8 Steps in First Aid to Students

1. **Survey the Scene**
   Take a brief moment to look around and make sure the scene is safe. Find out who is involved and what happened.

2. **Hands-off Check**
   As you approach the student, look at appearance, breathing, and circulation to decide if someone should call 911—this should take less than 30 seconds.

3. **Supervise**
   Make sure other students near the scene are supervised and safe.

4. **Hands-on Check**
   Check the student's condition. Decide if someone should call 911 and what first aid is needed.

5. **First Aid Care**
   Provide first aid that is appropriate for the injury or illness.

6. **Notify**
   As soon as possible have someone notify a parent or legal guardian. Also have someone notify the school nurse, if available.

7. **Debrief**
   If possible, talk to the student about any concerns. Talk with other students who witnessed what happened and how you and others responded.

8. **Document**
   Complete a written report of what happened.

Adapted from American Academy of Pediatrics' course book: Pediatric First Aid for Caregivers and Teachers

How to Respond

Injury and Illness at School

Injuries and Medical Emergencies
Including Standard Precautions, Shock, Diabetes

- Asthma, Breathing Difficulty
- Allergic Reactions
- Bleeding, Swelling, Blisters, Infection
- Bone, Joint, and Muscle Injuries
- Head Injuries, Loss of Consciousness, Fainting
- Seizures and Convulsions
- Bites and Stings
- Poisoning
- Burns
- Heat and Cold Injuries
- Eye Injuries
- Oral Injuries

Illnesses and Health Problems
Including Diarrhea, Fever, Vomiting

Washington State Department of Health

Emergency Telephone Numbers

Emergency: 911

Washington Poison Center: 1-800-222-1222

Local Health Jurisdiction:

Local Police Department:

Local Fire Department:

Local Hospitals:

Washington State Department of Health
DOH 130-021 April 2010

For persons with disabilities, this document is available on request in other formats.
To submit a request, please call 1-800-525-0127 (TDD/TTY 1-800-833-6388).

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Its contents are solely the responsibility of the authors and do not represent the official views of CDC.

Health and Safety Resources

Resources for school staff are available from the Office of Superintendent of Public Instruction.

- School Health Services:
  http://www.k12.wa.us/HealthServices/default.aspx
- Health Conditions:
  http://www.k12.wa.us/HealthServices/resources.aspx
- Infectious Disease Control Guide:
  http://www.k12.wa.us/HealthServices/pubdocs/InfectiousDiseaseControlGuide3-11-04.pdf
- School Safety Planning Manual:
  http://www.k12.wa.us/SafetyCenter/Planning/SafetyPlanningManual.aspx

Resources for parents, guardians, and school staff are available from the American Academy of Pediatrics.

- Pediatric First Aid for Caregivers and Teachers:
  http://www.pedfactsonline.com/
- Children's Health Topics:
  http://www.aap.org/topics.html
- Children's Safety and First Aid:
  http://www.aap.org/healthtopics/safety.cfm

First Aid Supplies

- Adhesive tape
- Bandaids (various sizes)
- Blankets
- CPR breathing barrier
- Elastic bandages (2", 4", 6")
- Eye bandages
- Gauze squares (3", 4")
- Ice bags or instant cold packs
- Non-latex disposable gloves
- Paper bags, cups, towels
- Plastic bags
- Roller bandage (3", 4" wide)
- Rubbing alcohol (for cleaning instruments)
- Safety pins
- Saline solution (sterile)
- Scissors
- Soap (mild liquid)
- Splints
- Thermometer
- Triangle bandages
- Tweezers

Medications should be given only when provided by parent and prescribed by a primary health care provider (RCW 28A.210. 260 and 270 and district policy). A statement signed by parent and provider authorizing use of medications should be kept at school and should be updated annually.

How to Respond: Injury and Illness at School is a reference guide from the Washington State Department of Health and the Washington State Office of Superintendent of Public Instruction. It is designed to help school personnel respond quickly, safely, and effectively when students are injured or become ill at school. Knowing how to respond to a medical emergency may mean the difference between life and death.

We recommend that all adult staff familiarize themselves with this booklet, how to use it, and where to find it. It can hang on the wall of a classroom or health room, fit into a school first aid kit, and be carried on field trips or athletic events.

The organization of this booklet is based on the American Academy of Pediatrics' course book, **Pediatric First Aid for Caregivers and Teachers**. Topics are separated by injuries requiring immediate medical care, and illnesses representing common health problems which are usually not emergencies. Types of injuries and illnesses also correspond to "Reason for Visit" data of the Washington School Nursing Data Workgroup.

Reviewed and approved by:

- Washington State Department of Health
- Office of Superintendent of Public Instruction, Health Services
- Washington Chapter of the American Academy of Pediatrics

Injuries and Medical Emergencies

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Nausea and Vomiting

Viral infections are the most common cause of nausea and vomiting and are often contagious.

- Put on non-latex disposable gloves and follow standard precautions for exposure to blood and body fluids.
- Keep the student away from other students.
- Notify the school nurse, if available.
- Have the student lie down.
- Watch for other symptoms.
- Give no fluids.
- If symptoms continue, inform a parent or guardian.

Head Lice and Scabies

Head lice and scabies can spread quickly among students who are in close contact, especially head to head contact, or who share items like hats and other clothing. Head lice and scabies do not cause disease and are not a sign of uncleanliness.

- Head lice are parasitic insects that lay their eggs on humans. Look for nits (tiny eggs) attached to the base of the hair.
- Scabies are tiny mites that burrow into the skin. Look for a rash and severe itching.
- Refer to your school district's policy.

Headache

Severe or sudden headaches with a stiff neck and vomiting may be a sign of meningitis, a life-threatening infection. Call 911 if you suspect meningitis. Most headaches are minor and will go away without treatment.

- Have the student lie down in a darkened room.
- Place a cool, wet cloth on the forehead to relieve pain.
- Do not give medication. Never give aspirin to students under 18.
- Inform a parent or guardian. Advise them to consult with their health care provider.

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What To Do in an Emergency

In this section you will find:

- Medical Emergencies
- Standard Precautions to Prevent Infection
- Schoolwide Emergency Response
- Shock
- Diabetes and Low Blood Sugar (Hypoglycemia)
- Pregnancy Complications and Miscarriage
- Mental Health Emergencies and Depression

Emergency Care Plans and Students with Special Needs

Students should have up-to-date emergency care plans in place if they have:

- Special health care needs
- Disabilities
- Asthma
- Diabetes
- Severe allergies
- A history of seizures
- Bleeding disorders

Students who are pregnant and students who need special medications also should have emergency care plans. Teachers, administrators, and other adult staff should be aware of individual plans. Follow the plan.

Students with limited mobility or sensory impairments may need help during emergencies to communicate and move safely out of danger.

Earache

Earaches are often caused by a cold or flu. Watch for other symptoms such as fever, difficulty hearing, severe pain, and discharge.

- Make sure the student is in a comfortable position.
- Take the student's temperature. Allow the student to rest, and retake temperature.
- Press a warm, damp cloth to the ear to relieve pain.
- Never try to probe or remove an item from the ear.
- Inform a parent or guardian. Advise them to consult with their health care provider.

Fever

Low fever without other symptoms is not harmful or a reason to send a student home. If the student's fever is over 100°F call a parent or guardian. Check for the cause of the fever and monitor for other symptoms.

- Check to see if the student is overheated. See the section on heat stroke and heat exhaustion.
- Make sure the student is in a comfortable position.
- Do not give medication. Never give aspirin to students under 18.
- Inform a parent or guardian. Advise them to consult with their health care provider.

Colds and Flu

Have the student cover coughs and sneezes with a tissue or shirt sleeve. Instruct the student to wash hands frequently.

- Make sure the student is in a comfortable position.
- Take the student's temperature. Allow the student to rest, and retake temperature.
- Do not send a student home on the bus if he or she has serious symptoms.
- Inform a parent or guardian.

Diarrhea

Diarrhea is caused by a number of things, including viruses, bacteria, or parasites. It may be infectious. Watch for other symptoms such as vomiting, fever, and abdominal pain.

- Have the student wash hands thoroughly and frequently.
- Take the student's temperature. Allow the student to rest, and retake temperature.
- Have the student take small sips of water.
- Inform a parent or guardian.
- In all cases of persistent diarrhea, especially with fever and cramps, the student must be seen by their health care provider.
- If several students suddenly have diarrhea, notify your local health jurisdiction.

Medical Emergencies

Do not move a student if he or she has a head, neck, or back injury, or is having trouble breathing. If there is a clear danger of further injury, then move the student carefully to safety.

Do not deal with medical emergencies by yourself. While you give first aid, have someone else:

- Call 911.
- Notify the school nurse, if available.
- Notify a parent or legal guardian.

Do not delay emergency medical care because you can't reach a parent or guardian. Use your best judgment.

Before calling 911 survey the scene and make sure it is safe. Check the student's airway, breathing, and circulation (the ABCs of first aid). Someone trained in cardiopulmonary resuscitation (CPR), automated external defibrillator (AED), and first aid should start providing emergency care.

Call 911 for medical emergencies:

- Severe allergic reaction (anaphylaxis)
- Choking or severe difficulty breathing
- Shock
- Deep wound or part of the body that was crushed
- Bleeding that is difficult to control
- Back and neck injuries or broken bones
- Severe head injury
- Unconsciousness
- Seizure—if longer than three to five minutes, if there is a second seizure, or if the student has never had a seizure before
- Serious burns
- Spill or release of hazardous chemicals
- Several students injured or ill at the same time

When calling 911:

- Stay on the phone and follow their instructions.
- Give the address and clear directions.
- If possible, have someone meet the emergency medical team when they arrive. Direct them to the exact location.

You should be ready to give this information to medical personnel:

- Name, age, and sex of the student.
- A description of the injury or symptoms.
- The student's condition.
- The name and contact information of a parent or guardian.
- How the student will be transported and the name of the medical facility.
- The name of the student's health care provider.

Call a parent or legal guardian.

- Describe the medical emergency and what you are doing to care for the student.
- Find out the recommended hospital or medical facility and the student's health care provider.
- Ask the parent to accompany the student or meet at the hospital or medical facility.

A school staff person should accompany the student to the hospital or medical facility if a parent is not available or cannot be located.

- Call 911 for transport. Do not use a personal car or school car for transporting a critically ill or injured student.
- Keep trying to reach a parent or guardian or the student's health care provider.
- Call an alternate emergency number for the student if you can't reach a parent.

Complete a written record of the incident immediately.

Abdominal Pain, Stomachache, Cramps

Abdominal pain is usually not serious unless it is in a specific spot, comes on suddenly, and gets worse. This may be a symptom of appendicitis. If pain is severe, notify a parent or guardian and call 911.

- Have the student lie down.
- Notify the school nurse, if available, especially when the pain is serious.
- If the student is pregnant, refer to the section on pregnancy complications or miscarriage.
- Give no medications or anything by mouth.
- Ask if the student has:
  - Been injured
  - Just eaten
  - Been to the bathroom
  - A period
  - Other symptoms of illness
- If pain continues or occurs often, advise parents to have the student seen by their health care provider.

Alcohol and Drug Use

Look for inappropriate behavior, staggering, slurred speech, and dilated or constricted pupils.

- Know your school's policy on drug and alcohol use.
- Keep the student in the health center and watch for possible signs of overdose.
- Call 911 if the student loses consciousness.
- Have a school administrator, counselor, or nurse inform the student's parent or guardian.
- If the student is being transported to a hospital or medical facility, ask the parent to accompany the student or meet at the medical facility.
- If not transported, advise parents to have the student seen by their health care provider.

Standard Precautions to Prevent Infection

These precautions help prevent the spread of germs to both you and the student. Assume that everyone can be the source of infections and everyone needs to be protected. Follow instructions in the **Infectious Disease Control Guide** for cleaning and disposal of contaminated materials.

Avoid direct contact with blood and other body fluids:

- Use a barrier between you and the body fluids, such as gloves, sterile dressings, cloths, or tissues.
- Use non-latex disposable gloves if possible. Do not reuse gloves.
- Wash your hands frequently with soap and warm water.
- To avoid contact with blood, have the student hold a bandage or cloth over the area that is bleeding.

Clean and sanitize contaminated surfaces, including sports equipment:

- Use disposable gloves and disposable cleaning materials.
- Wipe up the body fluids.
- Use a detergent to wash the surface, and rinse with water.
- Clean again with a sanitizing solution, such as one tablespoon of bleach in one quart of water, or other appropriate disinfectant.
- Remove and launder contaminated clothing as soon as possible.

Dispose of contaminated items and cleaning materials:

- Seal all contaminated materials, including gloves, in a plastic bag. Dispose of the bag in a plastic-lined trash can.
- Label the trash bag: "Contains blood and body fluids."
- Wash your hands thoroughly with soap and warm water.

Important: If you have direct contact with blood or body fluids, follow your school's exposure plan as required by the Washington Administrative Code on bloodborne pathogens.

Schoolwide Emergency Response

Know your school's plan for handling emergencies, including responsibilities of administrators and staff.

Bomb threat: Evacuate.

Chemical spill: If the chemical spill is in your room or nearby, evacuate. If the chemical spill is outside of the building, shelter in place. Close and seal doors and windows.

Earthquake: Drop, cover under a desk or table, and hold. Turn away from windows. Evacuate only if instructed to do so.

Fire: Evacuate. Turn off lights, close door as you leave.

Intruder: Lockdown.

Power outage: Shelter in place. Turn off computers, lights, electrical devices.

Radiation leak: Shelter in place.

Threat outside of the building: Modified lockdown.

Tsunami warning: Evacuate.

Evacuate

- Take students out of the building to an emergency assembly area or evacuation route.
- Bring any students in hallways with you.
- Stay away from overhangs, windows, and power lines.
- Keep your class separate from other classes.
- Take attendance.
- Follow school procedures for students being picked up or released to parents or guardians.

Bleeding After Losing a Baby Tooth

- Put on non-latex disposable gloves and follow standard precautions for exposure to blood and body fluids.
- Put a clean, folded gauze pad over the spot that is bleeding.
- Have the student bite on the gauze with pressure for 15 minutes.
- Change the gauze and repeat if necessary. Avoid rinsing.
- Inform a parent or guardian. Advise them to consult a dentist, if bleeding doesn't stop.

Toothaches and Abscesses

- Put on non-latex disposable gloves and follow standard precautions for exposure to blood and body fluids.
- Have the student rinse the mouth vigorously with warm salt water.
- Use dental floss to remove anything trapped between teeth.
- Place a cold pack or ice bag wrapped in a cloth over the area that hurts.
- Never put aspirin on a tooth or gum.
- Inform a parent or guardian. Advise them to see a dentist.

Broken Tooth

- Put on non-latex disposable gloves and follow standard precautions for exposure to blood and body fluids.
- Gently clean dirt from the injured area with warm water.
- Place a cold pack or ice bag wrapped in a cloth on the face over the injured area.
- Inform a parent or guardian. Advise them to see a dentist immediately.

Cut or Bitten Tongue, Lip, Cheek

- Put on non-latex disposable gloves and follow standard precautions for exposure to blood and body fluids.
- Gently clean the area of the injury with a clean, wet cloth.
- Apply pressure with gauze to stop the bleeding.
- Place a cold pack or ice bag wrapped in a cloth over the injury to control swelling.
- Inform a parent or guardian. Advise them to see a health care provider or dentist, especially if the injury is deep or bleeding doesn't stop easily.

Broken Braces and Wires

- Put on non-latex disposable gloves and follow standard precautions for exposure to blood and body fluids.
- Broken wires can be covered with gauze until the student can be seen by an orthodontist.
- Do not remove wire embedded in the cheek, tongue, or gums.
- Inform a parent or guardian. Advise them to see an orthodontist immediately.

Shelter in Place

- Move students to your assigned shelter location.
- Bring any students in hallways with you to the shelter location.
- Lock exterior doors near your room.
- Keep students calm and busy.
- Take attendance.
- Use e-mail, not the phone.
- Close windows and seal them if directed.
- Turn off classroom heating and air vents. Cover vents.

Lockdown

- Move students indoors.
- Bring any students in hallways into your room.
- Lock all doors, including exterior doors near your room.
- Close windows and blinds. Cover exposed windows.
- Turn off lights.
- Have students remain quiet. Stay low and out of sight.
- Use e-mail, not the phone.
- Let the office know about any threats.
- Take attendance.

Modified Lockdown

- Lock exterior doors near your room. Close windows and blinds. Cover exposed windows.
- Stop the movement of students between buildings or in halls.
- Bring students in from outside if it is safe to do so.
- Allow only known persons into the school or room.
- Reassure students by keeping calm and keeping them busy.
- Use e-mail, not the phone.

Shock

Shock may develop when a person is suddenly injured, bleeding, or ill. Even mild injuries or witnessing a traumatic injury or illness can lead to shock. Call 911 if you think someone is in shock. Notify the school nurse, if available.

Signs of shock include:

- Weakness, dizziness, and fainting
- Cool, pale, clammy skin
- Fast but shallow breathing
- Extreme thirst, nausea, or vomiting
- Confusion and anxiety

If someone has signs of shock:

- Treat as a medical emergency.
- Do not move them if they have a head, neck, or back injury.
- Otherwise, have them lie down. Prop their legs up about one foot higher than the head on a pillow or rolled towel.
- Keep them dry and warm.
- Give nothing by mouth.
- Stop any bleeding.

Possible Broken Jaw

Have someone call 911. Have someone notify the school nurse, if available.

- Put on non-latex disposable gloves and follow standard precautions for exposure to blood and body fluids.
- The student's jaw line may appear distorted.
- Keep the student still and calm.
- Make sure the student can breathe.
- Try to keep the student from moving.
- Inform a parent or guardian. If the student is being transported to a hospital or medical facility, ask the parent to accompany the student or meet at the medical facility.

Knocked Out Permanent Tooth

Find the tooth. The faster you act, the better the chances of saving the tooth. Have someone notify the school nurse, if available, when the injury is severe.

- Put on non-latex disposable gloves and follow standard precautions for exposure to blood and body fluids.
- Handle the tooth by its crown, not the root.
- Gently put the tooth back into its socket, making sure that the front of the tooth is facing you.
- Have the student hold the tooth in place with clean gauze.
- If the tooth cannot be reinserted into the socket, put the tooth into a cup of fresh milk, or a ziplock bag with some of the student's saliva. Or wrap the tooth in a clean wet cloth.
- Apply gentle pressure on the socket if bleeding continues.
- Do not remove the blood clot from the socket—it is important for healing.
- Inform a parent or guardian. Advise them to see a dentist immediately.

Small Object in the Eye

Small objects, like dust or hair, can usually be removed.

- Gently pull down the lower eyelid while the student looks up, and try to find the object.
- Wipe the inner surface of the lower lid with clean, wet gauze.
- Gently lifting the upper lid out and down will produce tears that can help wash the object out of the eye.
- If the object remains, flush the eye with clean, lukewarm water.
- Inform a parent or guardian. Advise them to consult with their health care provider.

Minor Bruises and Cuts to the Eye

Have someone notify the school nurse, if available. Cover the eye with a gauze pad and bandage loosely.

- Do not try to flush the eye with water.
- Gently place a cold pack or ice bag wrapped in a wet cloth over the injured eye for 10 to 15 minutes.
- Inform a parent or guardian. Advise them to consult with their health care provider.

Diabetes and Low Blood Sugar (Hypoglycemia)

Watch for dizziness, confusion, slurred speech, poor coordination, and fainting in students who take insulin. Call 911 if the student can't swallow or loses consciousness.

- Students with diabetes should have an emergency care plan for taking medications and dealing with severe symptoms. Follow the plan.
- If conscious and able to swallow, give the student four to six ounces of fruit juice. If there is no improvement give more fruit juice. If there is no improvement in 10 minutes call 911.
- If the student improves, follow fruit juice with a sandwich and milk or foods on the student's individual health plan.
- Inform a parent or guardian. If the student is being transported to a hospital or medical facility, ask the parent to accompany the student or meet at the medical facility.
- If not transported, advise parents to have the student seen by their health care provider.

Pregnancy Complications and Miscarriage

Symptoms are severe vaginal bleeding with abdominal pain and severe cramping. Also fever, fainting, or dizziness. Problems can include ectopic pregnancy and placenta previa.

Call 911 if bleeding is heavy and pain is severe.

- A miscarriage may happen over several days and may not be just one event.
- Bleeding may be light to heavy.
- Bleeding and pain together is a sign of miscarriage. Pain may start a few hours to several days after bleeding.
- Put on non-latex disposable gloves and follow standard precautions for exposure to blood and body fluids.
- Follow the student's individual health plan.
- The student should be seen immediately by a health care provider if miscarriage is suspected.

Mental Health Emergencies and Depression

Make sure other students are safe. Do not leave the student alone. Call for assistance if the student is behaving violently. Call 911 if there is a life-threatening emergency.

- Immediately place the student in responsible hands, such as the school principal or counselor.
- Be patient, reassuring, and firm.
- Watch for warning signs of suicide, severe self-destructive behavior, extreme agitation, irrational behavior, or threats to others.
- Have a school administrator, counselor, or nurse inform the student's parent or guardian. Advise them to consult with their health care provider immediately.
- Complete a written report of what happened.

Depression is a medical problem that can be treated. Feeling sad or depressed for several days can lead to thoughts of suicide. Warning signs of suicide include talking about killing oneself, giving away favorite things, talking, reading, and writing about death, and feeling isolated.

- Do not leave the student alone.
- Call the National Suicide Prevention Lifeline, 1-800-273-8255.
- Have a school administrator, counselor, or nurse inform the student's parent or guardian. Advise them to consult with their health care provider immediately.

Chemical in the Eye

Hold the injured eye open and flush the eye with clean, lukewarm water. Have someone call the Washington Poison Center, 1-800-222-1222. Follow their instructions. Have someone notify the school nurse, if available.

- If possible, position the student's head over a sink **with the injured eye down**.
- Keep the student as still as possible.
- Rinse the eye by running water into the inside corner of the eye (by the nose) for 15 to 20 minutes or until the emergency medical team arrives.
- Inform a parent or guardian. If the student is being transported to a hospital or medical facility, ask the parent to accompany the student or meet at the medical facility.
- If the student is not transported, advise parents that the student must be seen by their health care provider.

Penetrating Object in the Eye

For penetrating eye injuries, have someone call 911. Have someone notify the school nurse, if available.

- Keep the student as quiet and still as possible.
- Never attempt to remove the penetrating object.
- Never put pressure on the eye.
- If possible, cover both eyes with eye shields, paper cups, or cardboard cones, held in place with gauze bandage wrapped around the head.
- Inform a parent or guardian. If the student is being transported to a hospital or medical facility, ask the parent to accompany the student or meet at the medical facility.

Hypothermia and Frostbite

Call 911 if the student is severely chilled and sluggish. Bring the student to a warm place. Notify the school nurse, if available.

- Until you can get the student to a warm room, hug the student close to your body.
- Strip off cold, wet clothes, socks, and shoes. Replace with dry clothes and wrap the student in blankets.
- Allow toes, fingers, and ears to return to normal body temperature slowly.
- Do not rub toes, fingers, ears, or skin.
- Do not break any blisters, but wrap any that have broken in gauze.
- If toes or fingers are damaged, put dry gauze between them to keep them from rubbing.
- Inform a parent or guardian. Advise them to consult with their health care provider.

Asthma Attacks

Call 911 if the student has severe trouble breathing and does not have a quick-relief inhaler or if the inhaler is not helping. Notify the school nurse, if available.

- Students with asthma should have an emergency care plan for taking medications and dealing with severe symptoms. Follow the plan.
- Quick-relief inhalers should only be used with both a licensed health professional's instructions and with consent from a parent or legal guardian.
- Have the student sit in an upright position and breathe slowly and deeply.
- If the student has medication and is able to take it, assist the student to inhale medication slowly and fully.
- Calm and reassure the student.
- Inform a parent or guardian about the attack.

Early signs of an asthma attack:

- Coughing
- Shortness of breath
- Tickle in throat

Moderate to severe symptoms:

- Tightness in chest
- Wheezing or grunting
- Unable to talk without stopping to breathe
- Gasping, rapid breaths
- Nostrils flaring
- Feelings of fear or confusion

Important: A student with asthma is more likely to have a life-threatening episode if the asthma attack also involves an allergic reaction. Quick action with a prescribed inhaler and EpiPen is critical.

Not Breathing

If the student is not breathing and is unresponsive, pale, or bluish, have someone call 911, and clear the airway. Someone trained in CPR should give rescue breaths and start emergency care. Have someone notify the school nurse, if available.

- Use the head-tilt, chin lift-method, and listen for breathing. Look for an object in the mouth that you can easily remove, but do not try to sweep the mouth with your finger.
- Give two rescue breaths, one second per breath.
- If the chest does not rise and fall, use the steps below to clear a blocked airway, then begin CPR, alternating two rescue breaths with 30 chest compressions until the student starts breathing or until the emergency medical team arrives.
- Have someone inform a parent or guardian.

Choking

If the student is choking and responsive, follow the steps to clear the blocked airway. Repeat until the object is dislodged. Have someone call 911. Clearing a blocked airway may be critical to saving a student before the emergency medical team arrives. Have someone notify the school nurse, if available.

Steps to clear a blocked airway:

- **For infants:** Hold the infant face down on your arm, chest in your hand and infant's head lowered, give five slaps between the shoulder blades, and, using your fingers to press up on the breastbone, give five quick chest thrusts.
- **For older students:** Get behind the student, make a fist with one hand and grasp it with the other hand just above the student's navel, pull the student close to you, and thrust your fist upward against the student's abdomen.
- A good cough is more effective than anything you can do.
- Inform a parent or guardian. Advise them that the student must be seen by their health care provider, even if the object was dislodged.

Heat Stroke and Heat Exhaustion

Call 911 if the student has a high body temperature and is not sweating, and acts confused or disoriented. Cool the body immediately by pouring lots of cool water over the student. Notify the school nurse, if available.

- Move the student to a cool place.
- If possible, place cold packs or ice bags wrapped in cloths in the armpit and groin areas where large blood vessels are close to the skin.
- Continue pouring cool water over the skin or use a wet cloth or clothing.
- Encourage the student to drink lots of water.
- Inform a parent or guardian. If the student is being transported to a hospital or medical facility, ask the parent to accompany the student or meet at the medical facility.
- If not transported, advise parents to have the student seen by their health care provider.

Burns from Chemicals or Electricity

Make sure the scene is safe before you get the student away from the source of the burn. Don't become another victim. Have someone call 911 if the burn involves eyes, face, hands, feet, or genitals, or is a bigger area than the size of the student's palm (one percent of the body surface). Have someone notify the school nurse, if available, especially when the burn is serious.

- Immediately rinse chemicals from eyes. If possible, position the student's head over a sink **with the injured eye down**.
- For chemical burns, brush any dry chemicals off of the skin and rinse under a tap continuously for 15 to 20 minutes.
- Cool the burn right away in cool water. Do this for all degrees of burns. Use a container of cool water or a gently running water tap.
- If large areas of the body are burned, cool smaller sections with water for one or two minutes to avoid chilling the whole body. Use a cold damp cloth for areas you cannot put in water—re-wet it every few minutes.
- Electrical burns and burns of the face, hands, and genitals need treatment by a medical professional.
- Inform a parent or guardian. If the student is being transported to a hospital or medical facility, ask the parent to accompany the student or meet at the medical facility.

EpiPens or medications should only be used with both a licensed health professional's instructions and with consent from a parent or legal guardian.

Severe Allergic Reaction (Anaphylaxis)

Call 911 if the reaction is severe and the student struggles to breathe, or if the student is known to have severe allergic reactions. Notify the school nurse, if available.

- Students with severe allergies should have an emergency care plan for taking medications and dealing with severe symptoms. Follow the plan.
- Administer an EpiPen, inhaler or both, if the student has them prescribed. Call 911.
- Have the student sit in an upright position and breathe slowly.
- Calm and reassure the student.
- Watch the student's breathing carefully.
- **If unresponsive**, lay the student on his or her left side to reduce the risk of blocking the airway. Check for breathing, and if not breathing, start rescue breaths and CPR until the student starts breathing or until the emergency medical team arrives.
- Inform a parent or guardian. If the student is being transported to a hospital or medical facility, have them meet you at the medical facility.

Important: A student with asthma is more likely to have a life-threatening episode if the asthma attack also involves an allergic reaction. Quick action with a prescribed inhaler and EpiPen is critical.

Allergies

Less severe allergies can be caused by foods, dust, plants, pollen, animal dander, latex, mold, insects, mites, fragrances, and chemicals.

- Students with allergies should have an individual health plan for taking medications and dealing with symptoms. Follow the plan.
- Notify the school nurse, if available.
- Note the symptoms and what triggers the allergy. Watch for difficulty breathing.
- Get the student away from the cause of the allergy, if possible. Limit time outside if pollen count is high.
- Inform a parent or guardian.

The severity of a burn involves three factors: **Size, location, and depth. Burns on the face, hands, feet, and genitals are more serious than burns on other parts of the body. Larger and deeper burns are also more serious.**

Superficial first-degree burns involve only the top layer of skin.

Partial thickness or second degree burns go deeper and cause blisters.

Full-thickness or third degree burns damage the full depth of the skin and even muscle and nerve tissue.

Burns from Heat, Flames, Sun

Have someone call 911 if the burn involves eyes, face, hands, feet, or genitals, or is a bigger area than the size of the student's palm (one percent of the body surface). Do not use cotton, salves, ointments, or ice packs. Have someone notify the school nurse, if available, especially when the burn is serious.

- Get the student safely away from the source of the burn—out of the sun or away from flames.
- Cool the burn right away in cool water. Do this for all degrees of burns. Use a container of cool water or a gently running water tap.
- If large areas of the body are burned, cool smaller sections with water for one or two minutes to avoid chilling the whole body. Use a cold damp cloth for areas you cannot put in water—re-wet it every few minutes.
- For extensive or severe burns, treat for shock. Do not give the student anything to eat or drink.
- Burns of the face, hands, and genitals need treatment by a medical professional.
- Inform a parent or guardian. If the student is being transported to a hospital or medical facility, ask the parent to accompany the student or meet at the medical facility.

Poisonous Plants

If the student's skin was exposed to poisonous plants such as poison ivy, oak, or sumac, immediately have him or her wash the skin with soap and running water. Put on non-latex disposable gloves to protect yourself. Call the Washington Poison Center, 1-800-222-1222.

- Follow the Poison Center's instructions.
- Have the student change out of clothing that was exposed. Put the clothing in a plastic bag.
- Wear gloves when handling contaminated clothing.
- Watch for allergic reactions.
- Inform a parent or guardian.

Bleeding

Have someone call 911 if bleeding is heavy or if there are signs of a deep injury, such as from a bad fall.

- Students with bleeding disorders should have an emergency care plan for taking medications and dealing with bleeding. Follow the plan.
- Put on non-latex disposable gloves and follow standard precautions for exposure to blood and body fluids.
- Have the student lie down. Watch for signs of shock.
- Have someone notify the school nurse, if available, especially when the bleeding is serious.
- When bleeding is hard to control, apply direct pressure to the open wound with a clean dressing until the emergency medical team arrives or for at least five minutes. Do not remove the dressing, but add more if needed.
- For minor cuts, have the student apply direct pressure with a clean dressing or cloth for at least one to two minutes.
- Once bleeding has stopped on a minor cut, slowly remove the dressing and wash the wound with soap and water.
- Apply a sterile dressing or bandaid.
- Inform a parent or guardian. Advise them to check on the student's last tetanus shot. Advise them to have the student seen by their health care provider if the wound will not stay closed or may need stitches.
- Clean and disinfect any surfaces that came in contact with blood.

Amputation of a Finger (or Other Body Part)

Have someone call 911. Apply direct pressure to the wound for at least five minutes to help stop the bleeding.

- Put on non-latex disposable gloves and follow standard precautions for exposure to blood and body fluids.
- Have the student lie down. Watch for signs of shock.
- If the finger or other body part is still attached, keep it in a normal position as you apply pressure.
- Use sterile dressings over the wound while you apply pressure. If blood seeps through, add more dressings—do not remove them.
- Have someone notify the school nurse, if available, especially when the bleeding is serious.
- If bleeding is hard to control, keep pressure on the wound, and also use your fingers to squeeze the pressure point on the inside of the upper arm just above the elbow. If the injury is on the lower body, press the palm of your hand on the pressure point at the top of the leg near the groin.
- If the finger or body part is detached, wrap it in clean gauze, put it in a plastic bag and put the bag on ice. The part should not be frozen or submerged in ice or water. Give it to the emergency medical team when they arrive.
- Inform a parent or guardian. If the student is being transported to a hospital or medical facility, ask the parent to accompany the student or meet at the medical facility.
- If not transported, advise parents to have the student seen by their health care provider.
- Clean and disinfect any surfaces that came in contact with blood.

Swallowing Poison

If the student is unresponsive, have someone call 911. Have someone notify the school nurse, if available.

- If the student is responsive, gather information and call the Washington Poison Center, 1-800-222-1222.
- Information to give to the Poison Center includes:
  - Age and weight of the student.
  - What was swallowed, the amount swallowed, and when.
  - The student's condition.
- If the student is responsive, gather information and call the Washington Poison Center, 1-800-222-1222.
- Inform a parent or guardian. If the student is being transported to a hospital or medical facility, ask the parent to accompany the student or meet at the medical facility.

Inhaling Poison

Make sure the scene is safe before you remove the student from the toxic area. Don't become another victim. If the student is unresponsive, have someone call 911. Have someone notify the school nurse, if available.

- If the student is responsive, gather information and call the Washington Poison Center, 1-800-222-1222.
- Follow the Poison Center's instructions.
- Inform a parent or guardian. If the student is being transported to a hospital or medical facility, ask the parent to accompany the student or meet at the medical facility.

Bees, Insects, Spiders, Ticks

Watch the student carefully for allergic reactions to insect stings. Call 911 if the student struggles to breathe or if the student is known to have severe allergic reactions. Call 911 if you know the bite is from a black widow or brown recluse spider. Have someone notify the school nurse, if available.

- Students with severe allergies should have an emergency care plan for taking medications and dealing with severe symptoms. Follow the plan.
- Keep the student calm and quiet. Keep the student from moving around.
- Remove the body and stinger of an insect, but do not squeeze. Scrape it out with a credit card, driver's license, or similar stiff card.
- If possible, capture the spider for identification.
- Use tweezers to pull out a tick. Grasp the head and body with the tweezers and lift it in the direction it entered. Hold it there until the tick lets go. This may take several seconds. Do not twist or jerk it out. Save the tick, if possible, for identification.
- Wash the bitten area with soap and water.
- Apply a sterile dressing or bandaid as needed.
- To reduce pain and swelling, place a cold pack wrapped in a cloth over the bitten area.
- Watch for allergic reactions.
- Inform a parent or guardian. Advise them to consult with their health care provider.

Nosebleeds

Most nosebleeds can be stopped by pinching the nostrils for five minutes. Do not tilt the head back. Inform a parent or guardian about the nosebleed.

- Put on non-latex disposable gloves and follow standard precautions for exposure to blood and body fluids.
- Keep the student sitting up.
- Pinch the soft parts of the nose together and gently press the nose against the bones of the face. If possible, have the student do this.
- Hold for a full five minutes—do not peek.
- If available, place a cold pack or ice bag wrapped in a cloth on the nose and cheeks.
- After five minutes, release the pinch slowly. Reapply pressure for longer than five minutes if bleeding starts again.
- Have the student sit quietly for 10 to 20 minutes and tell him or her to avoid blowing or touching the nose.
- If bleeding is severe and cannot be controlled, call 911. Notify the school nurse, if available.
- Clean and disinfect any surfaces that came in contact with blood.

Punctures, Scrapes, Splinters

For deep wounds or large splinters notify the school nurse, if available, especially when the wound is serious. Do not try to remove the object. Call 911 if the wound is severe.

- Put on non-latex disposable gloves and follow standard precautions for exposure to blood and body fluids.
- Clean the injury thoroughly and apply a sterile dressing or bandaid as needed.
- **For minor punctures:** Do not try to pick out debris. Soak or wash in water. Do not use soap.
- **For scrapes:** Apply pressure with gauze or a sterile dressing to stop bleeding, then wash the wound with soap and warm water.
- **For splinters:** Remove small slivers close to the surface and wash the area with soap and warm water.
- Inform a parent or guardian, and advise them to check with their health care provider if further treatment is needed and to check on the student's last tetanus booster.
- Clean and disinfect any surfaces that came in contact with blood.

Animal Bites

Make sure the scene is safe. Have someone call 911 if the bite is serious, if there is uncontrolled bleeding, or if it involves a wild animal. Have someone notify the school nurse, if available, especially when the bite is serious.

- Put on non-latex disposable gloves and follow standard precautions for exposure to blood and body fluids.
- Wash minor wounds with soap and water.
- For serious bites, follow the instructions for controlling bleeding, swelling, and infection.
- Cover with a bandage or dry dressing.
- Note the details of what happened, get descriptions of the animal and its possible owner, and where the animal might be.
- Biting incidents must be reported immediately to the local health jurisdiction. Even if there is no obvious bite, contact with a wild animal should be reported immediately to the local health jurisdiction.
- Inform a parent or guardian. Advise them to consult with their health care provider immediately and check on the student's last tetanus shot.

Human Bites

Make sure the scene is safe. Have someone call 911 if the bite is serious or if there is uncontrolled bleeding. Have someone notify the school nurse, if available, especially when the bite is serious.

- Put on non-latex disposable gloves and follow standard precautions for exposure to blood and body fluids.
- Treat the same as animal bites.
- Wash with soap and water.
- Inform a parent or guardian. Advise them to consult with their health care provider.

Seizure without Convulsions (Petit Mal)

Make sure the student is in a safe place to avoid injury. Have someone notify the school nurse, if available.

- The student may have a blank look, be unable to speak or move, act in odd ways, chew or smack lips, or fiddle with clothing.
- Note about how long the seizure lasts.
- Stay with the student and be reassuring. Convulsions may follow.
- Let the student rest.
- Follow the student's individual health plan if there is a history of seizures.
- Inform a parent or guardian. Advise them to consult with their health care provider.

Swelling and Bruises

To control swelling, place a cold pack or ice bag wrapped in a cloth over the injury. Call 911 if there are signs of a deeper injury or if the cause of the swelling is a severe crush injury, where the body part was squeezed or caught between two hard surfaces. Have someone notify the school nurse, if available, especially when the swelling or bruise is serious.

- Wrap the area of the injury in stretchy gauze or elastic bandages. Leave the tips of fingers and toes exposed so you can tell if the area is wrapped too tightly.
- Elevate the injury unless you suspect a broken bone or crush injury.
- Do not put ice directly on the skin.
- Inform a parent or guardian, and advise them to check with their health care provider if further treatment is needed.

Blisters

Do not open or pop a blister. Protect the blister with a bandaid or sterile dressing. This will help keep it from opening for as long as possible so the area can heal.

- If the blister has opened, put on non-latex disposable gloves and follow standard precautions for exposure to blood and body fluids.
- Wash the area with soap and warm water. Let it air dry.
- Apply a bandaid or sterile dressing.
- Inform a parent or guardian. Advise them to check with their health care provider if the blister is inflamed or larger than a quarter.

Skin Infections and Open Sores

Do not touch sores. Cover the sore with a bandage taped on all sides. Notify the school nurse, if available, especially when the infection or sore is serious.

- Put on non-latex disposable gloves and follow standard precautions for exposure to blood and body fluids.
- Have the student wash hands frequently or use alcohol-based sanitizer if soap and warm water are not available.
- Avoid contact with any pus or fluid.
- If the sore is leaking fluid, put on extra bandages or dressings taped on all sides.
- Inform a parent or guardian. Advise them to consult with their health care provider.
- Everyone who has come in contact with the skin infection should wash their hands, including the student with the infection.
- Clean and disinfect any surfaces that came in contact with the infection.
- Dispose of contaminated items in a plastic bag and label it.
- The student does not need to be removed from school unless the infection cannot be covered by a bandage or fluid cannot be contained in a bandage.

Seizure with Convulsions (Grand Mal)

Lay the student on his or her left side on the floor. This helps keep the airway clear. Never put anything in the student's mouth. Have someone notify the school nurse, if available, especially when the seizure is serious.

Call 911 if:

- The seizure lasts for more than three to five minutes.
- The student has trouble breathing.
- The student is seriously injured.
- The student has never had a seizure before.
- There is a second seizure.

- The student may have an early warning of a seizure (known as an aura) or may shout and fall down.
- Move toys and furniture out of the way so the student won't get injured.
- Protect the student's head with a towel, blanket, or clothing. Or slide your palm under the head to protect it. Be careful not to put yourself in danger.
- Loosen tight clothing.
- Note about how long the seizure lasts. Note the body parts that are affected. Your detailed description can be important for the health care provider.
- Follow the student's individual health plan if there is a history of seizures.
- Let the student rest.
- Do not try to restrain the student or stop the convulsions.
- Inform a parent or guardian. Advise them to consult with their health care provider.

Loss of Consciousness and Fainting

There are many possible causes for the loss of consciousness. Try to determine the cause. Fainting is a loss of consciousness that is not caused by an injury. Fainting typically lasts for less than a minute. Call 911 if the student remains unresponsive for more than a minute. Have someone notify the school nurse, if available.

- Lay the student on his or her back and check for breathing.
- If not breathing, go to page 10 and follow the steps for Not Breathing.
- Prop the legs up on a pillow or rolled towel to increase blood flow to the brain.
- Loosen tight clothing.
- Give nothing by mouth.
- Write down details of what happened, including the amount of time the student was unconscious, possible cause, and other signs or symptoms.
- Inform a parent or guardian. Advise them to consult with their health care provider.

Possible causes:

- Diabetic condition or low blood sugar
- Not eating
- Dehydration
- Injury or blood loss
- Allergic reaction or poisoning
- Holding one's breath or hyperventilating
- Fatigue or illness
- Standing for a long time
- Being too warm
- Use of drugs or alcohol
- Stress, fear, emotional upset
- Heart problems

Back and Neck Injuries

Do not move the student. Have someone call 911. Have someone notify the school nurse, if available. Make sure the student stays still, but don't struggle to hold the student down. Keep the student warm and safe from further injury. Watch for signs of shock.

- Encourage the student to remain still and calm until the emergency medical team arrives.
- Do not raise the legs if you suspect a back or neck injury.
- Inform a parent or guardian. If the student is being transported to a hospital or medical facility, ask the parent to accompany the student or meet at the medical facility.

Broken Bone, Dislocation, Sprain, Strain

Have someone call 911 if the injury is serious. For example, if bleeding is severe, if the student is unresponsive, or if the student is unwilling to move a large body part. Have someone notify the school nurse, if available, especially when the injury is serious. Watch for signs of shock.

- If the broken bone is coming through the skin, put on non-latex disposable gloves and control the bleeding. Apply pressure with sterile dressing. Do not move the ends of the bone.
- If the student must be moved, a splint helps prevent further injury. Use a folded blanket, magazine, or cardboard to support the injured part.

For minor injuries standard first aid is:

- **Rest:** Find a comfortable position for the student, sitting or lying down. Encourage the student to remain still.
- **Ice:** Place a cold pack or ice bag wrapped in a cloth over the injured area for periods of 20 to 30 minutes.
- **Compression:** Wrap the injured area with an elastic bandage. Be sure it isn't too tight.
- **Elevation:** Use pillows to stabilize the injured part above the level of the heart.

- Inform a parent or guardian. If the student is being transported to a hospital or medical facility, ask the parent to accompany the student or meet at the medical facility.

Head Injury (Concussion)

Notify the school nurse, if available, especially for a serious head injury. Inform a parent or guardian and advise them to consult with their health care provider immediately. Watch for loss of consciousness or seizure. Call 911 if the head injury is severe and there are signs of shock.

- Look for signs of a concussion.
- Try to determine the cause of the head injury. Even slight bumps can cause a concussion and have serious effects.
- Keep watching for any signs of concussion.
- Keep the student dry and warm and watch for signs of shock.
- Place a cold pack or ice bag wrapped in a cloth on the injury for 10 to 15 minutes to reduce swelling.
- Do not allow the student to continue to participate in sports or physical activities if there is reason to suspect a concussion.

Signs of concussion:

- Confusion
- Difficulty or slowness in walking, speaking, or balancing
- Pale and sweaty skin
- Severe headache
- Blurred vision
- Nausea or vomiting
- Loss of bowel/bladder control
- Unusual sleepiness
- Change of personality
- Being unable to recall events

Washington State Department of Health

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Health Education Resource Exchange Web Team

PRINTING SPECIFICATIONS

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