Emergency Health Care Plan (ECP)

The ECP (sometimes called EHP) details appropriate procedures to follow in case of a medical emergency. Approved school personnel and providers are trained on the plan so that they are prepared when an urgent situation arises. For instance, if Mr. Logan is off site, trained school personnel determine what to do for Megan if she has a diabetes-related emergency. See below for an example of Megan's ECP.

Emergency Care Plan

Identifying Information

Child's Name: Megan Giachelli Medical Diagnosis: Type 1 Diabetes **Child's Date of Birth**: 05/12/XXXX **Other**: Spastic Quadriplegic Cerebral Palsy (CP)

Emergency contact information:				
Parents: Bill and Sandy Giachelli*	Endocrinologist: Dr. Lane Blevis			
3324 Mansfield Lane	1266 Kirby Parkway, Suite 23			
Milan, Florida 56758	Milan, Florida 56757			
	Office: 251.3366			
Mom's cell: 556.8599	Pager: 255.9898			
Dad's cell: 814.6523				
Dad's Work: 258.4156	Primary Care Physician: Dr. S. Williams			
Home: 251.4444	1323 Windsor Way			
	Milan, Florida 56757			
	Office: 251.4438			
*If unable to reach parents, please call:	Pager: 255.9294			
Megan's grandparents: Mr. and Mrs. Reynolds 234 B Hillwood Plaza Milan, Florida 56578 Home: 251.4190	Preferred Hospital: Milan Children's Medical Center			
*Parents have indicated that they would like involved personnel to call 911 prior to calling them in the case of an emergency.				

General information: Type 1 diabetes, formerly called juvenile diabetes, is a chronic disease. It occurs when the body makes little or no insulin. It is generally diagnosed during childhood, the teen years, or during young adulthood.

Megan is at risk for serious medical complications if her blood-glucose levels become too low or too high. Treating Megan's diabetes requires keeping her blood-glucose level as normal as possible. This is accomplished in three ways:

- Food intake, which causes the glucose level to rise
- Exercise, which causes the glucose level to fall
- Insulin injection, which causes the glucose level to fall

If the balance is off, either of the following type 1 diabetes emergencies may result:

1) hypoglycemia: low blood glucose

2) hyperglycemia: high blood glucose

The emergency situation you are most likely to have with Megan is low blood glucose. This is often the result of the individual's not eating enough food, engaging in too much physical activity without eating, or having too much insulin.

Post This Page Only

Emergency Procedures: Megan

Emergency procedures for any school personnel:				
If you see that Megan is having a seizure, that she has lost consciousness, or that she is unable to swallow: Call 911, then her parents.				
If unable to reach her parents, please call Megan's grandparents	: Mr. and Mrs. Reynolds Home: 251.4190			
Symptoms of low blood-glucose level (hypoglycemia) (Megan's typical symptoms are marked by *):	Symptoms of high blood-glucose level (hyperglycemia) (Megan's typical symptoms are marked by *):			
 Cold, clamminess* Fatigue/Tiredness* Mood changes* Pale, moist skin* Shakiness* Thirst* 	• Frequent urination *			
Other possible symptoms: • Blurred vision • Dizziness • Extreme hunger • Headache • Mental confusion • Rapid pulse rate • Shallow breathing • Sweating tremors	Other possible symptoms: • Blurry vision • Drowsiness • Headache • Lethargy • Nausea • Stomach ache • Thirst			
If you see any of the symptoms listed above, call	If you see any of the symptoms listed above, call			
approved personnel:	approved personnel:			
School Nurse: Mr. Logan ext. 6798	School Nurse: Mr. Logan ext. 6798			
Classroom Teacher: Mrs. Jameston ext. 6790	Classroom Teacher: Mrs. Jameston ext. 6790			
P.E. Teacher: Coach Lei ext. 6736	P.E. Teacher: Coach Lei ext. 6736			

Emergency procedures for approved personnel:

School Nurse: Mr. Logan ext .6798 Classroom Teacher: Mrs. Jameston ext. 6790 P.E. Teacher: Coach Lei ext. 6736

If you see that Megan is having a seizure, that she has lost consciousness, or that she is unable to swallow: Call 911, then her parents.

Parents: Bill and Sandy Giachelli Home: 251.4444 Mom's cell: 556.8599 Dad's cell: 814.6523 Dad's Work: 258.4156 If unable to reach her parents, please call Megan's grandparents: Mr. and Mrs. Reynolds Home: 251.4190

Do Not: Leave Megan unattended Call 911 until you have assessed Megan's blood-glucose level 	 Do Not: Leave Megan unattended Call 911 until you have assessed Megan's blood-glucose level 	
If You See This	If You See This	
Symptoms of low blood-glucose level (hypoglycemia) (Megan's typical symptoms are marked by *):	Symptoms of high blood-glucose level (hyperglycemia) (Megan's typical symptoms are marked by *):	
 Cold, clamminess* Fatigue/Tiredness* Mood changes* Pale, moist skin* Shakiness* Thirst* 	• Frequent urination *	
Other possible symptoms: • Blurred vision • Dizziness • Extreme hunger • Headache	Other possible symptoms: • Blurry vision • Drowsiness • Headache • Lethargy	

 Nausea Stomach ache Thirst 	
Do This	
 Treatment for high blood glucose (higher than 200 mg/dl): Test Megan's blood glucose by using the instructions for monitoring blood glucose. If Megan's blood- glucose level is high, use the chart that balances glucose count with carbohydrate intake to determine how much insulin to inject. 	
• If her blood glucose remains high, call Megan's parents.	

Tips and suggestions for helping Megan:

- Watch her behavior before and after she eats.
- Make sure she eats all meals and snacks on time with no delays.
- Treat Megan normally.
- Allow Megan to follow her regular schedule as much as possible.
- Don't schedule physical activity for Megan close to her meal or snack time.
- Communicate with teachers and other school personnel regarding any unusual symptoms related to Megan's diabetes.
- Allow Megan to have unrestricted bathroom breaks.

Supplies checklist: (Provided by parents)					
✓	Glucose meter	√	Glucagon emergency kit		
\checkmark	Control solution for meter	\checkmark	Drinks		
\checkmark	Batteries for the meter	\checkmark	Snacks		
✓	Test strips for meter	\checkmark	Glucose tablets		
✓	Insulin	\checkmark	Medical doctor's orders		
\checkmark	Lancing device and lancets	\checkmark	Medical information		

Note: A copy of this emergency plan will be sent to Drs. Blevis and Williams. A copy of this emergency plan will be posted in the following locations:

- School Cafeteria
- Library
- Mrs. Spear's Room 7
- Ms. Thompson's Room 8
- Mr. Lovitt's Room 9
- Mr. Casuelo's Room 10
- Mrs. Navelle's Room 6
- Ms. Hooper's Room 3

Parent(s) or Guardian Signature:	Date:
School Nurse Signature:	Date:
Other Trained Personnel/Title:	Date:
Other Trained Personnel/Title:	Date:
Other Trained Personnel/Title:	Date:

Note: The persons presented in this document are entirely fictitious. Any resemblance to actual persons is unintentional.