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### Regulation 8441 CARE OF INJURED AND ILL PERSONS

Accidents \*\* and illnesses occurring in school or during a school-sponsored activity, should be anticipated, and first aid services should be available to students at all times. The first aid information and procedures shall be reviewed by all staff members at the beginning of each school year.

First Aid is treatment that will protect the life, safety and comfort of the student, until authorized treatment is secured. First Aid treatment is limited to first treatment only, following which the student is placed under the care of the parent or guardian or other adult having control and/or responsibility of the student.

The School Nurse, when present during the school day, shall take charge of any medical emergency. In the absence of the School Nurse, any responsible adult of the school staff may administer First Aid, as designated by the building principal, or as dictated by the circumstances, and that person is to contact the parent as indicated by the situation. The parent should be advised to call the family physician for further advice and/or treatment.

If the parent cannot be reached, call another School Nurse, or the Supervisor of School Health Services for advice. The direct line to Newcomb Medical Center Emergency Room is 794-4383, to consult a physician. Emergency medical services dial 911.

In cases of extreme emergency, when school personnel are unable to reach parent (or other person[s] designated by parent), the school, acting in the place of the parent, is responsible for making other arrangements for the child to receive medical attention.

When there is possibility of contact with body fluids, especially blood, it is imperative that the caregiver wear latex or vinyl gloves. In all cases, the caregiver should provide some kind of barrier between the victim's body fluids and the caregiver's skin. With anticipated body fluid spills. The use of goggles, fluid resistant aprons and/or gowns should be considered. An ample supply of paper towels or tissues or gauze pads could be substituted in an emergency, to prevent skin contact with body fluids.

Any materials soiled with blood or other body fluids must be placed in a plastic bag and disposed of in a plastic-lined trash receptacle. Any gloves used during the emergency should be placed in the same plastic bag. The caregiver should be sure to wash his/her hands as soon as possible after removing gloves.

Consult the Vineland Board of Education's Control of Communicable Disease for specific handwashing techniques.

If an ambulance is needed: the following procedures are to be followed:

- A person designated by the principal is to place the call.

- Specific directions are to be given to the emergency dispatcher as to the location of the ill or injured. (A guide should be available, if possible)
- To assure adequate personnel and appropriate equipment, the emergency dispatcher is to be given the name of the ill/injured and the reason an ambulance is being requested.

\*\* In case of accident - An accident/incident report should be completed by the adult who is in charge of the student or witnesses the accident, in cases of accidental injury or injury due to a fight of school premises.

Each nurse's office contains an Emergency Response Kit, kept at hand for all calls outside of the nurse's office. This kit is to be taken any time the school is evacuated for any reason and restocked as needed after each use.

Each school without a nurse's office is to have a first aid kit, stocked with the necessary supplies to provide first aid. First aid kits are also to be available on each school bus, as well as the necessary supplies to deal with a body fluid spill - (gloves, plastic bags, powder to absorb liquid, paper towels, disinfectant towelettes, etc.). It is further recommended that first aid supplies be made available in the following areas: shops, home economics rooms,, science labs, cafeterias, gymnasiums and physical education areas.

All school nurses and certain special education staff members are to be CPR certified, with recertification paid for by the Vineland Board of Education and scheduled each year through a contractual agreement with Newcomb Medical Center. First Aid instruction may be given to staff members by the school nurse or in conjunction with the American Red Cross.

#### First Aid/Emergency Procedures

The school nurse may provide more in-depth first aid treatment, depending on the individual situation.

\*\* When the possibility of contact with blood or other body fluids exists, it is advised that the caregiver wear latex or vinyl gloves. These may be provided by the school nurse at the beginning of each school year, or by the immediate supervisor. Staff members are reminded to replace gloves at their work station after use.

#### ABRASIONS, MINOR LACERATIONS, SCRATCHES

Clean area with mild soap and flush with water. Apply antiseptic cream and sterile bandage or bandaid.

#### AVULSION

(A forcible tearing away of body tissue or body part) - If sutures are necessary, wrap body part in sterile dressing, if available, and put it in ice. Apply direct pressure and cold compress to affected body part to slow bleeding. Take vital signs, observe for shock. Notify parent and call emergency medical services (911).

## BITES/SCRATCHES

Animal - Scrub area with mild soap and flush with large amounts of water. Cover with sterile dressing. Contact parent/guardian for medical care. Call police in all cases of animal bites, (696-1212) to report incident and give description of animal, if possible. Call Vineland Health Department, Bob Dickinson (794-4131) to report incident of animal bite or scratches, as well. Call School Nurse for advice.

## BITES - BEE

If child is known to be allergic - Follow instruction in administering Bee Sting Kit, provided by child's doctor. Keep child quiet and call parent and nurse.

If child is not known to be allergic - Remove stinger if present by flicking with fingernail - Do not squeeze. Cleanse area with mild soap and apply insect bite wipe. Apply ice to area. Have child remain quiet and observe for twenty minutes.

If any unusual symptoms occur (generalized rash, hives, difficulty swallowing or breathing, etc.). Call emergency medical services - 911 and call parent to meet child at ER. Call nurse for follow-up.

## BITES - HUMAN

Scrub area with mild soap and water, flushing with large amounts of water. Apply sterile dressing. Apply ice to bruised area. Contact parents advising notifying family doctor for further treatment/advice. (Very important with break in skin). [Transmission of hepatitis B, etc. must be considered].

## BITES - MOSQUITO

Apply calamine lotion, Sting-Kill wipe or cold compress. Keep skin cool and discourage scratching, as scratching only increases itching and possibility of infection to the area.

## BITES- TICK

Remove tick with tweezers or small forceps. Grasp tick as close as possible to its mouth (part sticking into the skin), and pull it upward gently, without jerking or squeezing body of tick. Place tick, still using tweezers, into a plastic bag or small bottle and seal. Do not handle it. Disinfect bitten area with mild soap and water, or betadine solution. Apply cold compress to area. Inform parent/guardian of removal of tick, and give tick to

parents for possible testing by student's physician. Notify school nurse for possible follow-up.

#### BLEEDING, SEVERE

Wearing gloves, apply sterile dressing and pressure over wound until bleeding stops. Elevate affected part, if possible. Reinforce dressing and bind in place. Apply ice to affected area. Contact parents and call emergency medical services (911).

#### BURNS, BLISTERS

Apply cool water to area. Cover with dry sterile dressing, if area is blistered. Do not break blister. Contact parent/guardian to contact family physician for further treatment/advice.

#### BURNS, CHEMICAL

Flush are thoroughly with cold water for at least five minutes. Do not use a strong stream of water if it can be avoided. Apply cold, wet compresses to the area for five to ten minutes. Leave uncovered if possible. Contact parent and notify emergency medical services (911) if necessary. Call school nurse for follow-up.

#### BURNS, SUNBURN

If mild apply cool cloth. If severe, (with chills and nausea), notify parent.

#### BUMPS AND BRUISES

Apply cold water and/or ice to area for up to twenty minutes. Contact nurse for further advice, especially if injury involved head area. If head injury, send home "Head Injury Letter" with student.

#### CHOKING

Use Heimlich maneuver. Notify parent and call emergency medical services (911) if necessary. Call nurse for follow-up.

#### COLD SYMPTOMS

(Sneezing, Coughing, Sore Throat, etc.) - Check temperature. Contact parent/guardian if child has fever elevation (at least over 100°) or appears ill. (red, watery eye, profuse nasal discharge, listlessness, etc.) Advise parent/guardian to contact family physician for advice/treatment as needed.

#### COMMUNICABLE DISEASES

Isolate student from others and exclude from school and school-sponsored activities. Call parent and advise calling family doctor. Advise parent of need for doctor's note to return to school.

#### CONVULSION (see Seizure)

#### DIABETIC REACTION

If student is conscious, give orange juice (or recommended treatment by student's doctor) and call parent and school nurse. If student is unconscious, call parent and emergency medical services (911). Contact school nurse for follow-up.

#### DISLOCATION

Do not attempt to relocate injured joint. Secure parts of limb above and below injury with sling and/or splint. Apply ice to injury. Contact parents and call emergency medical services, (911) if necessary. Contact school nurse for follow-up.

#### DROWNING

Call emergency medical services (911) and begin administering CPR. Have parents notified and call school nurse.

#### DRUG REACTION/INTOXICATION

If student is suspected of being under the influence of a substance, the Vineland Board of Education Alcohol and Other Drug Policy is to be followed. Contact administration and the school nurse (if during school hours) and have vital signs assessed. If necessary contact emergency services (911). Parents of the student must also be notified as soon as possible.

#### EARACHE

Contact parent/guardian and advise medical follow-up. Request that student be taken home if pain is accompanied by fever or if the pain is too severe for child to tolerate. Call nurse for advice, if necessary.

#### EAR INJURY

Inspect the ear canal with an otoscope for any abnormalities (discharge, skin lesions, bleeding, etc.). If a foreign body is present, refer to parent and personal doctor immediately. Check ear for tenderness by gently moving the external ear (auricle). Press over the mastoid process and tragus (cartilage in front of ear canal). If student complains of pain, contact parent. Straighten ear canal by pulling up and back on external ear. Examine canal and document any redness, swelling, lesions and/or scales. Notify parent and advise contacting family doctor for advise/treatment.

## EYE, BLOW TO

Apply cold compresses immediately for fifteen minutes. Contact parent and advise calling family doctor for advice/treatment.

## EYE, CHEMICAL BURN

Flush eye with water immediately, continuously and gently for at least fifteen minutes. Hold head under faucet or pour water into eye, using any clean container. Keep eye open as widely as possible during flushing. Do not use an eye cup. Do not bandage eye(s). Notify parent and advise immediate medical care. Contact school nurse for follow-up.

## EYE, CONTACT LENS ABRASION

Remove contact lens from eye. Notify parent for immediate care by family doctor or eye doctor.

## EYE, FOREIGN BODY IN

Flush eye with eye wash bottle. Do not attempt to remove foreign body if it is embedded. Cover with sterile eyepad and call parent for medical treatment. If penetrating injury, cover both eyes loosely and call Emergency Medical Services (911). Call parent/guardian to meet child at ER and call nurse for follow-up. Contact ER (794-4383) to expect eye injury.

## EYE INFECTION

If purulent discharge, lid swelling, itching and reddened sclera are noted, exclude from school and school-sponsored activities. Contact parent to have student evaluated by family doctor. Advise females against use of mascara and eye liner when eyes are irritated. Advise cleaning of safety glasses worn in shops. If diagnosed as bacterial infection, student must have doctor's note to return to school.

## EYE INJURY

Apply sterile eyepad lightly over the eye. If you suspect glass or metal particles are in the eye, cover both eyes to prevent motion and transport in horizontal position. Notify Emergency Medical Services (911) for transport and contact parent to meet at ER. Notify nurse for follow-up.

## FAINTING

Place student on either side, elevate legs and loosen clothing around neck. Apply cool compress to forehead. Do not attempt to give any fluids, until fully awake. Call nurse.

(Fainting may be prevented by lowering head between knees, moving to a cooler location, or by lying down, with feet elevated.)

#### FRACTURES/POSSIBLE FRACTURES

Prevent movement of injured part, no weight bearing. Apply cold compress/ice (wrapped in towel) to injured area. Contact parent/guardian for medical treatment. Call nurse. If break in skin with deformity or neck injury - Do not move victim - Call Emergency Medical Service (911) and contact parent/guardian to meet child at ER. Call nurse for follow-up.

#### HEADACHE

Check temperature. With fever over 100°, contact parent and send student home. Obtain history, such as blow to head, allergies, etc. If no temperature elevation and no history of head trauma, advise rest, fluids, (lunch, if possible). Call nurse if headache persists. (If student has history of headaches, check to see if medication has been provided to school nurse and call nurse to administer, if necessary.)

#### HEAD INJURY

Have child rest with ice to injured area. Observe closely for one-half (1/2) hour. If no other symptoms occur, inform parent of the incident and send home "Head Injury Letter", for further observation by parent/guardian.

If other symptoms occur, (loss of consciousness, vomiting, restlessness, blurred or distorted vision) - Call Emergency Medical Services (911) and contact parent/guardian to meet student at ER. In either case, contact nurse for follow-up.

#### HEAD INJURY, SEVERE

Keep student in semi-Fowler's position (lying in a horizontal position with head slightly elevated, approximately 30° angle). If unconscious, turn head toward side to prevent aspiration. If open wound is present, apply sterile dressing. Wearing gloves, apply pressure if bleeding is profuse. Take vital signs and check pupil response. Call Emergency Medical Service (911) immediately. Notify parent to meet at ER. Call nurse for follow-up.

#### HEAT EXHAUSTION

(Moist, clammy skin, dizziness, nausea) - have child rest and give fluids, if conscious. Remove unnecessary clothing, and keep body warm to prevent shock. Call nurse for advise.

#### HEAT STROKE

(Dry skin and high temperature) - Cool body down with water. Give fluids, if conscious. Call Emergency Medical Services (911) and parent/guardian to meet child at ER. Call nurse for follow-up.

## HYSTERIA

Place student in quiet area. Apply cold compress to forehead. Talk calmly and reassuringly to student. Contact parent, if needed.

## LACERATIONS, SEVERE

Wearing gloves, apply direct pressure with sterile dressing over the wound. If wound is on extremity, raise arm or leg above heart level, to slow bleeding. Call nurse and contact parent for medical care.

## NAUSEA/VOMITING

If occurring after running or other exertion, allow student to rest for fifteen to twenty minutes. If vomiting persists, contact parent/guardian and send student home, for parent's observation and care.

If vomiting occurs spontaneously, check temperature. If student has a fever, contact parent/guardian and send home. If vomiting continues, or student appears pale and limp even without fever, call parent/guardian.

## NOSE BLEED

(No Injury) - Have student sit upright and wearing gloves, apply direct pressure to nostrils, using tissue or gauze square. Hold firmly for up to five minutes. If bleeding stops, cleanse area and advise student not to blow nose for one hour or more. If unable to stop bleeding, contact parent/guardian and nurse for further advice/treatment.

## POISONING

Maintain patient's airway. Check pulse and respiration. If either is absent, begin CPR. Call Emergency Medical Services (911). Call Poison Control Center (1-800-962-1253) for appropriate advice. Try to identify poisonous substance ingested. If possible, send container to ER with student. Contact parent to meet student at ER.

## PUNCTURE WOUNDS, DEEP

Do not remove penetrating object from wound. If there is no penetrating object present in wound, wearing gloves apply direct pressure over wound with sterile dressing. If wound is on arm or leg, elevate above heart level to slow bleeding, if possible. Notify parent and advise contacting family doctor for medical advice/treatment. Call nurse for follow-up.

## RASHES (ITCHY)

Apply calamine lotion and remove unnecessary clothing. (Cooling body temperature decreases itchy feeling.) If rash is open and draining (as in poison ivy), contact parent/guardian to keep student home until rash is dry or to keep rash area covered - To protect student from possible infection of area. Poison Ivy is allergic reaction - Not a contagious rash.

## RASHES - WITH FEVER

Contact parent/guardian and send student home. Advise parent to contact family physician. Call nurse. (Rashes with fever must be reported to the Public Health Department - 794-4261)

## SEIZURE

Prevent injury to child. Position on side, with head turned to side (to prevent aspiration of saliva or vomitus). Keep area clear and quiet, and prevent head injury. After end of seizure, allow student to rest. Keep student warm. Notify parent of incident of seizure. If incontinent, ask parent for change of clothing. Inform nurse for follow-up. If no history of seizure disorder, contact parent and nurse immediately.

## SHOCK

Keep victim lying flat. Keep warm and avoid overheating. Elevate feet. Check pulse and blood pressure. Allow to rest until recovered. Contact nurse for follow-up and advice. If condition worsens, contact Emergency Medical Services (911) and call parents to meet at ER.

## SHOCK, ELECTRIC

Do not touch victim until source of current is located and turned off. Use a non-conductor (long wooden stick, piece of cardboard, cloth - No metal) to remove wire from contact with victim. Check pulse and respiration. If absent, begin CPR. Have someone call Emergency Medical Services (911) immediately. Call school nurse. Recheck pulse and respiration after one minute. If still absent, continue CPR until paramedics arrive. If respirations and pulse return, observe closely, keep warm and lying down. Contact parent to meet at ER.

## SHOCK, ANAPHYLACTIC/ALLERGIC

Watch for difficulty in breathing. Call school nurse and if severe respiratory distress, call Emergency Medical Services (911). Notify parents to meet at ER.

## SKIN ERUPTIONS

(Infections, impetigo, etc.) Notify parent to make arrangements for medical evaluation and treatment. Exclude student from school and school-sponsored activities until student is under treatment and infection is limited to a small area and covered.

### SPRAINS, STRAINS

Allow no weight bearing. Elevate injured part (arm or leg) above heart level, if possible, and apply cold compress or ice, wrapped in towel, for at least twenty minutes. If no swelling, discoloration, complaint of pain on movement or pressure to area (point tenderness), and no complaint upon weight bearing, student may return to class, after the twenty minutes. Contact parent if student has any of the above-mentioned complaints, and advise parent/guardian to call family physician for medical advice/treatment. Call nurse to inform.

### SPLINTERS

Apply gloves. Cleanse area with mild soap and water. Using forceps, grasp exposed end of splinter and pull out. Cleanse area with betadine or mild soap and water after removal. If the end of the splinter is not available to be removed with forceps, contact parent to remove it at home. Do not dig into skin to expose splinter. After use, clean forceps with Lysol liquid disinfectant, rinse and dry.

### STOMACH PAINS/ACHES

If student has no fever, advise use of bathroom, check about last meal (any breakfast?), etc. Allow student to rest for up to twenty minutes. If pain persists and/or other symptoms occur, contact parent/guardian and send home. Advise parent/guardian to contact family doctor for advice/treatment.

With menstruating female student - Allow to rest, if possible, up to twenty minutes. Contact nurse and parent/guardian if incident of complaint occurs regularly, for medical intervention.

### SWALLOWED OBJECTS

Do not slap on back. Encourage coughing. If unable to cough or speak, use Heimlich Maneuver. Notify parent and advise accordingly. Call Emergency Medical Services (911) if necessary.

### TOOTHACHE

Have student rinse mouth with warm water and salt. Wearing a glove and using a tongue blade, check for evidence of cavity or possible erupting tooth. Contact parent if necessary. Inform nurse for possible dental referral.

## TOOTH - DISLODGED BY ACCIDENT

(Not a Baby Tooth) - Do not rinse off tooth - Put on a glove and place dislodged tooth into a container with some of student's saliva, if possible or water. Call parent/guardian for immediate dental care. Give gauze square to student to decrease bleeding, if necessary. Apply ice to area as needed. Call nurse for follow up.

## WHEEZING (ASTHMATIC)

Have student sit quietly. Encourage slowing of breathing and check for availability of inhalant medication with nurse. Offer a drink of cold water. Contact parent if rest and quiet do not relieve wheezing (With no medication available), or if symptoms are not relieved with inhaler. (Wheezing may occur with coughing from colds and no history of asthma.

Adopted: 11 June 1997