

**Hamilton Heights School Corporation
PLAN OF CARE – BLEEDING DISORDER**

Name: _____ Grade _____ Age _____
 Last Name First MI

School _____ Type of Disorder _____

Parent/Guardian Name _____ Phone (H) _____

Address _____ Phone (W) _____

Parent/Guardian Name _____ Phone (H) _____

Address _____ Phone (W) _____

Emergency Phone Contact #1 _____

| | Name | Relationship | Phone |
|----------------------------|-------|--------------|-------|
| Emergency Phone Contact #2 | _____ | _____ | _____ |

| | Name | Relationship | Phone |
|-------------------------|-------|--------------|-------|
| Specialist Student Sees | _____ | _____ | _____ |

| | Name | Relationship | Phone |
|-----------------|-------|--------------|-------|
| Other Physician | _____ | _____ | _____ |

| | Name | Relationship | Phone |
|-----------------|-------|--------------|-------|
| Other Physician | _____ | _____ | _____ |

ALLERGIES (Food, Medication, Etc.) _____

DIET (Special diet, please address any dietary restrictions or special hydration needs)

DAILY MANAGEMENT PLAN (Check each that applies to the student)
Identify the things which start bleeding:
 Exercise
 Other _____

ACTIVITY RESTRICTIONS (Please address playground activity, sports, physical education)

SAFETY PRECAUTIONS (Protective gear, etc.) _____

CENTRAL LINES _____

MEDICATIONS: Please address side effects staff might observe or might interfere with learning.

| Name of Medication | Dosage & Frequency | Possible Side Effects |
|--------------------|--------------------|-----------------------|
| 1. _____ | _____ | _____ |
| 2. _____ | _____ | _____ |
| 3. _____ | _____ | _____ |

EMERGENCY PLAN

Emergency action is necessary when the student has symptoms such as _____,
_____, and/or _____

Signs and Symptoms of bleeding - **NOTE: Bleeding is longer, not faster

- A. A reported “tingling” or other kind of sensation.
- B. Limb held in an abnormal position.
- C. Obvious signs of discomfort or pain.
- D. Area of bleeding warm to touch.
- E. Swelling does not necessary occur.
- F. Firmness and tenderness on palpation.
- G. Restriction of all range of motion indicates bleeding within a joint.
- H. Over bleeding from site.

Signs and symptoms of infection of a port:

- A. Fever
- B. Redness or swelling over port site

Steps to take during a bleeding episode:

- A. Contact parent if:
 - 1. Bleeding occurs
 - 2. Fever
 - 3. Any trauma to the head
 - 4. Symptoms of infection at the port site
- B. To control bleeding:
 - 1. Apply pressure to bleeding site for 10-15 minutes
 - 2. Elevate affected part to heart level or above
 - 3. Apply lightweight pack or cold compress
 - 4. Resume activity gradually following bleeding episode
- C. Seek Emergency Medical Care – Call EMS/911 immediately if student has any of the following:
 - 1.
 - 2.
 - 3.
 - 4.

Comments/special instructions _____

Physician Signature

Date

Parent Signature

Date