

# Northshore Christian Academy | Early Learning Center

A Ministry of Northshore Christian Church

PO Box 5580 ~ Everett ~ WA ~ 98206

Phone: (425) 407-1119 Fax: (425) 407-1317 [www.northshorechristianschools.org](http://www.northshorechristianschools.org)



## Medical Emergency Plan

Student \_\_\_\_\_ Date \_\_\_\_\_

Diagnosis \_\_\_\_\_

Classification of Condition (Please Check One) Mild \_\_\_\_\_ Severe \_\_\_\_\_

Medication \_\_\_\_\_

Date of birth \_\_\_\_\_ Grade \_\_\_\_\_ Teacher \_\_\_\_\_

Parent \_\_\_\_\_ Phone number \_\_\_\_\_

Preferred Hospital \_\_\_\_\_

Health Care Provider \_\_\_\_\_ Phone Number \_\_\_\_\_

### Student Specific Emergencies:

<u>IF YOU SEE THIS</u>	<u>DO THIS</u>
<b>Symptoms of a Minor Reaction:</b>	<b>Action for a Minor Reaction:</b>
	(If condition does not improve within 10 Minutes, follow steps for a Major Reaction below.)
<b>Symptoms of a Major Reaction:</b>	<b>Action for a Major Reaction:</b>

Have you turned in an Authorization for Medication Form? Yes \_\_\_\_\_ No \_\_\_\_\_

Location of EpiPen: \_\_\_\_\_

### IF AN EMERGENCY OCCURS:

1. Stay with student or designate another adult to do so.
2. Call or designate someone to call the office manager, principal, school nurse, or 911.
  - a. State who you are
  - b. State where you are
  - c. State problem

The emergency plan has been distributed to the following:

- |  |  |  |   |
|--|--|--|---|
| <input type="checkbox"/> Classroom Teacher | <input type="checkbox"/> Parents                   | <input type="checkbox"/> PE Teacher            | <input type="checkbox"/> Music Teacher        |
| <input type="checkbox"/> Office            | <input type="checkbox"/> Principal/Vice Principals | <input type="checkbox"/> Playground Supervisor | <input type="checkbox"/> Lunchroom Supervisor |
| <input type="checkbox"/> AM Care           | <input type="checkbox"/> PM Care                   | <input type="checkbox"/> Specialists           |   |