HEAD INJURY PROCEDURE

Immediate Care:
1. If you suspect a neck or spine injury (neck pain, tingling, paralysis), do not move the student and call 9-1-1.
2. If you do not suspect a neck or spine injury, have student sit down and observe for Signs & Symptoms.

Activate emergency services (9-1-1) if any of the following Signs & Symptoms are observed:
- Loss of consciousness – even briefly
- Not opening eyes, slow to respond, confused, repetitive questioning
- Weakness, paralysis, or numbness
- Seizures or convulsions
- Worsening of any other symptoms (below)
- Significant bleeding from the scalp
- Neck pain

Students with one or more of the following Signs & Symptoms should be referred to a health care provider:
- Can’t recall events prior to the hit, bump, or fall
- Can’t recall events after the hit, bump, or fall
- Headache
- Vomiting more than once
- Balance problems or dizziness
- Blurry or double vision
- Sensitivity to light and noise
- Difficulty thinking clearly and/or shows confusion/dazed
- Change in behavior (irritable, emotional)
- May need stitches

4. Apply cold pack to the injured area to minimize swelling.
5. Clean minor lacerations with soap and water. Apply bandage. Major lacerations should not be cleaned (this can disrupt injured tissue and make bleeding worse), but only bandaged. Major lacerations should be referred to a health care provider for evaluation.
6. Consult with school nurse if seriousness of injury is questionable, or call 9-1-1.
7. Contact parent/guardian to pick up student if student is presenting with any Signs & Symptoms of head injury (and 9-1-1 call is not indicated).
8. If student requires medical attention, do not leave student unattended and continue to monitor until emergency medical services and/or parent arrives. If transported by EMS, send staff member.
9. Send copy of the “Head Injury Letter” home with student with copies to his/her teacher(s), and school nurse.