

9-1-1 EMERGENCY MEDICAL NOTIFICATION GUIDE

Call **9-1-1** for any condition that poses an actual or potential life-threatening situation, or if a person requires immediate medical attention. If you are not sure, call **9-1-1** and let emergency services determine whether you need emergency help. Do not move an injured person unless the scene is unsafe.

STUDENT: _____ DATE: _____

SCHOOL: _____ TIME OF INCIDENT: _____

ACTIONS:

YES	NO	TASK
_____	_____	1. Call 9-1-1 (note time) _____
_____	_____	2. Notify building administrator/school office.
_____	_____	3. Send necessary first aid supplies (first aid kit, gloves, blanket, AED).
_____	_____	4. Send medication per Emergency Care Plan, if applicable (e.g. Epi-Pen, inhaler) to scene of emergency.
_____	_____	5. Notify school nurse if available (If not, send completed copy of form).
_____	_____	6. If needed, get assistance from staff trained in CPR/First Aid.
_____	_____	7. Send additional staff to assist at scene of the emergency (Two adults are to remain with injured person until aid arrives.)
_____	_____	8. Send emergency information (locator card, Emergency Care Plan, Medical Alert Update Sheet) to scene of the emergency.
_____	_____	9. Designate a person to meet Fire/EMS and direct to the scene of the emergency.
_____	_____	10. In case of traumatic amputation or loss of teeth, locate and provide affected part to Fire/EMS. Place a tooth in milk. Do not clean it off.
_____	_____	11. Contact parents/guardians.
_____	_____	12. Provide Fire/EMS with necessary medical information (if known): medical conditions, medications, medication allergies, time person last ate and took medications, copy of Emergency Care Plan.
_____	_____	13. Notify classroom teacher(s).
_____	_____	14. If necessary, provide for sibling needs.
_____	_____	15. If transported by EMS, send staff member.
_____	_____	16. Attach copy of this completed guide to the Student Accident Report.

Additional comments: _____

Person completing this form
 Name/Title: _____ Phone: _____

