciousness** occurs, give one of the following:
  - a) Sugar - 2 packets, or 2 teaspoons
  - b) Fruit juice - 1/2 to 2/3 cup
  - c) Carbonated beverage - 6 ounces
  - d) Candy
  - e) DO NOT give sugar free candy, sugar free soft drink or artificially sweetened juices.
2. If student is unconscious, call for immediate medical attention (rescue squad, paramedics, ambulance).
3. Check student's health record for further medical instructions.
4. Notify parent/legal guardian and appropriate school authority.

### **Diabetic Coma:** (slow onset)

Sign and Symptoms:

1. Flushed face
2. Drowsiness
3. Gasping respiration
4. Acetone (sweet) odor on breath
5. Loss of consciousness

If unsure if either insulin reaction or diabetic coma, treat for insulin reaction. If no improvement within 10 minutes:

1. Call for immediate medical attention (rescue squad, paramedics, ambulance).
2. Notify parent/legal guardian and appropriate school authority.

## **DIARRHEA**

### **Description:**

Diarrhea is an increase in the passage of loose or liquid bowel movement. This can be due to dietary changes, sensitivity to certain foods, some medications, viral or bacterial infections, and food poisoning.

### **What to do:**

1. A student will usually come to the health office because of repeated diarrhea, or after experiencing an “accident” in the bathroom.
2. Ask the student the following questions:
  - C “What symptoms are you experiencing?”
  - C “When did the diarrhea begin?”
  - C “Was blood present with the diarrhea?”
  - C “Are you taking medication at home?”
3. Take the student’s temperature.
4. Allow the student to rest in the health office if experiencing any abdominal pain.
5. Give the student water to drink to replace what has been lost. Be aware of signs of dehydration.
6. If the student’s clothing is soiled with stool, wear gloves and double-bag the clothing to be sent home. Any surface area that is soiled must be cleaned and disinfected (wear gloves).
7. Observe proper hand washing techniques. Hand washing is critical in preventing the spread of infection.

### **CALL PARENT/LEGAL GUARDIAN-ADVISE MEDICAL ATTENTION-SEND STUDENT HOME IF:**

1. The student has had repeated diarrhea during the day and/or is not able to participate in school activities.
2. The student’s temperature is 101 degrees Fahrenheit or above, and is accompanied by abdominal pain.
3. Blood is present in the stool.
4. The student experiences dizziness and is pale in color.

## **DROWNING**

1. CALL FOR IMMEDIATE MEDICAL ATTENTION (RESCUE SQUAD, PARAMEDICS, AMBULANCE).
2. If the student is not breathing, administer mouth-to-mask resuscitation immediately.
3. If student has no pulse, begin CPR by trained personnel.
4. When conscious treat for SHOCK (see shock).
5. Notify parent/legal guardian and appropriate school authority.

## **DRUG INGESTION/OVERDOSE**

### **Alcohol Ingestion:**

1. Note symptoms. If necessary lay on side. Do not lay on back or let individual sleep.
2. Notify parent/legal guardian and make arrangements for individual to be picked up.
3. Notify appropriate school authority.

### **Alcohol Overdose:**

1. If student has difficulty breathing or is unconscious, call for immediate medical attention (rescue squad, paramedics, ambulance) and notify parent/legal guardian.
2. If student is conscious and large amounts of alcohol are known to have been ingested, treat as poisoning (see POISON).
3. Notify appropriate school authority.

### **Other Drug Ingestion:**

1. Note symptoms
2. Obtain information
  - a. type and amount of drug taken
  - b. time taken
  - c. method of administration
  - d. contact Illinois Poison Control Center for directions (**1-800-942-5969**)
3. Notify parent/legal guardian and make arrangements for individual to be picked up immediately and urge medical care.
4. Notify appropriate school authority.

### **Other Drug Overdose:**

See SUBSTANCE ABUSE

## **EAR**

### **Foreign Body:**

1. Tilt the head to the affected side.
2. **DO NOT** remove object with instruments.
3. **DO NOT** put oil or water drops in ear.
4. Notify parent/legal guardian and urge medical care.

### **Earache:**

1. Notify parent/legal guardian and urge medical care.

### **Insect in Ear:**

1. **DO NOT** put oil or water drops in ear.
2. Place flashlight near student's ear. (Insect may crawl out toward light).
3. If unable to attract insect with light, notify parent/legal guardian and urge medical care.
4. If insect is removed notify parent/legal guardian and advise of incident.
5. Notify appropriate school authority.

## **ELECTRIC SHOCK**

1. Turn off electric power source if possible.
2. Break the electrical contact by using a nonconductive article such as a dry wooden broom stick. **DO NOT TOUCH** person until electrical contact is broken.
3. Call for immediate medical attention (rescue squad, paramedics, ambulance).
4. If student has no pulse or respiration, begin CPR by trained personnel.
5. Treat for SHOCK. (See SHOCK).
6. Notify parent/legal guardian and appropriate school authority.

## **EYE**

Ask if student is wearing contact lenses. Contact lens should be removed (by student if possible).

### **Foreign Bodies: (Dirt, insect or eyelash)**

1. Keep student from rubbing eye.
2. Wash hands before handling eyelids.
3. **DO NOT** try to rub off foreign body.
4. Flush the eye with clean running water.
5. If the foreign body is still not removed, cover both eyes with clean dressing.
6. Notify parent/legal guardian and urge immediate medical care.
7. Notify appropriate school authority.

### **Blows:**

1. Apply cool cloth.
2. If blow was severe or if there is clouding of vision, notify parent/legal guardian and arrange for immediate medical care.
3. Keep student flat and quiet.
4. Cover **both** eyes with clean dressing.
5. If an individual is to be transported, he/she should be lying flat.
6. Notify appropriate school authority.

### **Chemical:**

1. Flush the affected eye with a large amount of water for 15 minutes by turning head to affected side and holding eyelid open.
2. Student must not rub eye.
3. Cover **both** eyes with clean dressing.
4. Notify parent/legal guardian and arrange for immediate medical care.
5. Notify appropriate school authority.

**Lacerations and Abrasions to Eyeball:**

1. Suspected scratch - cover both eyes.
2. Notify parent/legal guardian and urge immediate medical care.

**Lacerations and Abrasions to Eyelid:**

1. Apply sterile dressing.
2. Stop bleeding by applying gentle direct pressure.
3. Notify parent/legal guardian and urge immediate medical care.
4. Notify appropriate school authority.

**Penetrating injuries to eye:** (Glass slivers, thorns, pencils).

1. Call for immediate medical attention (rescue squad, paramedics, ambulance).
2. **DO NOT** attempt to remove object or to wash the eye.
3. Avoid any pressure on eyes.
4. Have student lie still and keep calm.
5. Notify parent/legal guardian.
6. Notify appropriate school authority.

## **FAINING**

### **Usually preceded or accompanied by:**

1. Extreme paleness
2. Sweating
3. Coldness of the skin
4. Dizziness
5. Numbness and tingling of the hands and feet
6. Nausea/vomiting
7. Possible disturbance of vision

### **Treatment**

1. Clear airway.
2. Keep the student lying down.
3. Loosen tight clothing.
4. If student is vomiting, roll on side or turn head to side.
5. **DO NOT** attempt to give liquids while unconscious.
6. Try to determine if individual has suffered injury from fall or any other cause (see heat exhaustion, diabetes, and seizures)
7. If recovery is not prompt, call for immediate medical attention (rescue squad, paramedic, ambulance).
8. Notify parent/legal guardian and appropriate school authority.

## **FEVER**

### **Symptoms:**

1. Body surface warm
2. Flushed skin
3. Burning of eyes
4. Restlessness
5. Possible weakness
6. Heavy sweating

### **Treatment:**

1. Take temperature
2. Remove excess clothing if needed, but prevent child from getting chilled (maintain modesty).
3. Have individual rest and give plenty to drink.
4. Observe for other symptoms such as drowsiness, irritability, stiff neck, nausea/vomiting, rash, and respiratory problems.
5. Use aspirin substitute (Tylenol) only as directed, and as approved by school board and child's parent/legal guardian.
6. If temperature is more than 101 degrees Fahrenheit and duration of fever is more than 1 day, notify parent/legal guardian and urge medical care.

## FRACTURES AND DISLOCATIONS

### Fracture:

1. **DO NOT** move student until nature of injury has been determined and splint has been applied.
2. Keep warm and reassured.
3. Apply cold to injured area for no longer than 15 minute intervals (cold should be on 15 minutes and off 15 minutes). May be repeated until medical attention is obtained.
4. **DO NOT** push on bone if fracture is open or bone is exposed. Apply sterile dressing and call for immediate medical attention (rescue squad, paramedics, ambulance).
5. Check for cold, clammy, pale skin, perspiration on forehead and palms, chills, nausea and vomiting, shallow rapid breathing, or weak pulse. If present see **SHOCK**.
6. Notify parent/legal guardian and urge medical care.
7. Notify appropriate school authority.

### Dislocation:

1. **DO NOT** manipulate injured part.
2. **DO NOT** allow student to bear weight on extremity.
3. Apply cold for no longer than 15 minute intervals (cold should be on 15 minutes and off 15 minutes). May be repeated until medical attention is obtained).
4. Notify parent/legal guardian and urge medical care.
5. Notify appropriate school authority.

## **FROSTBITE**

1. Before frostbite occurs, the affected skin may be slightly flushed.
2. Skin changes color to white, gray or glossy.
3. Pain is sometimes present but may subside.
4. Affected part feels cold and numb.
5. Student is frequently not aware of frostbite until skin changes color.

### **Treatment:**

1. Bring student inside as soon as possible.
2. Re-warm the frozen part quickly by immersing in warm (NOT HOT) water.
3. Have student cover the frostbitten part with a warm hand or material. If fingers or hands are frostbitten, have student hold hand in armpit next to body.
4. **DO NOT** rub affected part or break blisters.
5. Gently wrap the affected part in cloth (towel, blanket, coat).
6. Offer warm beverage.
7. When the part is warmed, encourage the student to move affected part. (**DO NOT** allow student to bear weight on affected part).
8. Notify parent/legal guardian and urge medical care.
9. Notify appropriate school authority.

## **HEADACHE**

1. Question student about injury or possible cause. If injury, notify parent/legal guardian and urge medical care.
2. Take temperature. If elevated, notify parent/legal guardian. If not elevated allow a short rest in a quiet room.
3. In case of known migraine, especially with visual disturbances, student should rest in dark, quiet room. Notify parent/legal guardian.
4. Recommend medical care for frequent complaints.
5. Over the counter pain medication (avoid aspirin) may be dispensed, after checking medical history.

## HEAD AND NECK INJURIES

### Unconscious:

1. Call for immediate medical attention (rescue squad, paramedics, ambulance).
2. Keep student still - DO NOT move head or neck.
3. If not breathing, start mouth-to-mask resuscitation.
4. If possible obtain information about injury from student or bystander. If student has lost consciousness for ANY period of time call for immediate medical attention (rescue squad, paramedics, ambulance).
5. If student vomits, roll to side (keep head and neck in alignment, no turning or twisting) until vomiting episode passes.
6. Notify parent/legal guardian and appropriate school authority.

### Conscious:

1. **DO NOT** move student.
2. If student exhibits signs of sleepiness, vomiting, double vision, numbness or tingling, call for immediate medical attention (rescue squad, paramedics, ambulance).
3. If none of the above symptoms are present, notify parent/legal guardian and urge medical care.
4. Notify appropriate school authority.

## **HEATSTROKE**

### **Signs and Symptoms:**

1. Hot, red, dry skin.
2. Temperature 105 degrees Fahrenheit or higher.
3. Pulse rapid and strong.
4. Headache, dizziness, nausea.

### **Treatment:**

1. Undress student (maintain modesty).
2. Sponge with cool water.
3. **DO NOT** give stimulants (cola, tea, coffee, etc.).
4. Call for immediate medical attention (rescue squad, paramedics, ambulance).
5. Notify parent/legal guardian and appropriate school authority.

## **HEAT EXHAUSTION**

### **Signs and Symptoms:**

1. Pale and clammy skin.
2. Approximately normal body temperature.
3. Profuse perspiration.
4. Tiredness, weakness.
5. Headache - perhaps cramps.
6. Nausea - dizziness (possible vomiting).

### **Treatment:**

1. Loosen student's clothing.
2. If not vomiting, give the student sips of salt water, ½ glass every 15 minutes for one hour) (1 teaspoon of salt per glass).
3. Have the student lie down and elevate feet.
4. Notify parent/legal guardian and urge immediate medical care.
5. Notify appropriate school authority.

Also see Dehydration and Heat Stroke

## **MENSTRUAL CRAMPS**

1. Mild Cramps: Recommend regular activities.
2. Severe Cramps: Short period of rest. If no improvement notify parent/legal guardian.
3. Disabling cramps: Notify parent/legal guardian and urge medical care.
4. Dispense mild pain killers for mild cramps, after checking medical history.

## **NOSE**

**Nosebleeds:** (If known hemophiliac, notify parent/legal guardian immediately)

1. Place student in sitting position, head bent slightly forward.
2. Pack nostrils with sterile gauze, then apply equal pressure to nostrils with thumb and index finger.
3. Apply cool washcloth to area.
4. Keep student quiet and reassured.
5. Instruct student not to blow or sniff through the nose.
6. If bleeding continues longer than 10 minutes, notify parent/legal guardian and urge medical care.
7. If unable to notify parent/legal guardian, call for immediate medical care (rescue squad, paramedics, ambulance).
8. Notify appropriate school authority.

### **Injuries:**

1. Place in sitting position.
2. If bleeding is present, apply equal pressure to nostrils with thumb and index finger.
3. Apply cold compress to area.
4. Notify parent/legal guardian, and urge immediate medical care.
5. Notify appropriate school authority.

### **Foreign Bodies:**

1. **DO NOT** attempt to remove.
2. Notify parent/legal guardian and urge medical care.
3. Notify appropriate school authority.

## **POISON**

**ILLINOIS POISON CONTROL CENTER: 1-800-942-5969**

**Absorption through skin:** (surface contact with substance)

1. Attempt to identify poisonous substance.
2. Flush with large amounts of water. If clothing is contaminated, flush water under clothing while the clothing is being removed.
3. **DO NOT** flush with water if substance is sodium, ash or lime. Use vinegar.
4. Call for immediate medical attention (rescue squad, paramedics, ambulance). Send a sample of substance to the hospital with student.
5. Notify parent/legal guardian and appropriate school authority.

**Ingestion:** (substance taken internally)

1. Attempt to identify poisonous substance.
2. Contact Illinois Poison Control Center for direction.
3. Follow advice given.
4. If Illinois Poison Control Center cannot be reached, call for immediate medical attention (rescue squad, paramedics, ambulance).
5. Notify parent/legal guardian and appropriate school authority.

**Inhalation:** ( substances that are inhaled)

1. Move the student to fresh air immediately (**DO NOT** endanger the rescuer).
2. Attempt to identify the substance inhaled.
3. Assess student's breathing and pulse.
4. If no breathing or pulse, begin mouth-to-mask resuscitation or CPR by trained personnel.
5. Call for immediate medical attention (rescue squad, paramedics, ambulance).
6. Notify parent/legal guardian and appropriate school authority.
7. If a group of students are affected follow school's disaster plan.

**Bites by Poisonous Snake or Spider:**  
See **Bites and Stings**

## **RASHES**

1. Isolate student.
2. Take temperature.
3. Check health records for possible cause, e.g., allergies, known skin problems etc.
4. Allow student to apply medication, if prescribed for known condition.
5. Rule out contact with substance causing rashes, such as Poison Ivy.
6. Check for possibility of insect bites, chemical or physical exposure.
7. Notify parent/legal guardian and urge medical diagnosis, if cause of rash is not established.
8. Notify local health department, if communicable disease is suspected.

## **SEIZURES**

### **Signs and Symptoms:**

1. Confusion.
2. Possible loss of consciousness.
3. Paleness of skin.
4. Stiffness of body, tension in one of the limbs.
5. Rolling of eyeballs, dilated pupils.
6. Possible loss of bowel or bladder control.

### **Treatment:**

1. Look for injuries as result of fall and treat them if superficial.
2. Check health records for known history of seizures.
3. Reassure student.
4. Protect the student from future injuries.
5. Place the student on side to prevent aspiration.
6. Record the details of the seizure.
7. Notify parent/legal guardian and urge medical care.
8. Notify appropriate school authority.

## **SHOCK**

### Signs and Symptoms:

1. Skin - pale, cold, clammy, moist.
2. Pulse - weak and rapid.
3. Breathing - shallow, rapid, irregular.
4. Vomiting, nausea, and other causes of fluid loss.
5. Restlessness.

### **Treatment:**

1. Keep student lying flat and elevate legs. (No pillow under head).
2. Keep student quiet, warm and reassured.
3. Call for immediate medical attention (rescue squad, paramedics, ambulance).
4. Notify parent/legal guardian and appropriate school authority.

## **SORE THROAT**

1. Take temperature:
  - a. If elevated, notify parent/legal guardian to take student home.
  - b. If not elevated, student may gargle with salt water (1/4 tsp. to 1 glass of water) and return to class.
2. If sore throat persists, notify parent/legal guardian.

## **SPLINTERS**

1. Splinter may be removed with tweezers, if protruding from skin.
2. Cleanse with soap and water.
3. Notify parent/legal guardian.
4. If splinter is embedded, notify parent/legal guardian and urge medical care.

## **SPRAINS**

1. Elevate and rest affected part.
2. Apply cold immediately. (Cold should be on 15 minutes and off 15 minutes).
3. If swelling, discoloration or excessive pain is present, or if student is known hemophiliac notify parent/legal guardian and urge medical care.
4. Immobilize if there is a possible fracture or dislocation.
5. Notify parent/legal guardian and urge medical care.
6. Notify appropriate school authority.

## SUBSTANCE ABUSE

1. Note symptoms, such as dizziness, confusion, hallucinations, breath odor, drowsiness, unconsciousness, and watering of eyes.
2. **If unconscious** - call for immediate medical attention. (rescue squad, paramedics, ambulance)
3. Obtain information about the substance involved.
  - a. what substance was used
  - b. time when substance was taken
  - c. method of administration
  - d. amount taken
4. Inform parent/legal guardian.

### Diagnosis:

- Ⓒ If slow heart rate and respiration - a **depressant** may be involved.
- Ⓒ If restlessness, anxiety, unclear heart rate, and dry mouth are present - a **stimulant** may be involved.
- Ⓒ Fixed pin-pointed pupils, slow respiration and sleepiness.  
Coma may result - Narcotics such as **Heroin** may be involved.
- Ⓒ Violent behavior - **Hallucinogens**
- Ⓒ Loss of coordination, distortion of reality, increased heart rate, dream like state - **Marijuana** is suspected.

### Treatment:

- Ⓒ If substance is injected, inhaled, or swallowed -  
contact Illinois Poison Control Center immediately. **(1-800-942-5969)**
- Ⓒ If individual is agitated - **DO NOT** leave him/her unattended.
- Ⓒ Put the individual on side to prevent aspiration.
- Ⓒ Send sample of substance or vomitus to hospital with student if available.
- Ⓒ Notify parent/legal guardian/appropriate school authority and urge medical care.

### Alcohol:

See Drug Ingestion/Overdose

## UNCONSCIOUSNESS

1. Determine the cause.
2. Determine if responsive, e.g., gently shake, call by name, etc.
3. **DO NOT** move if a spinal injury is suspected. Follow procedure for neck and/or back injury. If no response, check for breathing and pulse.
4. If no breathing or pulse is present, institute mouth-to-mask resuscitation or CPR by trained personnel.
5. If pulse present:
  - a. Attempt to determine reason for unconsciousness. Check for MEDIC-ALERT tag.
  - b. Loosen clothing around neck and waist. Keep warm.
  - c. If vomiting, place student on side (to prevent aspiration of vomitus). Make sure open airway is maintained.
  - d. Call for immediate medical attention (rescue squad, paramedics, ambulance).
  - e. Notify parent/legal guardian and appropriate school authority.

See FAINTING, HEAT STROKE, & DIABETES

## **VIOLENT INJURIES**

**This includes gun shots, stabbing, fist fights, etc.**

1. Keep the individual calm.
2. Look for the extent of injuries and object involved.
3. In case of bleeding, cover with sterile gauze or cloth and apply pressure.
4. Check for cold, clammy, pale skin, perspiration on forehead and palms, chills, nausea and vomiting, shallow rapid breathing, weak pulse. If present see **SHOCK**.
5. Arrange for immediate medical attention (paramedics, ambulance, rescue squad).
6. Inform parent/legal guardian.
7. Inform appropriate school authority.

## VOMITING

### Description:

Nausea and Vomiting (throwing up) can be due to a number of causes. Vomiting can be due to:

- C food poisoning
- C gagging or choking on food
- C long bus rides
- C strenuous exercise
- C eating disorders such as bulimia
- C medical conditions such as appendicitis
- C viral or bacterial illness

1. An individual may be pale, shocky, dizzy, and/or have dryness of mouth or elevated temperature.
2. Ask individual the following questions:
  - C What are you feeling? (ask for symptoms)
  - C When did the vomiting start?
  - C Is vomiting accompanied by pain?
  - C History of intake of anything that may have resulted in vomiting?
  - C Consistency/nature of the vomitus?
  - C Number of times vomited?
3. Provide comfort and have individual lie down on their side.
4. Apply a cool washcloth on the forehead.
5. Do not give anything by mouth - may give 1-2 ice chips for dryness of mouth.
6. Have emesis basin available to the individual.
7. If vomiting is accompanied by pain in the abdominal area, contact parent/legal guardian and arrange for medical care to rule out conditions such as appendicitis.
8. If no relief or temperature is more than 101 Fahrenheit, contact parent/legal guardian/appropriate school authority and urge medical attention.

## **HEALTH ROOM EQUIPMENT AND FIRST AID SUPPLIES**

*Adhesive tape - non allergic	Paper cups
Antiseptic creams or powders	Pain killers (mild; such as Tylenol)
Band-aid - various sizes - non stick	Pillow - clean or disposable cover
*Basin - small and large	Pitcher
*Bee sting kit	Refrigerator
*Betadine swabs	*Rubbing Alcohol
Blankets - washable or disposable	Safety pins
*Blood Pressure instrument	Salt
Cabinet with locked space	Salt supplemented drinks (i.e. Gatorade)
*Cold packs	Sanitary Napkins
Cot or bed	*Scissors (blunt)
*Cotton balls - sterile	Sheets - clean or disposable
*Cups - disposable, 8 oz. measuring	Sink with running water
*CPR Kit (includes mouth shields)	Soap (anti-bacterial)
*Eye pads - sterile	Sore throat spray
*Flashlight with spare batteries and bulb	*Splints -various lengths, 1 ft, 2 ft, 3 ft
*Gauze dressing - sterile 3" x 3" - non stick	Spoons - measuring
*Gauze roller bandage - sterile 1" and 2"	*Stethoscope
*Ice bags	Sugar
*IPECAC - (only to be used as directed by Poison Resource Center)	Thermometers (with disposable sheath or digital ear thermometer)
Juices	Tongue Blades
Magnifying glass	*Towels and washcloths
Medical records	*Tourniquet
Mineral Oil or Vaseline	Tweezers
*Muslin triangles for slings and compresses 3 ft. X 3 ft.	Vinegar
Office supplies	

### **NOTE:**

- C Hands should be washed before and after contact with each student.
- C All gauze dressing and eye pads should be wrapped individually and sterile.
- C Red Cross First-Aid textbook may be obtained from Red Cross chapters or local book store.
- C EMT - A textbook may be obtained from American College of Orthopedic Surgeons or local book store.
- C All medical records should be confidential and kept in locked cabinet.
- C Medication and equipment should be locked in child-proof cabinet.
- C All bio waste should be disposed of in hazardous waste bags.
- C Gloves should be worn while handling any body fluids or wounds.
- C Portable Emergency Kit should be available if needed. \*items to be included