

PROTOCOL FOR THE SCHOOL NURSE

EMERGENCY PHONE NUMBERS

908-753-1200

GLASSBORO PUBLIC SCHOOLS

MEDICAL STANDING ORDERS

908-753-1200	Police Department
908-753-1200	Police Control Center
908-753-1200	Police Department
908-753-1200	Police Department
908-753-1200	Police Department
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908-753-1200	Police Department

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IF IT IS DETERMINED THAT IMMEDIATE ATTENTION IS NECESSARY FOR A STUDENT, AND THE PARENT/GUARDIAN OR OTHER CONTACTS ON THE EMERGENCY MEDICAL CARD ARE UNABLE TO TRANSPORT THE STUDENT TO THE HOSPITAL, AN AMBULANCE WILL BE CALLED AND AN ADMINISTRATOR, OR DESIGNEE SHALL ACCOMPANY THE STUDENT.

IMMEDIATE AID

- Nurse shall begin whatever is necessary to aid the patient.
- Notify the office of an emergency and of any action that has been taken.
- Keep calm and attempt to calm the patient.

NOTIFICATION OF PARENT/GUARDIAN

Parents/Guardians will be notified if time permits. In cases of extreme emergency, when parents/guardians of other persons designated by the parents/guardians cannot be contacted, the school acting in place of parent/guardian assumes responsibility for transportation to hospital via ambulance.

Continued efforts will be made to notify parents/guardians/designees of emergency situation.

HEALTH PROBLEM	PROTOCOL
ABDOMINAL PAIN	<ul style="list-style-type: none">• Check for history of nausea, vomiting, diarrhea, constipation, food ingestion, appendectomy, dysuria, foul discharge, menstrual history (female).• Take temperature.• Encourage to use bathroom• Palpate abdomen gently to determine location of pain. Listen with stethoscope, as needed• Call parent/guardian and advise medical care if fever or significant pain persists.• Frequent complaints should be called to parents' attention
ANAPHYLAXIS/SEVERE ALLERGIC REACTION	<p>SYMPTOMS: breathing difficulty, shortness of breath, violent cough, cyanosis, fever, convulsions, collapse, other anaphylaxis symptoms:</p> <ul style="list-style-type: none">• Assess respiratory status, observe for difficulty breathing.• Inquire re: possible exposure to allergen, such as insect sting or food.

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	<p>directives on how to proceed.</p>
BITES (ANIMAL/HUMAN)	<ul style="list-style-type: none"> • Wash gently and thoroughly with soap and water/apply antiseptic as needed. • Cover with sterile dressing/ band-aid. • Check date of last tetanus shot (5 to 10 years). • Advise parent and urge medical attention if skin is broken. • Consider notification to parent of child who bit, due to possible risk of bloodborne pathogen transfer. • If bite is severe, call ambulance. <p>IN CASE OF ANIMAL BITE:</p> <ul style="list-style-type: none"> • Call local Health Department promptly. • Make every effort to have animal confined for observation and call appropriate officials.
BLEEDING-small cuts and abrasions	<ul style="list-style-type: none"> • Wash gently and thoroughly with soap/water or antiseptic. • May apply antibiotic ointment (e.g. Bacitracin) as needed. • Cover with band-aid or other sterile dressing. • May apply cold pack if needed.
BLEEDING- Internal (suspected)	<ul style="list-style-type: none"> • Keep patient warm and lying down • Maintain open airway • Observe for signs of shock. • Do not give anything to eat/drink. • Contact 911 and call parent/guardian.
BLEEDING- Severe/external	<ul style="list-style-type: none"> • Maintain Universal Precautions • Contact 911 and call parent/guardian • Apply dressing over wound until bleeding stops • Apply dressing and bind in place • Elevate area of wound, if possible. • Apply cold pack to area of wound.
BLISTERS	<ul style="list-style-type: none"> • Carefully cleanse with soap and water or antiseptic. • Avoid breaking blister. • Cover with clean dressing. • If blister broken, treat as an abrasion.
BURNS (Chemical)	<ul style="list-style-type: none"> • Flush area thoroughly with cold water for at least five minutes. Do not use a strong stream of water if this can be avoided. • Apply cold, wet compress to area for 5-10 minutes. • Leave uncovered , if possible. • Seek medical attention as needed and notify parent/guardian.
BURNS (Other)	<ul style="list-style-type: none"> • Apply cool, wet compress or immerse in cool water for 5-10 minutes. • If minor, may apply Vitamin E, ice, or anesthetic spray as

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	<ul style="list-style-type: none"> • Contact local Health Department for advice on how to proceed and report if disease is mandated as reportable. • Contact School Physician as needed.
CONTUSIONS	<ul style="list-style-type: none"> • Apply Ice to bruise for 10- 15 minutes.
CONVULSIONS (Seizures)	<ul style="list-style-type: none"> • Help student to floor to prevent falling. • Remove sharp objects from area surrounding student. • Turn student gently on side to assist breathing and prevent aspiration. • Do not place anything in student's mouth. • Do not restrain or hold student down. • Loosen tight clothing. • Stay with student until seizure is finished. Allow student to rest after seizure. • Note any seizure history. • If seizure lasts longer than 5-10 minutes or if student experiences difficulty breathing, call 911 • Administer any prescribed medication for student with seizure history. • If cyanotic, may give oxygen 1-5 liters per minute. • Notify parent/guardian.
DIABETES (Diabetic coma from hyperglycemia)	<p>SYMPTOMS: dry mouth, intense thirst, vomiting, sweet breath, air hunger, gradual onset.</p> <ul style="list-style-type: none"> • For actual diabetic coma, call 911 immediately and notify parents. • Refer to individual student medical orders for management of diabetes and hyperglycemia
DIABETES (Insulin Shock- from hypoglycemia)	<p>SYMPTOMS: sudden onset of drooling, intense hunger, normal or shallow respirations, tremors.</p> <ul style="list-style-type: none"> • Give sugar such as fruit juice, soda, sugar water, cake icing, gluco-burst, glucose tablets. • Follow-up with a complex carbohydrate such as crackers, grains, beans, root vegetables as available. If no improvement, seek further medical attention. • Notify parents/guardians of incident • Refer to individual student medical orders for management of diabetes. • If child unconscious or unable to eat or drink administer Glucagon if ordered by child's medical provider and call 911
DISLOCATION	<ul style="list-style-type: none"> • Do not attempt to put back in place. • Secure parts in comfortable position with sling or splint. • Apply ice. • Notify parents/guardians and secure further medical care.

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	<ul style="list-style-type: none"> • If conjunctivitis looks likely, notify parent/guardian and urge prompt medical care. • Exclusion from school for possible conjunctivitis, at discretion of school nurse. • Advise against mascara, eye liner, contacts when eyes are irritated. Advise cleaning of glasses.
EYES- Wounds/Bruises	<ul style="list-style-type: none"> • Apply Ice/cold pack to prevent hemorrhage • Apply eye patch, as needed, • Assess for visual compromise. • Notify parent/guardian and suggest medical attention, as needed.
FAINTING	<ul style="list-style-type: none"> • Keep student lying flat with knees bent until recovered. • Loosen clothing around neck and waist. • May use Ammonia inhalant, as needed. • Check Vital Signs. • Give nothing by mouth. • Apply cool compress to head. • Notify parent and advise further medical attention, if needed.
FEVER	<ul style="list-style-type: none"> • Conduct physical assessment of student • Inquire about recent history of any illnesses and about student status over past 24 hours. • Inquire about any medication taken before coming to school. • Assess onset of symptoms and current family illnesses. • Exclude from school if fever is 100 degrees or more. • Notify parent.
FRACTURE- Simple Fracture	<ul style="list-style-type: none"> • Keep person warm and in comfortable position. • Obtain history of incident. • Apply cold pack over affected area. • Be careful not to move injured part in a manner that would cause further injury. • Notify parent/guardian and advise prompt medical care.
	<ul style="list-style-type: none"> • FOR TRANSPORTATION- immobilize with splint or sling- <ol style="list-style-type: none"> 1. IF LEG INJURY- avoid weight bearing. 2. IF BACK INJURY- call ambulance 3. IF NECK INJURY- call ambulance
FRACTURE- Compound Fracture	<ul style="list-style-type: none"> • Control bleeding with direct pressure (Severe bleeding) • OTHERWISE- DO NOT DISTURB WOUNDED AREA • Cover with sterile dressing/ apply ice • Have student lie down and cover for warmth

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	<ul style="list-style-type: none"> • Allow to rest in Nurse's Office with air conditioning. • May give fluids as tolerated. • Notify parent and advise prompt medical care.
HEAT STROKE	<p>SYMPTOMS- High temperature, hot, dry skin</p> <ul style="list-style-type: none"> • Apply wet, cool towels to body. • Keep in shade or in air conditioning in Nurse's Office. • Seek immediate medical attention- CALL AMBULANCE • Notify parent/guardian.
HEMORRHAGE-(Severe Cut)	<ul style="list-style-type: none"> • Control bleeding with pressure and apply pressure dressing. • Elevate affected area, if possible. • Apply ice to affected area, as needed. • Call Ambulance • Notify parent/guardian.
INSECT BITE	<ul style="list-style-type: none"> • Apply bactine, caladryl or other anti-itch treatment as needed.
MOUTH PROBLEM-(toothache, sore gum)	<ul style="list-style-type: none"> • Assess affected area. • May apply Ora-jel, Anbesol, Campho-Phenique, etc. to affected area. • May rinse with warm water or salt water gargle • May apply cold pack to outer mouth. • Note any tooth decay • Notify parent/guardian, as needed. Advise dental follow-up as needed
MOUTH PROBLEM-(bumped mouth)	<ul style="list-style-type: none"> • Assess affected area. Note any abnormalities of teeth, gums, lips, etc. • Inquire re: how problem occurred.
NOSEBLEED	<ul style="list-style-type: none"> • Place patient in sitting position with head erect and slightly forward. • Inquire re: history of frequent nosebleeds, spontaneous or impact nose bleed. • Apply pressure to nose on anterior portion of nostrils and maintain by squeezing firmly for 5 minutes by the clock (patient to be sitting up). • Observe student. • If not quickly controlled, apply cold compress to bridge of nose. • If unable to control nosebleed, notify parent/guardian and advise further medical attention.
Piercing problem	<ul style="list-style-type: none"> • Assess site • Apply alcohol or other antiseptic • Notify parent/guardian if site looks infected for to advise further medical care.

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	<ul style="list-style-type: none"> • Cover and keep warm, but do not cause sweating. • Elevate head only if there is difficulty breathing. • Seek medical attention (call 911) and notify parent/guardian.
SORE THROAT	<ul style="list-style-type: none"> • Check temperature • Check for cervical nodes, exudate, throat inflammation • Check for recent history of strep throat in student, family, classmates • If no fever, may offer salt water gargle (1/4 tsp. salt to 4 oz. water). • If multiple STREP THROAT OR SCARLET FEVER cases in class, school, community, advise parent/guardian and encourage further medical attention. • If multiple cases of STREP THROAT OR SCARLET FEVER in student's classroom, encourage parent to have child strep tested. • Refer to Communicable Diseases Manual for guidance on how to proceed if probably Strep Throat or Scarlet Fever • Notify local Health Department if <u>outbreak</u> of STREP THROAT OR SCARLET FEVER present.
SPLINTER	<ul style="list-style-type: none"> • Inquire as to how student got splinter and whether from home or school. • Cleanse area and remove if superficial. • If deeply embedded, do not remove, cover with dressing, and notify parent/guardian and advise medical attention.
STY	<ul style="list-style-type: none"> • Apply warm compress, as available for 10 minutes.
SUDDEN CARDIAC ARREST	<ul style="list-style-type: none"> • SEE SUDDEN CARDIAC ARREST ACTION PLAN (ENCLOSED)
TICK- Removal of	<ul style="list-style-type: none"> • Use pair of tweezers with very thin ends and grasp tick as close as possible to skin. • Slowly pull tick straight out, gently but firmly with even, steady pressure. • Take care not to squeeze tick body so as not to inject contents of tick into patient. • Cleanse skin well with alcohol/antiseptic/peroxide. • Notify parent/guardian of tick removal. • If unable to remove all/part of tick, advise parent/guardian and advise further medical attention.
TOOTH- Broken or Knocked out	<ul style="list-style-type: none"> • Rinse mouth with water. • Save tooth in WARM SALINE CLOTH, MILK OF MAGNESIA (MOM), SAVE A TOOTH KIT, MILK. • Notify parent/guardian so they may contact dentist

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SOLUTION	lenses.
DISPENSING OF COUGH DROPS/THROAT LOZENGES TO STUDENTS	<ul style="list-style-type: none"> • Students may have one cough drop/or throat lozenge every two hours as needed, upon request, for cough or sore throat.
INJECTION WITH EMERGENCY EPINEPHRINE	<ul style="list-style-type: none"> • Nurse may administer emergency Epinephrine (appropriate to patient weight) to any student or staff member who appears to be experiencing a severe allergic reaction due to contact with an allergen or who may be exhibiting signs of anaphylaxis. Glassboro Board of Education will purchase emergency epinephrine for each school building. Medication will be located in a location designated by the school nurse of the respective building.
Use of Robi-comb	<ul style="list-style-type: none"> • A RobiComb may be used to assist in detection of live head lice when doing head checks.
Medication Standing Orders for 6th grade Camping Trip	<p>The following over-the-counter medications may be administered with parental consent on the 6th grade camping trip:</p> <ul style="list-style-type: none"> • Tylenol/Acetaminophen 325 mg: Two tablets every 4 hours, as needed for pain or fever. For student weighing less than 100 pounds: Adjust dose to 15 mg/kg. • Motrin/Ibuprofen/Advil 200 mg: Two tablets every 6 hours as needed for pain or fever. For student weighing less than 100 pounds: Adjust dose to 10 mg/kg. • Benadryl 25 mg: One tablet every 4 hours as needed for allergies and/or allergic reaction.
AUTOMATED EXTERNAL DEFIBRILLATOR (AED) PROTOCOL	<ul style="list-style-type: none"> • As per attached protocol
USE OF AMBU BAG (BAG-VALVE-MASK) UNIT	<ul style="list-style-type: none"> • As per American Heart Association current guidelines
SUDDEN CARDIAC ARREST	<ul style="list-style-type: none"> • As per • SUDDEN CARDIAC ARREST ACTION PLAN (ENCLOSED)

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Nurse:

- Report to location of emergency and assess
- Activate MERT
- Designate/or call 9-1-1 (see script below)
- Insure the AED from the wall box was brought to the site of the emergency
- Coordinate the emergency protocol
- Support the MERT during the emergency
- Continue emergency protocol until EMS arrives
- Communicate with EMS, upon arrival the nature of the emergency providing vital signs, history, length of unconsciousness, etc

MERT/CPR members:

- Evaluate the situation for safety and determine unresponsiveness of the victim
- Record event on the "Event Checklist", found with the AED or inside AED case
- Call 911 upon direction of school nurse
- Perform all aspects of CPR as trained
- Retrieve AED as needed
- Upon arrival of the AED, apply pads to victim and follow voice prompts.
- Continue CPR as directed until EMS arrives
- Additional supplies may be required to be brought to the site of emergency at the direction of the nurse, principal or designee
- Assist emergency responders in getting to the individual experiencing the sudden cardiac event

Secretary/main office personal:

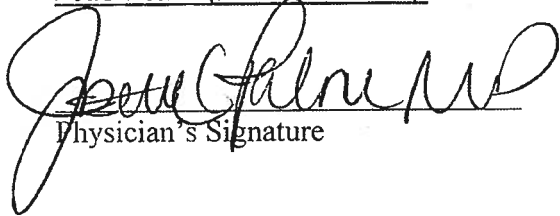
- Notify an administrator when the emergency call comes in
- Coordinate with administrator for any additional needs required by MERT (copy the student's emergency card, additional staff to cover classrooms, supplies required etc)
- Insure the AED from the wall box was brought to the site of the emergency
- Call 9-1-1 only if directed to from the site of the emergency
- Await the EMS and escort them to the location of the emergency

9-1-1 script

"Hello, this is _(STATE YOUR NAME)_ at _(SCHOOL NAME)_ address is _____. We have an unconscious (ADULT/CHILD) experiencing a cardiac arrest. CPR and AED have been initiated by our school's medical emergency response team. We will have someone waiting for EMS at the front door of the school"

I approve of Medical Standing Orders for Glassboro Public Schools for the year

2015-2016- (9/1/15- 8/31/16).


Physician's Signature

7/29/15
Date

Superintendent's Signature

Date