

Emergency Prevention and Response for the Oral Health Provider School Based Practice Setting

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WV Department of Education

WV State Board of Education

(Promulgate educational rule for PreK-12,
adult vocational, institutional education facilities
and the school for the deaf and blind)

State
Superintendent
of Schools

Deputy
Superintendent

RESA

OEPA

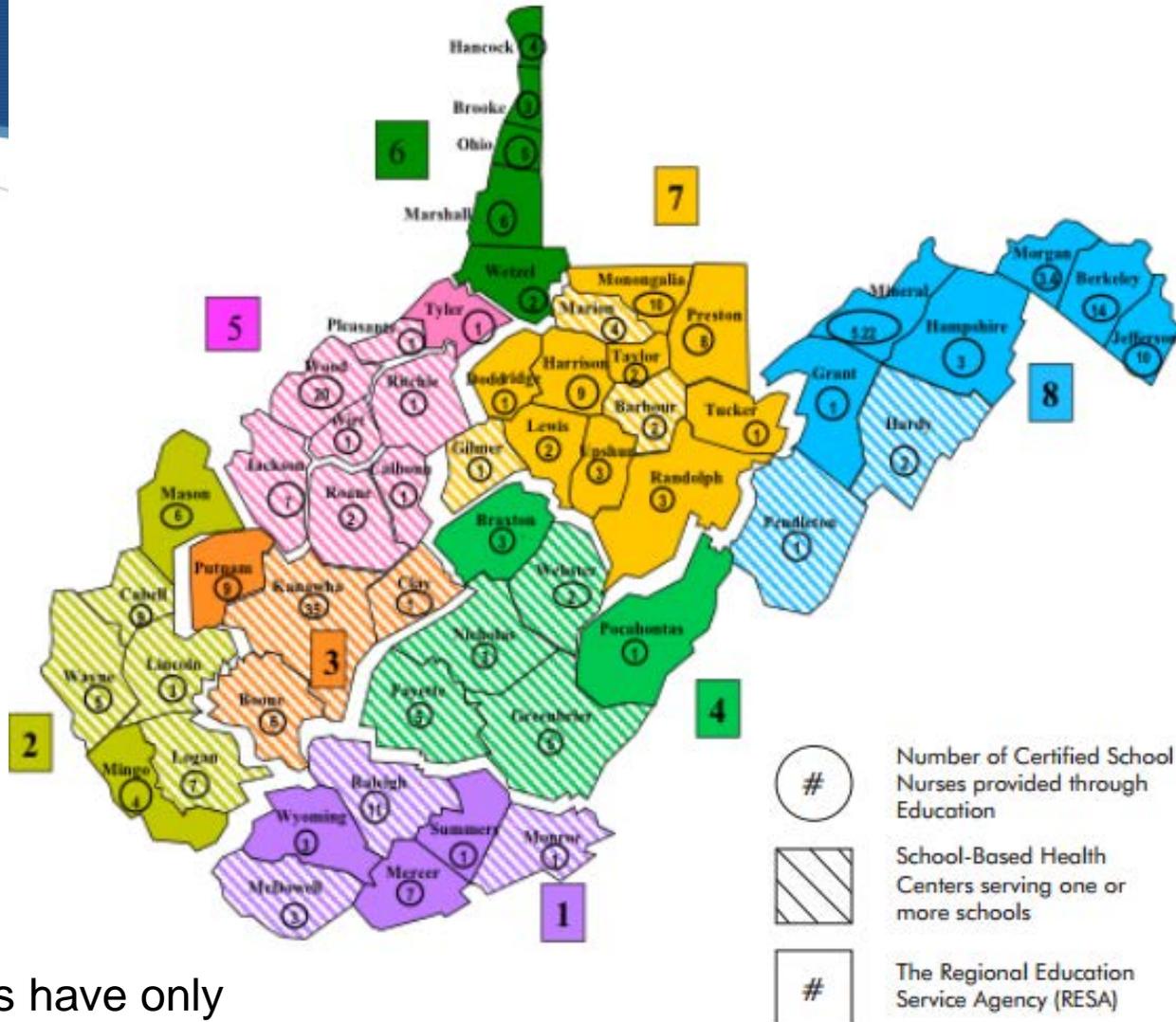
WV Department of
Education Offices

Our WV Children

- ◆ **Approximately 1 in every 5 (22%) children have medical provider ordered care during the public school day provided under the case management and supervision of a certified school nurse RN.**
- ◆ **There are approximately 275 Certified School Nurse serving 282,310 students in 730 public schools in the state of West Virginia during 2012-2013 school year.**
- ◆ **In 2012-13 school year, West Virginia had 103 Licensed Practical Nurses serving as school services personnel under the supervision of the certified school nurse to assist with the direct health services to students in West Virginia public schools.**

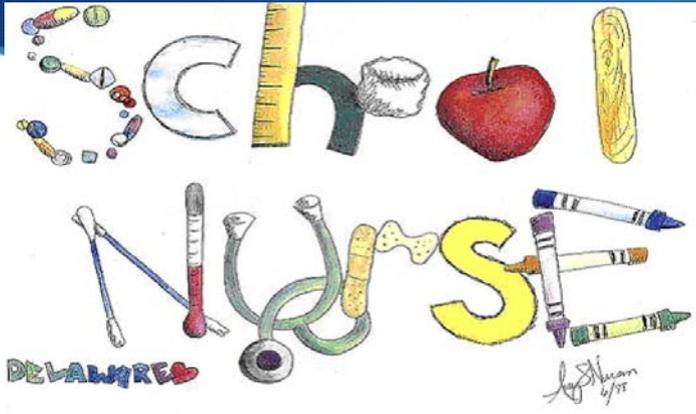
2010 - 2011 West Virginia

Distribution of School Nurses & School Based Health Centers



22 Counties have only 1-2 school nurse(s)

WV School Nurses



2010/11 School Nurse Needs Assessment

Medical Diagnoses	In-School Specialized Health Care Procedures
Asthma	Inhalers for Asthma
Behavioral Disorders	Emergency Medications
Anaphylactic Reaction	Long-Term Medications
Obesity	Special Diets per Federal Form
Mental Disorders (Depression, Bipolar, Schizophrenic, Suicidal)	Seizure Management
Close 5 th places..... Ear, Nose and Throat/ Migraine or Severe Headache/Seizures	

2010/11 Student Medical Diagnoses

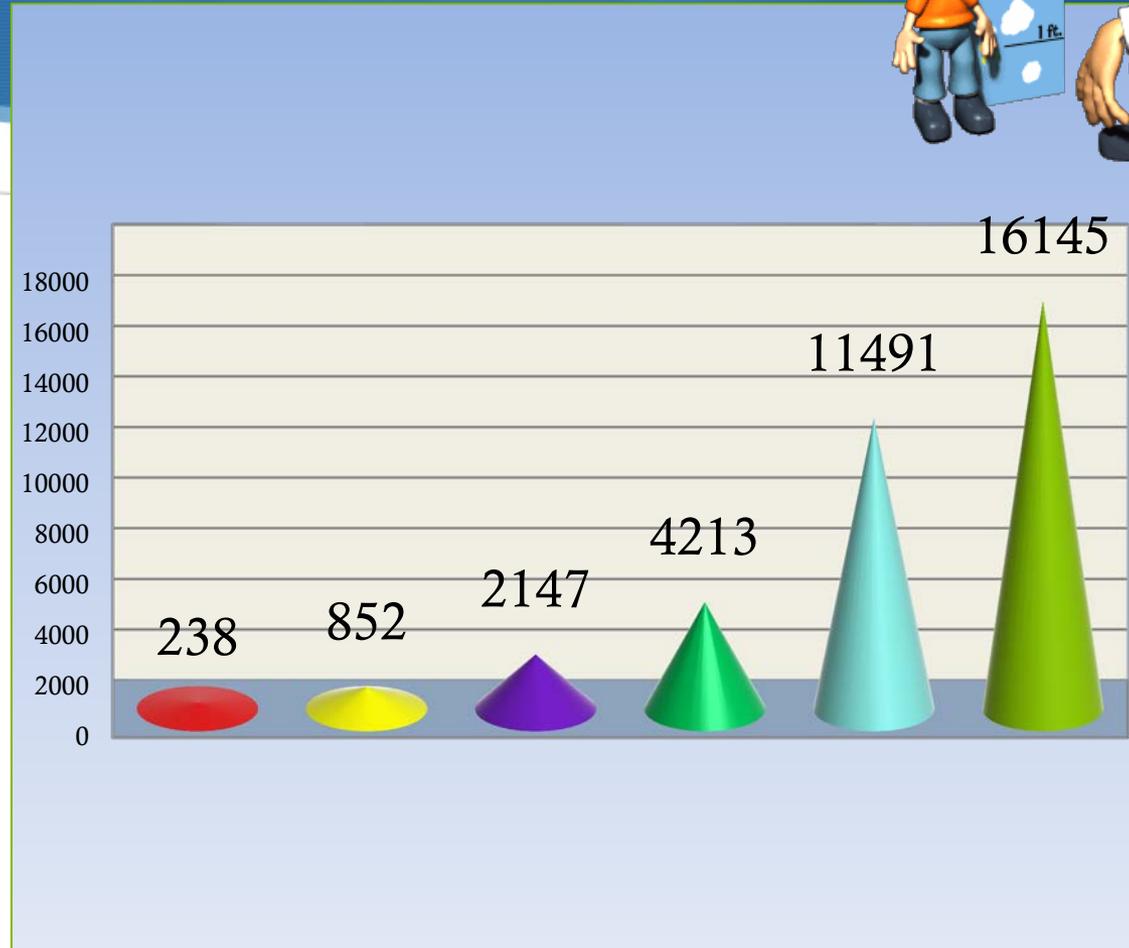


■ Diabetes Type II

■ Diabetes Type I

■ Seizures

■ Anaphylactic
Reaction



WV Data

- ◆ Lack of preventive care
- ◆ Adolescents without well-child visits and immunizations
- ◆ Poor oral hygiene and health
- ◆ Increase in teen pregnancy population
- ◆ Leading in Asthma, Obesity, Hepatitis B and C, prescription drug abuse, etc.

Dental Screening...

- ◆ By West Virginia Dental Laws, this is outside of the scope of a **nurse**.
- ◆ We do individual “oral health assessments” based on an individual complaint NOT massive screenings.



Working **SMARTER** not **HARDER**?



Together we serve the
WHOLE CHILD using the
Community Schools Approach



3 Step Approach:

- ◆ Know your environment (whole school)
- ◆ Know your smaller area (immediate surrounding)
- ◆ Know your patient

To do's before you even start Be Prepared – On Site Services

- ◆ Introduce yourself to the School Staff including the School Nurse
- ◆ What services are on site?
 - ◆ School Nurse,
 - ◆ Licensed Practical Nurse
 - ◆ School-Based Health Center (Dental, Medical and/or Behavioral Health Services)

Emergency Preparedness

- ◆ Emergency
 - ◆ School Protocol
 - ◆ Staff
 - ◆ Emergency/ Individualized Health Care Plans (IEP)
 - ◆ Review of Medical History
 - ◆ Equipment: AED, Epinephrine
 - ◆ Schools with AEDs – 451 (62%)
 - ◆ Schools without AEDs – 173
 - ◆ Undetermined – 65
 - ◆ Closest EMS
 - ◆ First Aid – Good Samaritan

Working Together

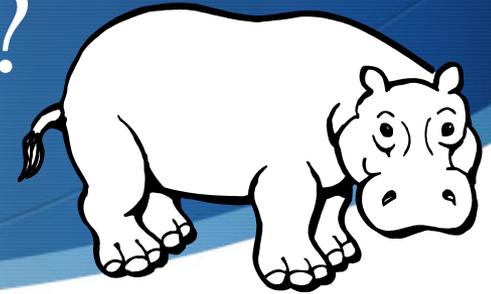
◆ FERPA & HIPAA - - - What?

What Is FERPA?



- ◆ Family Educational Rights and Privacy Act enacted in 1974
- ◆ Federal law that protects the privacy of students
- ◆ Applies to educational agencies and institutions that receive funds from any program administered by the U.S Department of Education

What Is HIPAA?



- ◆ Health Insurance Portability and Accountability Act of 1996
- ◆ Created to protect the privacy and security of individually identifiable health information
- ◆ Subject only to “covered entities”:
- ◆ Health care entities/providers that transmit health information in electronic format
- ◆ Health plans, health care clearinghouses, and health care providers

Schools and HIPAA

- ◆ Most schools do not fall under HIPAA because the only health records maintained by the school are considered “education records” of eligible students under FERPA.
- ◆ HIPAA excludes the education records of students, for that reason.
- ◆ Most schools are not “covered entities” under HIPAA, because they do not transmit health information electronically. See 45 CFR §160.102.

WHERE HIPAA & FERPA MEET:

Schools

- ◆ Fall under FERPA if under contract or direct supervision of a school.
- ◆ Must receive parental consent prior to sharing any information to a third party.
- ◆ May only share information within a school for “education purposes.”

Community Oral Health

- ◆ Fall under HIPAA Privacy Rule.
- ◆ Is allowed to share information to other health care providers, without consent, in certain instances.
- ◆ May treat minors without parental consent in some situations.

Sharing Information

Schools:

- ◆ Must receive parental consent before sharing any part of the student's record.
- ◆ Must allow parents to see the student's record.
- ◆ Can share some information with school staff, but only if needed for educational purposes.

Dental Hygienists:

- ◆ May share information with school health providers for “treatment purposes”, without consent.
- ◆ Is required to keep some information confidential, if requested to do so by the minor.
- ◆ Many have **consents to allow bi-directional information** sharing between dental, school nurse and primary care provider

WV School Nurse Directory

<http://wvde.state.wv.us/healthyschools/documents/2013schoolnursedirectory.pdf>



2013

West Virginia

School Nurse Directory

THANK YOU!



**Have a WONDERFUL
Thanksgiving!**

PREparedness

💧 Trainings

- 💧 1st Aid

- 💧 BLS/CPR

- 💧 AED

- 💧 Inhaler use

💧 Protocols

- 💧 Duties

- 💧 Drills

- 💧 Inspections

- 💧 Checklists

Emergency Events

💧 Before

💧 During

💧 After

💧 Sudden

💧 (Unexpected)

💧 Pain/Blood

PREvention



The Best Defense is ...

... A “Better” Offense

- ◆ Anticipation
- ◆ Know your patient
- ◆ Caution....
- ◆ Stop
- ◆ Reschedule



Anticipatory Offensive Objectives

- ◆ Causes
- ◆ Contributing Factors
- ◆ Signs and Symptoms
- ◆ Strategies or Steps

Emergency Events

- What is the most common emergency event associated with dental care?

Syncope



Emergency Events

- ◆ **Syncope**
- ◆ **Mild allergic rx**
- ◆ **Angina pectoris**
- ◆ **Postural Hypotension**
- ◆ **Seizures**
- ◆ **Asthma attack**
- ◆ **Hyperventilation**
- ◆ **Hypoglycemia**
- ◆ **Epi rx**
- ◆ **Anaphylaxis**
- ◆ **Cardiac arrest/MI**

Medical History

Offensive: Know your patient

- History

- Updates

- Syncope

- Allergies

- Seizures

- Asthma

- Diabetes

- Cardiac

Medical History

💧 Medications

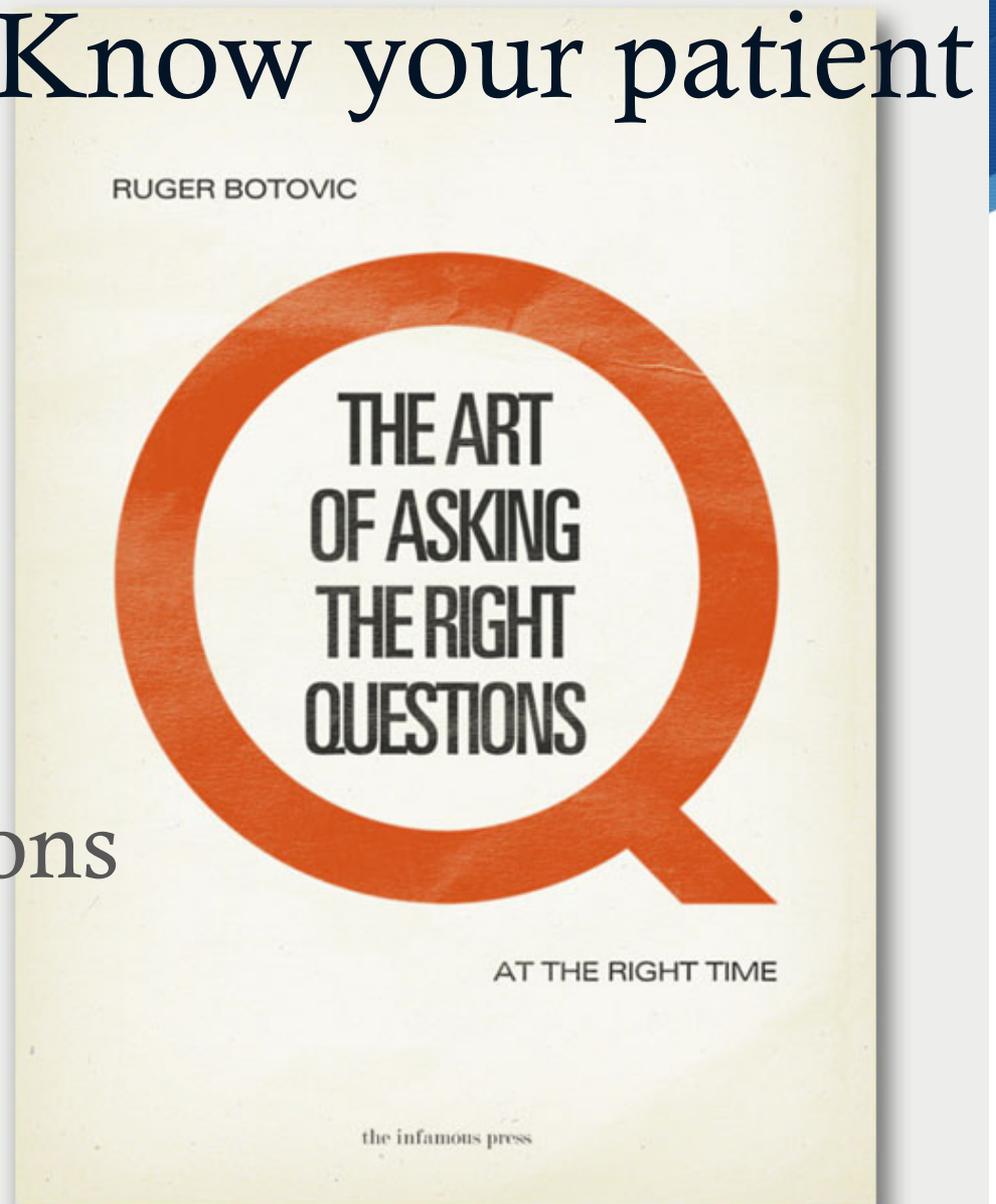
- 💧 NSAIDs
- 💧 Antihypertensives
- 💧 Niacin
- 💧 Herbs
- 💧 Inhalers

💧 Aspirin

- 💧 Goody's powder
- 💧 Headache combos
- 💧 Cold preparations

Offensive: Know your patient

- Specific
- Open ended
- Different versions



Medical History

💧 General and Today

- 💧 Fever
- 💧 Cough
- 💧 Nausea



Emergency Events Contributing Factors

- ◆ Eating/Drinking Habits
- ◆ Sleep Deprivation
- ◆ Pregnancy
- ◆ Preoccupations



A Jason Reitman Film

JUNO

Due This Holiday Season

Today is the reality

- ◆ Dental Concerns
- ◆ Previous Dental Experiences
- ◆ Current Well Being

VITAL Signs

Know your patient

- Respirations
- Heart Rate
- Observation: General Appearance
- Blood Pressure
- Temperature

VITAL Clues

💧 Syncope

💧 Hyperventilation

💧 Asthma

💧 Postural
hypotension

💧 Acute Illness

💧 ANXIETY

Scenarios



Patient Hacker

- Why ask about coughing?

Coughing: Red Flag

- Asthma

- Acute illness

- Anxious cough

- Clears throat

- **CHOKING**

- Cleaning debris

- Foreign body

Dusty Dillion

- ◆ 15 year old history of Asthma
- ◆ Hospitalized one year ago
- ◆ Uses inhaler PRN
- ◆ Last use 6 months ago
- ◆ Reports No wheezing
- ◆ Carries inhaler at school
- ◆ At presentation shoulders moving with respirations
- ◆ Breathing interrupts pace of speech
- ◆ Anxiety vs Asthma?
- ◆ What would you do?

Asthma

- ✔ Carry Inhaler
 - ✔ School nurse review
- ✔ ACT
- ✔ Further Evaluation

ACT

- ◆ SOB; heavy chest
- ◆ ADL
- ◆ Nighttime -early am cough
- ◆ Inhaler Use

Allesia Angst

- 🟢 14 year old freshman for dental cleaning
- 🟢 Back to class to get books
- 🟢 Needs to use restroom
- 🟢 Expresses concern will miss lunch
- 🟢 What is your next step?

Signs of Acute Anxiety

- ◆ Behavior
 - ◆ Diversions/Delays
 - ◆ Rude
 - ◆ Quiet
- ◆ Handshake: sweaty palms
- ◆ Appearance: pale; sighs; fidgets; stiff; clenched; slow
- ◆ Vital signs: RR and pulse up
- ◆ Other: dizzy; numbness; tingling; thirsty; weakness; nausea

Professional Strategies

- ◆ Introductions
- ◆ Shake Hands
- ◆ Welcome with
a smile

Strategies

- 💧 Minimize the wait
- 💧 Be seated
- 💧 Get history: Empathy
- 💧 Reassure: Explain the process

? Medication ?

- “Self medicated” for anxiety
 - Alcohol
 - ‘Diverted” Prescriptions
 -

Hyperventilation

- ◆ Shallow breathing
- ◆ Dizziness
- ◆ Tingling; numbness
- ◆ Heavy chest
- ◆ Rapid respiratory rate
- ◆ Fast heart rate

Hyperventilation Strategies

- ✔ Stop
- ✔ Inform patient “no more”
- ✔ Talk slow, calm, quiet voice
- ✔ Reassure
- ✔ Coaching to slow breathing

Loss of Consciousness

- ✔ Patient stands up abruptly
- ✔ Slumps on chair
- ✔ Unconscious

Loss of Consciousness

- ◆ Syncope
- ◆ Postural hypotension
- ◆ Seizure
- ◆ Hypoglycemia (Diabetic)

Syncope

- Fear
- Apprehension
- Pain
- Anticipation
- Cues
- Postural changes
- Contributing factors
 - Skipped meals
 - Dehydration
 - Prolonged reclining

Syncope

- 🟢 Head down
- 🟢 Brief
- 🟢 Awakens
- 🟢 Alert
- 🟢 Normal Vital signs

Syncope

- Medical assessment

- EKG

Seizure

- ✔ Known seizure disorder
- ✔ Off medications
- ✔ Trigger exposure
- ✔ Hypoglycemia
- ✔ Hypoxia

Seizure

- Involuntary movements
- “Protect” from harm/injury
- “Safe” zone
- Do not restrain patient

Seizure

- Postictal
 - Drowsiness
 - Confusion
 - Fatigue- sense of exhaustion
 - Vital signs
 - Emergency contact

Suzie Sugar

- ◆ 16 year old Diabetic age 7
 - ◆ Pump for 4 years
 - ◆ Has had no recent problems
 - ◆ What could increase her risk for an emergency event?
- ◆ List

Hypoglycemia

- ◆ Skipped/delayed meals
- ◆ Too much insulin
- ◆ Alcohol
- ◆ Exercise
- ◆ Sudden change in well being
- ◆ Nausea - Hunger
- ◆ 'shakey'
- ◆ Clammy
- ◆ Irritable
- ◆ Pale

Head Lice

- 💧 Nits are not a threat
- 💧 Live lice do not jump!
- 💧 Not an emergency
- 💧 Address with dignity



Emergency Events

💧 Common Threads ?

💧 Anxiety

💧 Apprehension

💧 Fear

💧 Chronic condition

Sudden Cardiac Arrest Assistance 911

**CPR is as easy as
C-A-B**



Compressions

Push hard and fast
on the center of
the victim's chest



Airway

Tilt the victim's head
back and lift the chin
to open the airway



Breathing

Give mouth-to-mouth
rescue breaths

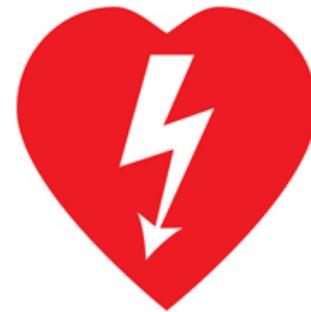
American Heart
Association 

Learn and Live

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AED

**AUTOMATED EXTERNAL
DEFIBRILLATOR**



Emergency Prevention

Anticipatory Offense
is the best
Defense



AED <http://www.youtube.com/watch?v=1eITIJRdY0k>

EpiPen

<http://eschoolcare.wellbe.me/page/load/escAIEpiPenVideo?r=escAIFoodAllergiesMeds&cid=suireference/114>

Auvi-Q

<http://www.auvi-q.com/auvi-q-demo>

MDI with Spacer Face Mask

<http://eschoolcare.wellbe.me/page/load/MDIFacemaskVideo?r=ESCAsthmaTakingMeds&cid=suireference/60>

MDI with Spacer and Mouth Piece

<http://eschoolcare.wellbe.me/page/load/MDIMouthpieceVideo?r=ESCAsthmaTakingMeds&cid=suireference/60>

MDI

<http://eschoolcare.wellbe.me/page/load/MDINoSpacerVideo?r=ESCAsthmaTakingMeds&cid=suireference/60>

