Dealing with Asthma, Diabetes and Epilepsy in Schools

Rights and Responsibilities

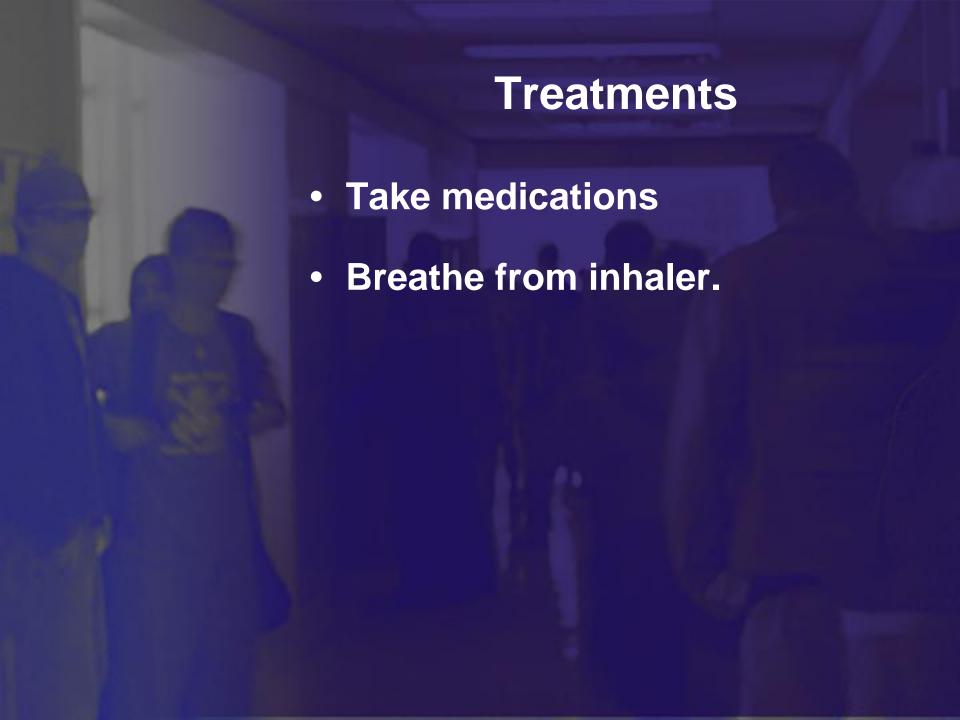
- Laws protect the rights of students
- Know school policy.

Asthma Episodes

- Cough
- Gasp for air
- Breathe with a wheezing, whistling noise
- Have no energy for play
- Complain of tightness or pain in the chest.

Common Triggers

- Pollen, mold, animal dander
- Perfume or other strong odors
- Vigorous exercise
- Cold, humidity, sudden temperature changes
- Cigarette smoke.



Handling an Episode

- Avoid drawing extra attention to student
- Stay calm and reassure student
- Don't leave student unattended
- Get medical assistance.

Diabetes: Low Blood Sugar / Hypoglycemia

- Too much insulin
- Too little food
- Too much exercise.



- Be lethargic
- Shake or sweat
- Have change in personality.



Have student consume:

- Glucose tablets
- Fruit juice
- Sugar-sweetened soda.



- Too little insulin
- Too much food converted to sugar.

Student May

- Be thirsty
- Vomit
- Have fruity smelling breath
- Experience dry mouth
- Have abdominal pains.

Recourse

Have student drink:

- Diet soda
- Water.

Complete Epileptic Seizures

- Abruptly loses consciousness
- Falls
- Stiffens
- Jerks
- Relaxes
- Regains consciousness.

Partial Epileptic Seizures

- Fluttering eyelids
- Loss of awareness
- Confusion
- Loss of muscle tone
- Muscle jerks, tics, twitching
- Seeing, smelling, hearing things not there.

Recourse

- Control scene
- Approach student gently
- Protect student
- Don't move student unless in danger
- Allow seizure to take its course
- Note length of seizure and movements.

For Any Medical Situation

- Be familiar with daily routines
- Avoid undue attention on student
- Don't leave student alone
- Protect from embarrassment
- Report incidents.

When to Call 911

- When seizure lasts more than 5 min.
- If student is pregnant
- If seizure follows head injury
- If student has no previous history of seizures.