

Franklin Special Board of Education

Monitoring: Review: Annually, in May	Descriptor Term: Accidents and Illnesses	Descriptor Code: 6.410	Issued Date: 07/20/15
		Rescinds: 6.410	Issued: 09/14/98

1 Parent(s) of all students shall provide the schools with an emergency information card with the
2 following information:

- 3 1. Parents' location and phone number during the school day;
- 4 2. The name, address and phone number of the student's physician(s);
- 5 3. Directions in the event that medical treatment is needed;
- 6 4. Information concerning a student's particular physical disability or medical condition.

7 This card will be required annually and will be kept on file in the principal's office.

8 If a student suffers an injury or becomes ill, the staff member in charge shall have the responsibility to
9 render first-aid or ensure that it is rendered.

10 In the event of serious injury or illness to a student, the parent(s) will be notified as to whether to pick
11 up the child at school or meet the child at the hospital. If the parent(s) cannot be reached, the student
12 will be transported to the hospital emergency room and the physician identified by the parent(s) on the
13 emergency medical authorization form will be notified of the accident. Efforts to notify the parent(s)
14 will continue until they are reached.

15 Principals will inform the director of schools immediately of any serious injuries suffered by students
16 while under jurisdiction of the school. A report of each accident taking place in a school will be filed
17 in the offices of both the principal and the director. Forms for reporting accidents will be made
18 available from the office of the director. In all accidents serious enough to require medical attention or
19 requiring the student to be taken home, or in all cases that the staff member in charge deems desirable,
20 reports will be made and filed as stated above.

21 No student will be taken and left at home or sent home unless a parent, or someone designated by the
22 parent(s), is at home to accept the responsibility of the student.

23 Parents who object to the procedures contained in this policy shall submit to the principal a written
24 emergency plan for his approval.



Franklin Special School District Incident Report

Name of Injured: _____ Date of Injury: _____ Time: _____

School: _____ Grade: _____ Accident/Injury Location: _____

Description of Injury: _____

How Accident/Injury Occur: _____

Treatment Administered: _____

Individual Providing Treatment: _____

Individual Observing Accident/Injury: _____

Report Completed By: _____

Principal's Signature: _____ Date: _____