These regulations apply when a person-pupil, staff member, or visitor, on school premises or in the course of a school-sponsored event or field trip, is injured or becomes suddenly ill. The staff member in charge should act quickly but not hastily.

1. **The injury or illness should be reported immediately to the** school nurse, substitute nurse, or in their absence, the principal. The report may be made directly (over an intercom) or via another adult or pupil messenger.

2. **If it is clearly evident that the illness or injury is serious, potentially life threatening,** emergency medical services should be initiated by dialing 911.

3. **The victim should be examined for unresponsiveness, breathing, epilepsy, or anaphylaxis.**

4. **The victim should be checked for the presence of a necklace or bracelet that might identify a particular medical problem such as diabetes, epilepsy, or anaphylaxis.**

5. **The victim shall not be moved, except as may be absolutely necessary, to remove the person from a dangerous environment.**

6. **If responsive, the victim should be made as comfortable as possible, by removing binding clothing or providing warm coverage.** No food or liquid should be given to the victim.

7. **If the victim is observed to be unresponsive and either without pulse or respiration, CPR should be initiated as soon as possible by a certified individual.**

   - **Universal Precautions** should be used at all times when in contact with any blood or body fluids. This refers to proper use and disposal of gloves, masks, and one-way valves for resuscitation when necessary.
   - **Any Blood/Body fluid exposure should be reported at once to the school nurse and principal.**

**Abdominal Pain:**

**Take temperature.** If within normal limits encourage bathroom use. Permit student to rest for a short period, take a history of meals and recent bowel movements. Encourage eating if student had little or no breakfast/lunch, preferably during their snack or lunch times. Encourage drink of water. If unrelieved, refer to parent for instruction or follow-up with private physician.  **If fever is present (>100), refer to parent for follow up with physician.**

**Abrasions/Scratches:**

Wash with either soap and water, or mild antiseptic/analgesic such as Bactine. Apply band-aid if open abrasion and bleeding are present.

**Allergic Reactions:**

**Mild:** (swelling, itching, watery eyes, erythema) - wash area if possible, apply ice, and observe for worsening of symptoms.

**Moderate:** (hives) apply ice if possible, observe closely for at least 20 minutes, and notify parent. If indicated administer antihistamine medication as prescribed by private physician in writing.

**Severe/Anaphylaxis:** (respiratory distress or failure)

In the event of Anaphylaxis **not previously documented:** Administer Epi-Pen, if under 50 lbs. Epi-Pen Jr.
In the event of allergic reaction/anaphylaxis previously documented: Administer Epi-Pen or Epi-Pen Junior as indicated by family physician. **CALL 911.** Monitor closely. Administer CPR if necessary. Notify parent.

**Asthma Attack:**

Calm and reassure victim. If appropriate, administer inhaler or high-flow Nebulizer treatment as indicated by private physician’s written orders. **If no orders or medication are available, and respiratory distress is eminent, call 911 and notify parent.**

**Back/Neck Injury:**

Do not move. Lie flat. Assess level of consciousness, vital signs, and respiratory status. Immobilize head and neck as much as possible. Notify parents and call 911 if unable to move or changes in LOC or vital signs occur. Administer no medications. Monitor neurological status and vital signs closely.

**Bites:**

**Animal bites:** Cleanse wound with soap and water or antiseptic. Cover with band-aid or dry sterile dressing. Notify parents and refer to family physician (Tetanus may be needed). Identify the owner of the animal, if possible. All animal bites are to be reported to the Board of Health/Local Police Dept.

**Human bites:** Cleanse wound with soap and water or antiseptic. Cover with a clean, dry dressing. Notify parents. If skin is broken, refer to family physician (Tetanus may be needed).

**Insect bites:** Apply sting/itch relief product or caladryl/calamine lotion.

**Tick bites:** Use tweezers to remove tick. Grasp tick’s head as close to the skin as possible, and pull gently and steadily until detached. Cleanse area with soap and water or antiseptic. Save the tick by taping it to a piece of paper or index card. Notify parent that the tick has been removed, and that they may pick it up if they wish for testing.

**Bee stings:** **Identify for possible allergy/anaphylaxis in the Health Office.** Ask student if he/she has ever been stung before, and if so what happened. If no allergy develops apply sting/itch relief product and ice if necessary. Recheck in an hour. May reapply ice if necessary.

**Blisters:**

Do not break. Apply a light, protective dressing or band-aid. If blister ruptures on its’ own, cleanse with antiseptic and apply a dry sterile dressing.

**Bruises/Contusions:**

Apply ice and elevate area if possible. If severe, notify parent and advise follow up with family physician.

**Burns:**

**Chemical:** Flush with cool water for 15 minutes. Assess area. Seek appropriate medical attention. Notify parents.

**Heat:** Apply cool, wet cloth for 15 minutes. Elevate area.

**Sunburn:** Burn relief spray or aloe gel may be applied.

**First degree burns:** May apply burn gel or cool compress. Notify parent.

**Second or Third degree burns:** Apply sterile, non-adherent dressing only. Notify parent and refer to family physician or emergency room immediately.

**Canker Sores:**
Instruct student to rinse area with warm salt water, and to chew on the opposite side of the mouth when eating. May apply Oragel, Anbesol, or Orabase B with cotton applicator.

Cessation of Breathing:
Begin rescue breathing, check for pulse and initiate CPR immediately. Call for help and instruct responder to CALL 911. Notify parent.

Chapped Lips:
Apply Vaseline or Carmex if severe.

Choking:
If victim is able to speak, do not interfere. Stay with the victim, reassure and encourage coughing. If the victim is, or becomes unable to speak, call for help and instruct responder to call 911. Follow procedure for obstructed airway in conscious victim. If victim becomes unconscious, follow procedure for obstructed airway in unconscious victim. Initiate CPR if necessary. Notify parent.

Cold Sores/Fever blisters:
May apply ice. Apply Blistex or Camphophenique.

Diabetes:
Follow individual’s diabetic protocol as prescribed by private physician.

Ears:
Foreign body: Do not remove. Notify parent, and refer to family physician or Emergency Room.
Pain: Take temperature and assess area of pain. Place a small piece of cotton gently on outer orifice to provide warmth and/or comfort. If severe or persistent, notify parent and refer to family physician.

Eyes:
Chemical Burns: (Remove contact lens if applicable). Flush eye with copious amounts of cool water, call 911, notify parent.
Conjunctivitis: If red and irritated only, have student wash their hands and instruct them not to rub or touch affected eye. Apply cool compress or ice parent. If purulent exudate or swelling is noted, isolate from other students, notify parent, and refer to private physician for follow up.
Foreign Body: Have child close the eye for a few minutes to allow tears to flush out foreign body. Flush with cool water using stationary eyewash. Instruct student to open and close eye in the running water. Pat dry with paper towel, do not rub. Try cool compress or ice it irritation persists but object is not visible. If foreign body is visible, do not attempt to remove it. Apply sterile eye pad over closed eye and tape in place. Notify parent and refer to private physician or ophthalmologist.
Orbital Injuries: Cover the eye with sterile eye pad and secure with tape. Notify parent and refer to private physician or ophthalmologist.
Peri-orbital Injury: Apply ice pack. Notify parent and if necessary, refer to private physician.

Fainting:
Fever:
Notify parent (or other contact on student information sheet) to take home if temperature is > 100F. Students can return to school only when fever free for 24 hours.

Fractures:
Assess area of injury and immobilize. Elevate and apply ice. Notify parent and refer to private physician or emergency room. If necessary call 911.

Headache:
Assess for cause. Take temperature. If no fever, may rest in health office for short period. If no relief after rest, drinks of water, and meal, notify parent.

Head Injury:
Lie child flat with head slightly elevated unless neck or spine injury is suspected. Assess neurological status and vital signs. Assess for loss of consciousness and level of consciousness. Evaluate frequently for signs of trauma, (dizziness, vomiting, impaired mental status or speech, etc.). Notify parent and if necessary, call 911.

Heat Exhaustion:
Observe for signs and symptoms: weakness, nausea, pallor, clammy skin, slow pulse, and feeling faint. Lie flat. Give small amounts of salty fluids. Notify parent if necessary.

Heat Stroke:
Observe for signs and symptoms: hot, flushed dry skin, rapid pulse, disorientation or mental confusion. Take temperature, cool with icepacks and cool compresses to head, neck, underarms, and other areas. Notify parent and call 911 if necessary.

Hypoglycemia:
(Suspected): Give fluids or snacks containing sugar, rest. If recovery is not complete afterward, notify parent and refer to private physician.

Hypoglycemia:
(Confirmed by glucometer): Follow individual student’s or staff’s protocol as prescribed by private physician. If student or staff has not been diagnosed with diabetes, notify parent of student and refer staff to private physician.

Menstrual Cramps:
Heating pad on low setting for 15 minutes

Nausea/Vomiting:
Take temperature. Assess for cause (abdominal pain, hunger, menses, migraine headache, taking oral antibiotics, etc.). For nausea, assess if need to go home or can return to class. If no fever or vomiting, student should return to class. If vomiting occurs, notify parent and send home.

Nosebleed:
Apply pressure to the bridge of the nose for 5-10 minutes to control bleeding. Keep head tilted forward and instruct student to mouth-breathe. If bleeding persists, apply icepack to forehead while continuing pressure. If bleeding persists more than 20 minutes, notify parent.

**Pediculosis (Head lice):**

Excluded from school as with other communicable conditions readmission to school requires the following:
1. The parent/guardian is to provide transportation for student to school
2. The student is to be examined by the school nurse before class
3. The school nurse will report to the building principal that condition has been rectified.
4. No evidence of the condition remains.
5. Readmission is approved by the school nurse and the principal.

**Poisoning:**

Identify Substance! Call Poison Control @ 1-800-962-1253. Follow their instructions. Notify parents. Administer one or two tablespoons of Syrup of Ipecac available in health office stock, only as directed by Poison Control. *IMPORTANT- ONLY give Ipecac after checking with Poison Control.*

**Respiratory Distress:**

In the event of respiratory distress for previously or not previously diagnosed respiratory illness: Parent must be notified. Call 911 called if severe.

**Seizures:**

Assist victim to the floor, in an unobstructed area if possible, to avoid injury during seizure activity. May turn on side or turn head to side if possible, to avoid aspiration in the event of vomiting. **Do not leave child alone.** Monitor length of seizure activity. When consciousness is regained, remove student to the health office if possible. Monitor vital signs and neurological status. Notify parents. If consciousness is not regained, maintain open airway and **CALL 911 immediately.**

**Skin Eruptions:**

For suspected communicable diseases (chicken pox, measles, Impetigo, ringworm, or scabies) notify parent, exclude child from school until evaluated by private physician. Physician note is to be required upon re-admittance to school. Note should state diagnosis and date permitted to return to school when no longer contagious.

**Sore Throat:**

Perform visual assessment. Observe for signs of infection, redness, petechiae, swollen glands, and the like. Take temperature. If temperature is elevated, or throat looks inflamed or suspicious, notify parent. If temperature is present, student should be sent home. If no temperature, offer warm salt-water gargle or drink of water.

**Splinters:**
Remove with tweezers if superficial. Before and after, wash area with soap and water. After removal, apply antiseptic and band-aid. If splinter is imbedded, do not remove. Notify parent.

Sprains/strains:
Follow RICE protocol (rest, ice, compression, and elevation). Advise parent. ACE bandage may be applied for temporary immobilization and stabilization pending further immediate medical evaluation.

Substance Abuse:
Whenever it appears to a staff member that a student may be under the influence of alcohol or other drugs:
 a. The principal/building administrator in charge and the SAC must be notified.
 b. The student is to be brought to the school nurse for an immediate assessment (vital signs, including temperature; neurological status, including pupil check; odor of ETOH, marijuana, etc; behavior and affect; any disclosure of substance and method of use).
 c. The principal/building administrator will implement the district policy.
 d. Notify parent, and stay with student.

Toothache:
Orajel or Anbesol may be applied with a cotton-tipped applicator. Parent should be notified if not already aware.
Extremely loose tooth may be freed from gum with gauze, lest there be danger of aspiration of the tooth.

Tooth Injury:
Avulsion (entire tooth knocked out): Do not handle tooth by root. Do not brush or scrub tooth. If debris is on the tooth, gently rinse with water. If able, re-implant the tooth and stabilize by having the student bite down gently on a gauze pad. If unable to re-implant the tooth, place in Save-A-Tooth, cold milk, or saline soaked gauze. If none of these options are possible, place tooth under the child’s tongue, if they will allow it, or in a cup of water. Notify parent of dental emergency and refer to dentist immediately.
Fracture (broken tooth): Save the broken portion of the tooth if possible, so the parent can take it to the dentist immediately. Stabilize the portion of the tooth left in the mouth by having the student gently bite down on a gauze pad to control bleeding. This is also a dental emergency, and the parent should be notified that the student needs immediate dental care.

Wounds: * Any open wound may require a tetanus shot.

Abrasions: Cleanse with soap and water, or antiseptic spray (i.e., Bactine). Apply band-aid if open abrasion or bleeding.

Contusion (minor): Apply ice; (major): Apply ice and notify parent.

Lacerations: Control bleeding. Cleanse with soap and water or normal saline solution. May apply steri-strips or butterfly bandage if appropriate (Must notify parent); Apply dry sterile dressing. If necessary, refer to emergency room for further evaluation and treatment.

MEDICATIONS
All medications with the exception of those on the comprehensive list (on following page) must have a physician’s order and be signed by the parent.

The school nurse will keep a log of all medications given in school.
Student may self-administer the following:

- **Benadryl** *(HS only)*
- **Epi-Pen** *(HS only)*
- **Insulin** *(HS and Intermediate)* with physician’s order and parent’s signature.
- **Inhalers** *(All Schools)* with a physician’s order and signed by parent. The student will report to the school nurse following inhaler administration.

**Inhalers** may be self-administered in school/including school trips without reporting to the school nurse if approved by physician and parent.

**Insulin** may be self-administered in school/including school trips without reporting to the school nurse if approved by physician and parent

**Medical Clearance is required when:**
1. Respiratory distress episode has occurred in school without appropriate medications and asthma plan in place.
2. Suspected communicable disease.
3. Suspected altered mental status.

**Tylenol & Ibuprofen:**
With parent permission, Acetaminophen or Ibuprofen may be given to students for minor pain, headaches, and menstrual cramps. Parent permission for the first event may be obtained by phone. Subsequent medication events must be covered by written parent permission on file in the Health Office for use by their child.

Acetaminophen may be administered every four hours, as needed.
Ibuprofen may be administered every six hours, as needed.

<table>
<thead>
<tr>
<th>Weigh in lbs.</th>
<th>Acetaminophen:</th>
<th>Ibuprofen:</th>
</tr>
</thead>
<tbody>
<tr>
<td>25-32</td>
<td>160mg</td>
<td>100mg</td>
</tr>
<tr>
<td>33-43</td>
<td>240mg</td>
<td>150mg</td>
</tr>
<tr>
<td>44-54</td>
<td>320mg</td>
<td>200mg</td>
</tr>
<tr>
<td>55-65</td>
<td>400mg</td>
<td>250mg</td>
</tr>
<tr>
<td>66-76</td>
<td>480mg</td>
<td>300mg</td>
</tr>
<tr>
<td>77-87</td>
<td>560mg</td>
<td>350mg</td>
</tr>
<tr>
<td>88 and above</td>
<td>650mg</td>
<td>400mg</td>
</tr>
</tbody>
</table>

**Miscellaneous:**
1. Students may not re-enter the school building for 24 hours after being sent home from school for vomiting or fever over 100F.
2. In the event a student is exempt from physical education due to injury or illness, they must also refrain from recess.
The following items are approved for treatment of students and/or staff in the Township of Ocean School District (Brand indicated or generic form):

- Acetaminophen
- Alcohol
- Anbesol/Orajel, Orabase B/Blistex/Camphophenique
- Aspirin (staff only)
- Bactine antiseptic spray
- Bacitracin
- Benadry – 1 time dose with parent consent
- Betadine
- Calamine Lotion/Caladryl
- Carmex
- Claritin (staff only)
- Glucose tablets
- Hydrocortisone Cream
- Hydrogen Peroxide
- Ibuprofen
- Insect Sting Relief wipes/swabs
- Ipecac Syrup
- Lozenges (Hall’s/Cepacol)
- Maalox/(Staff Only)
- Nasal Plug
- Saline Wound Wash
- Sodium Chloride solution (0.9%)
- Tums
- Visine – if hx/dx of allergic conjunctivitis

**Oxygen 3-4 liters via non-re-breathing mask or nasal cannula PRN cardiac or respiratory emergencies** (students/staff & visitors).

1.5 liters oxygen may be administered for **severe asthma attack**.

**Rescue squad must be called.**

**Mantoux Tuberculin serum 0.1cc subcutaneously**, to left forearm of student with written parental consent. **Mantoux Tuberculin serum 0.1cc subcutaneously** to left forearm of all new staff members.

**USE OF AUTOMATED EXTERNAL DEFIBRILLATOR**

In an emergency situation, the certified school nurse or designated substitute with AED certification has permission to use an automated external defibrillator per training instruction. **911 will be called for further assistance.**
TOWNSHIP OF OCEAN SCHOOL DISTRICT

PHYSICIAN'S STANDING ORDERS
2016-2017 School Year

The following items are approved for treatment of students and/or staff in the Township of Ocean School District (Brand indicated or generic form):

Acetaminophen
Alcohol
Anbesol/Orajel/Orabase B/Blistex/Camphophenique
Aspirin (staff only)
Bactine antiseptic spray
Bacitracin
Benadry – 1 time dose with parent consent
Betadine
Calamine Lotion/Caladryl
Carmex
Claritin (staff only)
Glucose tablets
Hydrocortisone Cream
Hydrogen Peroxide
Ibuprofen
Insect Sting Relief wipes/swabs
Ipecac Syrup
Lozenges (Hall's/Cepacol)
Maalox/(Staff Only)
Nasal Plug
Saline Wound Wash
Sodium Chloride solution (0.9%)
Tums
Visine – if hx/dx of allergic conjunctivitis

Oxygen 3-4 liters via non-re-breathing mask or nasal cannula PRN cardiac or respiratory emergencies (students/staff & visitors).

1.5 liters oxygen may be administered for severe asthma attack. Rescue squad must be called.

Mantoux Tuberculin serum 0.1cc subcutaneously, to left forearm of student with written parental consent. Mantoux Tuberculin serum 0.1cc subcutaneously to left forearm of all new staff members.

USE OF AUTOMATED EXTERNAL DEFIBRILLATOR

In an emergency situation, the certified school nurse or designated substitute with AED certification has permission to use an automated external defibrillator per training instruction. 911 will be called for further assistance.

[Signature]
Physician's Signature

[Address]
223 Monmouth Road, Suite 2
West Long Branch, N.J. 07764-1039

Date: 4/5/16