

BLOODBORNE PATHOGENS – FACTS FOR SCHOOLS



BIOHAZARD

1. BBP are disease-causing organisms found in the blood and body fluids of an infected person. ■ You can't tell if someone is infected.
 - You should treat ALL blood and body fluids as infected material and take steps to protect yourself.
2. Three BBP to be aware of – HIV, Hepatitis B (HBV), Hepatitis C (HCV).
3. These viruses can enter the body in several ways:
 - Sharing needles with an infected person.
 - Through a cut, scratch, razor nick, skin abrasion, dermatitis or acne.
 - Getting blood or body fluid in eyes, nose or mouth.
 - Unprotected sex with an infected person.
 - Touching a contaminated object and then touching your mouth, eyes, nose, or open cut.
 - HBV can survive on surfaces at room temperature for at least a week.
4. Consider EVERY person as a possible carrier of a BBP and treat blood and body fluids as if infected.
5. When assisting someone who is bleeding PUT ON GLOVES ALWAYS. When removing gloves peel one glove from the top of the wrist to the fingertips, then hold it in the gloved hand. With the exposed hand, peel the second glove off, tucking the first glove inside the second. Never touch the outside of a glove with your bare skin. After removing gloves, wash hands with soap and water or use sanitizer.
6. Whenever possible, use disposable materials, such as paper towels, to absorb blood. Double bag the contaminated materials, tie the bags and put in the garbage can.
7. When cleaning up contaminated sharp objects, such as glass, use a broom and dustpan – never hands.
Carry garbage bags by holding them by the top and not against your body – sharp objects could penetrate the bag and cut you.
8. If you think you have been exposed to a BBP – Do not panic! Most exposures do not result in disease transmission.
 - Wash the affected areas.
 - Immediately report the exposure to your principal and district risk management.
 - Fill out form
<https://www.publicschoolworks.com/ARPages/accidentsPage1.php?di=541&dia=s326w&mi=5>

Asthma

Symptoms of an asthma attack include:

Coughing	Tightness in chest
Wheezing	Gasping for air
Difficulty Exhaling	Color changes (pale or blue)

What to do if asthma symptoms are present:

- ✓ Stay with student at all times.
- ✓ Have student sit upright.
- ✓ Encourage student to relax and breathe slowly.
- ✓ Administer prescribed medication by inhaler. See instructions below.

What not to do:

- ✓ Do not leave student alone.
- ✓ Do not exceed prescribed inhaler doses.
- ✓ Do not re-breathe in a paper bag.

Albuterol inhaler treatment:

- ✓ Shake well.
- ✓ Remove cap and insert into spacer.
- ✓ Have student breathe out, emptying lungs.
- ✓ Put mouth piece of spacer into student's mouth or if using a masked spacer, place over nose and mouth.
- ✓ Press down on the inhaler to release medication (you will hear a hissing noise) and have the student breathe in deeply and hold breath for 10 seconds, or if using a masked spacer have the student take 4-6 slow deep breaths.
- ✓ Repeat as directed.
- ✓ Student should continue sitting upright and resting until medication takes effect (can be up to 20 minutes).
- ✓ The student may require 2 puffs by inhaler every 4 hours.
- ✓ **Document** in the school medication log, and notify parents either by phone or in home notebook.

When to call 911:

- ✓ If there is no inhaler available, and symptoms are becoming worse.
- ✓ If symptoms are becoming more severe after using inhaler.
- ✓ If having severe symptoms of breathing difficulty at any time. See above symptoms.
- ✓ If nail beds, lips or skin appear bluish.

Emergency Treatment of Anaphylaxis - EpiPen

When to administer the Epi-Pen and Call 911:

- ✓ Swelling of the tongue and throat
- ✓ Difficulty breathing
- ✓ Weakness or dizziness
- ✓ Loss of Consciousness
- ✓ Vomiting, severe abdominal cramping and diarrhea

DIRECTIONS FOR USE

- **REMOVE AUTO-INJECTOR FROM CARRIER TUBE BEFORE USE.**
- **NEVER PUT THUMB, FINGERS OR HAND OVER ORANGE TIP.**
- **NEVER PRESS OR PUSH ORANGE TIP WITH THUMB, FINGERS OR HAND.**
- **THE NEEDLE COMES OUT OF ORANGE TIP.**
- **DO NOT REMOVE BLUE SAFETY RELEASE UNTIL READY TO USE.**
- **DO NOT USE IF SOLUTION IS DISCOLORED.**
- **DO NOT PLACE PATIENT INSERT OR ANY OTHER FOREIGN OBJECTS IN CARRIER WITH AUTO-INJECTOR, AS THIS MAY PREVENT YOU FROM REMOVING THE AUTO-INJECTOR FOR USE.**



TO REMOVE AUTO-INJECTOR FROM THE CARRIER TUBE:



1. Flip open the yellow cap of the EpiPen® or the green cap of the EpiPen® Jr Auto-Injector carrier tube.



2. Remove the EpiPen® or EpiPen® Jr Auto-Injector by tipping and sliding it out of the carrier tube.

TO USE AUTO-INJECTOR:

1. Grasp unit with the orange tip pointing downward.
2. Form fist around the unit (orange tip down).



3. With your other hand, pull off the blue safety release.



4. Hold orange tip near outer thigh.

DO NOT INJECT INTO BUTTOCK.



5. Swing and **firmly push** against outer thigh until it clicks so that unit is perpendicular (at 90° angle) to the thigh.

(Auto-injector is designed to work through clothing.)

6. Hold **firmly against thigh** for approximately 10 seconds to deliver drug. (The injection is now complete. The window on auto-injector will be obscured.)



7. Remove unit from thigh (the orange needle cover will extend to cover needle) and massage injection area for 10 seconds.

8. Call 911 and seek immediate medical attention.
9. Take the used auto-injector with you to the hospital emergency room.

Laws and Liability

In accordance with Utah Code Ann. §53A-11-601(3), school personnel who administer any medication in compliance with Board Policy S-9 and its accompanying administrative procedures are not liable, civilly or criminally, for any adverse reaction suffered by the student as a result of taking the medication or discontinuing administration of the medication.

1. Utah Code Ann. §78B-4-501. Good Samaritan Act.

(1) A person who renders emergency care at or near the scene of, or during an emergency, gratuitously and in good faith, is not liable for any civil damages or penalties as a result of any act or omission by the person rendering the emergency care, unless the person is grossly negligent or caused the emergency. As used in this section, "emergency" means an unexpected occurrence involving injury, threat of injury, or illness to a person or the public, including motor vehicle accidents, disasters, actual or threatened discharges, removal, or disposal of hazardous materials, and other accidents or events of a similar nature. "Emergency care" includes actual assistance or advice offered to avoid, mitigate, or attempt to mitigate the effects of an emergency.

(2) A person who gratuitously, and in good faith, assists governmental agencies or political subdivisions in the activities described in Subsections (2)(a) through (c) is not liable for any civil damages or penalties as a result of any act or omission unless the person rendering assistance is grossly negligent in:

(a) implementing measures to control the causes of epidemic and communicable diseases and other conditions significantly affecting the public health, or necessary to protect the public health as set out in Title 26A, Chapter 1, Local Health Departments;

(b) investigating and controlling suspected bioterrorism and disease as set out in Title 26, Chapter 23b, Detection of Public Health Emergencies Act; and

(c) responding to a national, state, or local emergency, a public health emergency as defined in Section 26-23b-102, or a declaration by the President of the United States or other federal official requesting public health-related activities.

(3) The immunity in Subsection (2) is in addition to any immunity or protection in state or federal law that may apply.

Amended by Chapter 90, 2004 General Session

2. **HB: 56: EMERGENCY ADMINISTRATION OF EPINEPHRINE**

Seizures

Generalized seizures, which are also known as **grand mal seizures** are characterized by loss of consciousness followed by stiffening for a few seconds then followed by a period of jerking. Student may vomit or lose bowel and bladder control. As a rule, these seizures last from 1-3 minutes. After the seizure, a period of deep sleep occurs lasting from minutes to hours.

What to do for generalized seizures

- ✓ If you see a seizure starting, attempt to prevent injury by easing the student to the floor.
- ✓ Keep hard, sharp or hot objects out of the way.
- ✓ Turn student to the side to allow saliva to drain and to prevent choking.
- ✓ Do not restrain. You may place a soft item under the head if the floor is hard.
- ✓ Do not force anything between teeth or place any object in mouth.
- ✓ Do not give fluids or food during or immediately after seizure.
- ✓ Loosen restrictive clothing.
- ✓ Observe and document what seizure looks like and how long it lasts.
- ✓ If the seizure lasts longer than 5 minutes or if student is not breathing call 911 immediately.
- ✓ When seizure is finished student may be sleepy. This is normal. Provide a comfortable, private place for rest where the student can be observed.

When to call 911

- ✓ For generalized (grand mal) seizure, lasting 5 minutes or longer.
- ✓ If one seizure goes into another.
- ✓ If student remains unconscious after seizure.
- ✓ If student stops breathing.
- ✓ Always notify parent for any seizure activity.

HYPOGLYCEMIA

(Low Blood Glucose)

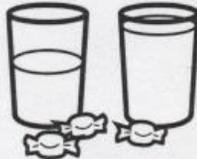
Causes: Too little food, too much insulin or diabetes medicine, or extra activity.

Onset: Sudden, may progress to insulin shock.

SYMPTOMS

		 SHAKING	 FAST HEARTBEAT
 SWEATING	 DIZZINESS	 ANXIOUS	 HUNGER
 IMPAIRED VISION	 WEAKNESS FATIGUE	 HEADACHE	 IRRITABLE

WHAT CAN YOU DO?



Drink 1/2 glass of juice or regular soft drink, or 1 glass of milk, or eat some soft candies (not chocolate).



Within 20 minutes after treatment **TEST BLOOD GLUCOSE.** If symptoms don't stop, call your doctor



Then, eat a light snack (1/2 peanut butter or meat sandwich and 1/2 glass of milk).

Treatment may vary with different medications.

Choking



Choking occurs when an object lodges in the throat, occluding the wind pipe or trachea, making it impossible to breathe.

The first step is to prevent choking:

- Make sure students eat safe and appropriate foods for their age, health condition etc... □ (i.e. chopped, soft, meltable).
- Discourage students from:
 - Eating too fast.
 - Running around while eating.
 - Stuffing their mouths full of food.
 - Talking or laughing while eating.
- Have a plan for being able to perform abdominal thrusts on your students with disabilities i.e. in wheelchairs, with body braces.
- When performing abdominal thrusts on a child, you may have to get on down on their level (i.e. your knees) to effectively perform abdominal thrusts.

Signs and symptoms of choking:

- The universal sign for choking is hands on throat.
- Unable to cough breathe or speak. If person can cough or breathe do nothing and allow them to clear their throat.

What to do:

- If someone is with you have them call 911.
- Perform abdominal thrusts.

Abdominal thrusts:

- Get behind the choking victim.
- Find the victim's naval.
- Put the thumb side of your fist just above the naval and below the breast bone.
- Place your other hand over your fist, and give quick inward/upward thrusts into the abdomen.
- Give thrusts until object is dislodged.
- If victim becomes unconscious, call 911 and begin CPR.

Emergency First Aid for SLSCD Schools Legal considerations:

The Good Samaritan Law protects rescuers acting with good intentions and within the scope of their training.

Obtaining consent: Always introduce yourself and tell the victim that you know first aid.

If responsive, ask if you can help. If unresponsive, consent is implied.

Steps to follow when you are helping a person:

Personal safety must be a priority.

1. Quickly determine if the scene is safe. If the scene is not safe do not go in the area. Call for help.
2. Protect yourself against disease by using personal protective gear i.e. gloves, eye protection and a breathing mask.

Assess the victim:

1. Determine if the victim is responsive by tapping and shouting "are you alright".
 - a. Assess for movement or other response.
 - b. Check for breathing by watching for chest rise.
 - c. Check for medical jewelry.
 - d. If victim is breathing, roll to side and call 911.
 - e. If the victim sustained injuries in a car accident, or has fallen from a height, do not move unless you absolutely have to.
2. **What to do for an unresponsive, not breathing, adult:**
 - a. If alone, Call 911, and get the first aid kit and AED
 - b. Begin chest compressions immediately and add breaths (30 compressions: 2 breaths) when a mask is available.
 - c. Use an AED if available.
3. **What to do for an unresponsive, not breathing child (no signs of puberty):**
 - a. If alone, perform chest compressions and add breaths (30 compressions: 2 breaths) when a mask is available for 2 minutes (or for 5 cycles) before pausing to call 911.
 - b. Use an AED if available.
4. **If the victim is breathing, assess for bleeding.**
 - a. Apply pressure to wounds to stop bleeding.
 - b. If there is a lot of bleeding, call 911.
 - c. For **nose bleeds**, pinch nose just below the nasal bone and tilt victim's head forward.
5. **If victim is breathing, assess for and treat shock** (pale clammy cool skin, nausea or vomiting, irritability).
 - a. Lay victim on back, cover with a blanket and raise feet 8-12 inches.
 - b. Calm and reassure person.
 - c. Call 911.
6. **Burns:** Remove clothing from affected area, and hold burned area under cool water for 15 minutes. Call 911 for burns covering a large area.
 - a. Leave burn open without a dressing and do not apply creams or ointments.
7. **Broken Bones/sprains:**
 - a. Control bleeding.
 - b. Immobilize the affected area.
 - c. Apply ice pack.
 - d. Treat for shock as tolerated.
 - e. Call 911 if the bone is protruding from the skin.
8. **Heart Attack:** Symptoms - chest pain, difficulty breathing, profuse sweating/weakness, nausea etc...
 - a. If the person can chew/swallow, have them chew 1 aspirin.
 - b. Call 911.
 - c. Have the person rest quietly until EMS arrives.
9. **Stroke:** Symptoms - Facial drooping, difficulty speaking, one sided weakness, severe headache.
 - a. Have person rest quietly and call 911.
10. **Diabetic Hypoglycemia (low blood sugar):** Symptoms- confusion, fatigue, paleness, weakness, trembling, unconsciousness and seizures. This condition can progress rapidly into an emergency situation.
 - a. If conscious and can swallow, give food containing sugar i.e. orange juice, soda (with sugar) etc...
 - b. **Call 911** if person is unable to consume sugar, is unconscious, or has a seizure.