

Desoto County Schools Bleeding Disorder Care Plan

Student name: _____ Date of Birth: _____

School: _____ Grade: _____

Emergency Contact #1 Name: _____ Phone: _____
Phone: _____ Relationship: _____

Emergency Contact #2 Name: _____ Phone: _____
Phone: _____ Relationship: _____

Physician Name: _____ Phone: _____

Type of Bleeding Disorder: _____

Description of Bleeding Disorder: _____

Indicators for Staff Intervention

Painful swollen joints
Swelling in leg or arm (especially knee or elbow when bleeding)
Inability to move body part
Bruises with raised, tender, enlarged areas
Excessive bleeding from minor cuts
Spontaneous nose bleeds, uncontrolled by first aid
Blood in urine
Head or throat injury
Bleeding from inside or outside of mouth
Abdominal injury
Severe blow to the body
Report by student that there is a bleed
Indicators specific to THIS STUDENT:

Bleeding Disorder Actions/First Aid

- 1) **Keep calm. Allow student to rest, sitting or lying down.**
- 2) **If unable to be moved, call for help. Use walkie-talkie to contact office.**
- 3) **Tell Office that _____ is injured/bleeding. Bring Wheelchair and emergency medicine (if available) to room.**
- 4) **Treat superficial bleeding with direct pressure for 5-10 min. Keep limb elevated.**
- 5) **Trained staff should administer emergency medication if available.**

- 6) Have someone CALL PARENT to make them aware of injury/bleeding and actions taken.
- 7) If bleeding does not stop with holding pressure or contacts not available, CALL 911.

Emergency – Late Indicators for Staff Intervention

Shock: pale/cool skin, bluish or grayish discoloration of lips, nails, finger tips, or ear lobes
Weakness
Weak and rapid pulse
Shallow and rapid breathing
Restlessness or irritability
Altered level of consciousness
Severe swelling of joints or injury sites
Severe pain
Other unusual signs/symptoms/activity
Indicators specific to THIS STUDENT:

Emergency- Actions for Bleeding Disorder

- 1) Keep calm.
- 2) Call 911 for transport to a medical facility. Preference: _____.
- 3) While waiting for medical personnel to arrive, keep injured limb elevated and hold pressure. Monitor breathing and pulse as CPR may be required.
- 4) Call Parent to make them aware of the severity of injury/bleeding, condition of their child, and that 911 has been called for transport to a medical facility.

Requested EMERGENCY actions for THIS STUDENT (if different from those above): _____

Activity limitations/restrictions for THIS STUDENT: _____

This Bleeding Disorder care plan will be provided to administrators, teachers, and staff to allow for awareness and preparedness in providing the best care for this student.

Parent Signature: _____ **Date:** _____

Staff Member Signature: _____ **Date:** _____