

Introduction

This handbook is designed to give the staff of Wilton Public School some guidelines to use when dealing with injuries or medical emergencies. All staff must realize that they are not expected to be, or do the job of trained professionals. Emergencies cannot be put into neat definitions and each situation must be treated individually. Our hope is that this guide will help staff make decisions that will prevent further injury or problems stemming from any incident.

Emergency Action Steps

- Check the scene for safety and the victim for consciousness and breathing.
- If the situation is an emergency, send someone to the office to call 911.
- If the situation is not an emergency, send someone to the office and call the victim's parent.
- Care for any conditions that you find.
- Stay with the victim at all times. Never leave them alone.
- Only relinquish care to trained professionals. Do not stop giving first aid to the victim until help arrives.

911

When calling 911, be prepared to give the following information:

- Telephone number from where you are calling.
- Type of emergency.
- Address/location of emergency.
- Number of injured persons and care being provided.
- Directions to the site of the emergency.
- Whether or not an ambulance will be needed.

Rescue Breathing

- Place the person on their back
- Open the airway: Tilt head back with one hand on the forehead and one hand on the chin; clear anything in the mouth blocking the airway.
- Check breathing: Look, listen and feel for breathing for about 5 seconds. Look to see if the person's chest rises, and listen for breathing by placing your ear close to the person's mouth and nose.
- No breathing: Give 2 slow breaths by pinching the person's nose shut and breathing into person's mouth until chest rises. Release the nose between breaths. Continue until help arrives.
- If the chest does not rise, see the "Choking" section of the handbook.

Adult CPR

- If there are no life signs after completing the rescue breathing steps: Provide CPR.
- Place the heel of your hand on the lower half of the breastbone between the nipples.
- Place your other hand on top of the first hand.
- Position shoulders directly over hands.
- Compress the victim's chest 30 times about 2" deep.
- Re-open airway, give 2 breaths.
- Repeat. Recheck for signs of breathing and life signs after about 1 minute.
- Continue this pattern until an AED becomes available and/or emergency medical personnel arrive.

Accidents

Minor Injuries: Give first aid or temporary care as needed. Call or send a responsible student to the office to notify the administration. The office will contact parents if it's necessary to take the child to the doctor. Report the injury on an accident report form. Never leave the victim alone.

Major Injuries: Give first aid and temporary care. Call or send a responsible student to the office to notify the administration. The office will contact parents and call 911. Do not move the injured person unless there are safety issues. Move uninjured students to the nearest supervised location.

Allergic Reaction from Bites, Stings and other

- If the victim has trouble breathing, call 911.
- Keep the person resting quietly and comfortable.
- Ask the person if he/she carries medication. If so, read the directions carefully and administer medication.
- Apply cold compress to the bite. DO NOT apply ice directly to the skin. Monitor airway and breathing. If person stops breathing, begin rescue breathing immediately and check for signs of life. If no signs of life are present, begin CPR.

Bleeding

- Cover the wound with a clean cloth or dressing and apply pressure. Press hard enough to stop the bleeding.
- Elevate the injured area level with the heart if you do not suspect any broken bones.
- Cover dressing tightly with a bandage. If the dressing becomes soaked with blood, leave it on and apply another dressing on top of it.
- **DO NOT USE A TOURNIQUET**
- If the bleeding does not stop, call 911.

Nose bleeds: Have the person sit up, lean forward and pinch nostrils together until the bleeding stops.

Gaping wounds: may need stitches. If you can get the bleeding to stop, call the parents. If the bleeding does not stop, call 911.

Amputation: Place the detached part in a plastic bag, tie the bag, put it in a container of ice water and send bag to hospital with victim.

Bone and Joint Fractures

Always suspect a fracture. Do not move the injured area. Support the injured area both above and below the site of the injury. Do not attempt to straighten the injury or push in the exposed bone. Splint an injury only if a person MUST be moved. Splint an injured limb in the position found.

Burns

Stop Burning: Stop burning by removing person from the heat source. If a person is on fire, roll him/her in a blanket or coat or douse with water.

Cool Burn: Cool the burn by flushing with large amounts of cool to lukewarm water for a minimum of 10 minutes. DO NOT apply butter to a burn. If it is a chemical burn, wash the area immediately with large amounts of water for at least 20 minutes. Remove all contaminated clothing and/or jewelry.

Cover Burn: Cover the burned area with a sterile dressing. Do not break blisters. Do not apply ointments or creams.

Call 911 in the following situations:

- Burns that cause difficulty in breathing.
- Burns around the mouth and nose.
- Burns covering more than one part of the body.
- Burns on the head, neck, hands, feet or genitals.
- Burns on a child, elderly person, or persons with medical conditions.
- Burns resulting from chemicals, explosions, or electricity.

Choking

Conscious Person:

- If the person can speak, cough, or breathe: Encourage them to cough and do not interfere with him/her.
- If the person cannot speak, cough or breathe: Make a fist with one hand, place the thumb side of the fist against the middle of the person's abdomen, just above the belly button. Grab your fist with the other hand and give quick, upward thrusts.

Unconscious Person:

- Place person on his/her back.
- Open the person's airway and check for breathing for about 5 seconds.
- If the person is not breathing, give 2 breaths.
- If the breaths do not go in, reposition the airways and try the 2 breaths again.
- If the breaths still do not go in, the airway is blocked.
- Give 15 chest compressions. Place the heel of your hand at the lower end of the person's breastbone, just above the notch where the ribs meet. Place your other hand on top of the first hand and compress the chest straight down, about 2 inches.
- Open the person's mouth and look for a foreign object. If you see an object, sweep it out.
- Give 2 breaths.
- Continue cycle of 15 compressions, foreign body check, and 2 breaths until the airway is cleared and breaths go in or until help arrives.

Cold Emergencies

Frostbite:

- Move the person to a warm place.
- Remove wet clothing and jewelry from affected area.
- Soak frostbitten area in warm (NOT HOT) water.
- Cover affected area with dry, sterile dressings-do not rub the area.
- Do not re-warm a frostbitten area if there is danger of it refreezing.

Hypothermia:

- Move person to a warm place.
- Remove wet clothing and cover with blankets.
- Give person small amounts of a warm drink.
- Call 911 if person's condition does not improve.
- Check for breathing and signs of life. If none, begin rescue breathing or CPR.

Diabetic Emergencies

Signs and Symptoms:

- Confusion, dizziness, disorientation
- Sweating, shakiness
- Abnormal pulse and palpitations
- Trouble breathing

Care:

- If a person is conscious, give some form of sugar (juice (in kitchen cooler), soda, sugar cubes).
- Call 911 if a person is unconscious or doesn't feel better after sugar.
- Do not give anything to eat or drink if person is unconscious.
- Monitor airway and breathing.
- Keep person calm and comfortable. Be reassuring.

Drug Overdose

- Call 911
- Have drug containers available for medical personnel.
- Check for breathing and signs of life. Begin CPR and rescue breathing if necessary.
- Person may vomit. If unconscious, place person in a sitting position or on their side.
- Do not give person anything to eat or drink.
- Be careful to protect yourself and others.

Eye Injuries

Foreign Object in Eye:

- Instruct person not to rub eye.
- Have him/her pull upper eyelid over lower eyelid for tears to wash out the object.
- Gently flush out the eye with plain water.
- Have person hold face under gently running water and blink eye open and shut.
- If object does not easily wash out, cover both eyes with dry gauze dressing and seek medical help.

Chemical Burn to Eye:

- Wash immediately, thoroughly, and repeatedly with large amounts of tap water for at least 20 minutes.
- This type of eye injury MUST be seen by a physician for further care.

Eye Wounds:

- Apply sterile gauze dressing loosely over both eyes.
- DO NOT attempt to remove embedded or penetrating objects.
- Keep person calm.

Fainting

If a person says he/she feels faint, have them sit in a chair with head lower than their knees, or have them lay down. If they have fainted, keep them lying down with legs elevated 10-12 inches. Even if they seem to be fully recovered, medical care should be sought.

Head, Neck and Back Injuries

- Do not move the person.
- Call 911 and have the person remain still.
- Keep head, neck, and spine in line by placing your hands on both sides of the person's head.
- Tell the person to avoid nodding and or shaking their head.
- Control any severe bleeding, but do not stop blood from nose or ears.
- Maintain an open airway and continue to check for breathing. If person vomits, clear their airway.
- Do not remove any headgear.

Heart Attack and/or Chest Pain

Signs and Symptoms:

- Persistent chest pain/discomfort.
- Mild to intense pressure, tightness, burning or squeezing in chest that is not relieved by resting, changing position, or taking medication.
- Pain may radiate to neck, jaw, shoulders, upper back, arms, or abdomen.
- Breathing difficulty, shortness of breath, or faster breathing. May include noisy breathing.
- Skin appearance is pale, bluish, moist, or sweating.
- Nausea, anxious, nervous, and/or feeling of impending doom, fainting, or near fainting.

Care:

- Call 911
- Have person stop activity and sit or lie down.

- Consider having person take ½ of an adult aspirin.
- Keep person comfortable and provide reassurance.
- Monitor airway and breathing. Begin rescue breathing or CPR if necessary.

Heat Emergencies

Move person to a cool, ventilated area and loosen or remove clothing. Wet the skin with cool (NOT ICE) water and fan the person. If person is conscious, give small amounts of cool water to drink. If person's condition does not improve or if person is very hot, call 911. Monitor airway and breathing. Begin rescue breathing or CPR as needed.

Poisoning

Signs and Symptoms

- Information from person or observer.
- Presence of container known to have poison or drugs in it.
- Sudden onset of pain or illness.
- Burns around lips or unusual breath odor.

Call the poison control center at 1-800-222-1222. Describe what the person took, how much, when, and what their condition is now. Follow poison control's direction.

Seizures

- Do not move or restrain the person's movements unless a dangerous object is nearby.
- Do not force objects into mouth.
- Loosen any tight clothing.
- Once the seizure stops, turn the person on their side and let saliva drain out and allow to rest.
- Call 911 if person has no history of seizures or has prolonged seizures or is injured.
- Check airway and breathing.
- Do not give person anything to eat or drink.
- Maintain body temperature by covering person lightly if needed.

Shock

Shock is a very serious condition that may develop from any serious injury or illness.

To help prevent shock:

- Have the person rest comfortably if possible. Keep the person lying down.
- Elevate the legs about 12 inches if you do not suspect any head, neck, or back injuries, or broken bones in the hips or legs.
- Keep person from getting chilled or overheated.
- Do not give person anything to eat or drink.
- Monitor airway and breathing. Begin rescue breathing and CPR as needed.

Stroke

Signs and Symptoms:

- Confusion, dizziness, or disorientation.
- Paralysis or weakness of face, arm, or leg-usually on one side.
- Difficulty with speech, vision, or walking.
- Severe headache.

Care:

- Call 911
- If patient is diabetic, treat also as a diabetic emergency.
- If not diabetic, do not give anything to eat or drink.
- Monitor airway and breathing.
- Keep victim comfortable.

Unconsciousness

- Check to see that patient is breathing and has signs of life. Begin rescue breathing or CPR if necessary.
- Keep patient in a resting position but slightly rolled to one side in case of vomiting.
- Cover patient only enough to keep from losing body heat.
- Loosen tight clothing.
- DO NOT leave patient.
- DO NOT allow patient to get up and walk around after regaining consciousness.

Universal Precautions

Disposable gloves will be worn when blood or body fluids are present. Soiled surfaces will be cleaned with disinfectant. Disposable towels should be used and mops will be rinsed with disinfectant. If a cloth towel is used it should be thrown away. All materials that have been used to care for or clean up blood or body fluids will be placed in a container or bag and labeled appropriately. Those who are cleaning or caring for wounds should avoid exposure of open skin lesions to blood or other body fluids. All staff must review Universal Precautions Procedures annually.

Emergency Phone Numbers

General Emergencies, Ambulance, Fire.....911

American Red Cross.....1-888-800-9259

Crime Stoppers.....701-224-8477

First District Health Unit.....701-462-3375

McLean County Courthouse.....701-462-8541

McLean County Social Services.....701-462-3581

McLean County Sherriff.....701-462-8103

MDU.....1-800-638-3278

National Suicide Prevention Lifeline
1-800-273-8255

Poison Control.....1-800-222-1222

Rape & Abuse Crises Hotline....1-800-651-8643

Sanford Health.....701-323-6000

St. Alexius.....701-530-7000

Washburn Clinic.....701-462-3396

Schools:

Wilton School.....701-734-6331

Washburn School.....701-462-3221

Wing School.....701-943-2319

AED Information

Purpose: Cardiovascular disease is the single greatest cause of death in the United States. Nearly half of those deaths are due to sudden cardiac arrest (SCA) in out-of-hospital settings, including the workplace. Prompt attention of the integrated skills of cardiopulmonary resuscitation (CPR) and automated external defibrillation (AED) provide victims of SCA with the greatest chance of survival. Therefore, the school district shall provide AED coverage when appropriately trained personnel are available.

Personnel Authorized to use AEDs: All of the staff members of Wilton School will be trained in CPR and in the proper use of the AED system. This training will take place every 2 years.

Location of AED: The AED will hang on the wall outside of the gym doors.

Responsibilities: The superintendent of Wilton School will be appointed as the AED Liaison for the school. The AED Liaison will be responsible for the overall supervision of the AED program. The AED Liaison will ensure that all staff maintain skill competency through AED review and additional training. The Liaison will also check the equipment monthly to ensure that it is available, clean, not outdated, and in good working order.

Procedure: In the event of an unresponsive individual on the grounds of the school district, the main office is to be notified. The main office will call 911 immediately. The personnel in the main office shall announce a “Code Blue” on the intercom system. At least two staff members shall go to the announced location of the patient, assess the patient and if necessary begin CPR. At least one other staff member shall bring the AED to the location of the accident

NOTE: Once the first responders are at the scene, the staff members will defer to the first responders unless it is absolutely necessary for the staff member to continue with the treatment. The staff members on the scene will be responsible for updating the first responders on what has been done up to that point.

Use of the AED: The protocol for using the AED will be established during the training. All staff should attend the training in order to be authorized to use the AED. If a staff member, for whatever reason, is not currently trained on the AED system, they will not be allowed to use it. Keeping training up-to-date is vital.

Review Process: After the AED is used, the information from the system will be downloaded by the AED Liaison. A report of the use of the AED will be completed and the Liaison will call a meeting of everyone involved in the incident. Included in the review shall be the identification of actions that went well and the collection of opportunities for improvement as well as critical incident stress debriefing.

Maintenance: Office personnel will do a daily check to make sure that the system is ready to use if needed. The AED Liaison will complete the monthly maintenance check list provided by the AED Company on the 1st of each month. Any problems shall be immediately reported to the AED Company. Any change in the availability of the AED system will be reported by the Liaison.