First aid is the only level of medical care that shall be permitted to be carried out by APS employees in the schools. First aid is that immediate help given by the best qualified person at hand in case of accident or sudden illness.

During the school day and during school sponsored events, including those off-site, at least one staff person shall be on duty who has a current certification from a nationally recognized course in standard first aid and CPR. First aid kits shall be stored and properly maintained in each school in accordance with applicable school health rules.

Any person who in good faith provides emergency care or assistance without compensation at the place of the emergency or accident shall not be liable for any civil damages for acts or omissions in good faith.

Treatment of injuries occurring outside school jurisdiction is not the responsibility of school employees.

The school’s obligation continues after the injury until the injured student has been placed in the care of the parent/guardian or emergency health personnel.

In all cases where the nature of an illness or an injury appears serious, the parent/guardian shall be contacted if possible and the instructions on the student's emergency card followed. In extreme emergencies, where there is potential threat to life, limb or digit, school personnel shall immediately call emergency health personnel to arrange for transporting the student to an emergency facility on advice of emergency health personnel.

No elementary student who is ill or injured shall be sent home alone nor shall a secondary student be sent home alone unless the illness is minor and the parent/guardian has consented in advance.

LEGAL REFS.:  
C.R.S. 13-21-108 (civil immunity for persons rendering emergency assistance)  
C.R.S. 13-21-108.5 (civil immunity for health care providers who assist in sports injuries)  
C.R.S. 25-53-102 (requirements concerning automated external defibrillators in schools)  
C.R.S. 24-10-106.5 (public entity duty of care)  
6 CCR 1010-6, Rule 6.13(D) (first aid and CPR certification requirement)
FIRST-AID AND EMERGENCY CARE

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CROSS REFS.: JLCD, Administering Medications to Students
JLIB, Student Dismissal Precautions
A. All parents/guardians upon registering their child in school shall complete the “Family Address and Information Form,” which identifies emergency contacts. Additionally, parents/guardians shall complete and submit a “Student Health Information” card for each student at least annually and whenever there are new or different health considerations. Parents are ALSO responsible for keeping the school informed of any changes in emergency contact information.

B. The school principal or designee shall be responsible for insuring that all required information has been provided on these forms.

C. Basic first aid care for illnesses and injuries will be rendered by trained school staff, in accordance with current guidelines established by nationally-recognized entities such as the American Red Cross, the American Heart Association or the State Department of Public Health or Safety.

D. Cardiopulmonary resuscitation (CPR) can be administered by school staff who have been trained and certified by one of the above nationally-recognized organizations. The use of an Automated External Defibrillator (AED) is possible in buildings where school staff are trained in both CPR and AED and the APS “Guidelines for Use of an Automated External Defibrillator” are followed.

E. It is recommended that three to five individuals in each building are trained and certified in CPR and have received district or nationally recognized training in first aid. As a minimum, the registered nurse and the health para shall be CPR (nationally) certified and shall have received nationally-recognized or district-offered first aid training at least every three years. It is strongly encouraged that at least two staff members in each Life Skills classroom have CPR certification.

F. When a serious accident, injury or illness occurs, the school nurse, if present, shall provide immediate care. If the school nurse is not available and if the situation is severe, the local emergency medical services (EMS) will be summoned by calling 911.
G. Every effort shall be made to notify the parent/guardian of a student who becomes seriously injured or ill while attending school.

H. If it is necessary to transport the student to a doctor or a hospital (for situations less than life-or-limb-threatening) and the parents are unable to provide such transportation

School employees may furnish transportation to the nearest hospital or urgent care facility, and they shall stay with the child until a parent/guardian or other appropriate party has assumed the responsibility.

I. Local EMS (911) will be called for any injury considered to be life-or-limb-threatening, or which meets the conditions described in the APS “Emergency Guidelines for Schools.” The parents/guardian shall be responsible for the cost of such ambulance service.

J. A "Standard Student Accident Report" (District form 1172) shall be completed in duplicate for all accidents involving serious injuries. One copy shall be retained by the school and the second copy shall be forwarded to Risk Management.

K. The Office of the Superintendent of Schools shall be notified immediately, if an incident is of a serious or unusual nature.

L. An incident report shall be filed whenever EMS is called to a school.
FIRST-AID AND EMERGENCY MEDICAL CARE

A. All parents/guardians upon registering their child in school shall complete the form entitled "School Health Information", Emergency Card.

B. The school principal or designee shall be responsible for insuring that all required information has been provided on this form.

C. When a student accident, injury or illness occurs, the school nurse shall provide immediate care. If the school nurse is not available and if the situation is severe, the Aurora Fire Department's Rescue Squad will be summoned (phone 911).

D. Every effort shall be made to notifying the parent/guardian of a student who becomes injured or ill while attending school.

E. If it is necessary to transport the student to a doctor or a hospital and the parents are unable to provide such transportation:

1. the school should try to arrange transportation to the hospital and by the ambulance service listed on the "School Health Information, Emergency Card;

2. school employees may furnish transportation, and they shall stay with the child until a parent/guardian or other appropriate party has assumed the responsibility; or

3. the ambulance service serving the Medical Center of Aurora-South Campus may be called. The parents/guardian shall be responsible for the cost of such ambulance service.

F. An "Standard Student Accident Report" (form 1172) shall be completed in duplicate for all accidents involving injuries. One copy shall be retained by the school and the second copy shall be forwarded to Risk Management.

G. The Office of the Superintendent of Schools shall be notified immediately, if an accident is of a serious or unusual nature.
FIRST-AID AND EMERGENCY MEDICAL CARE
Snakebite Treatment

1. In all cases of suspected snakebite, treatment should be for a rattlesnake bite, unless it can be immediately determined that the snake was not a rattler. QUICK ACTION IS ESSENTIAL!

2. Keep the student as calm and quiet as possible.

3. Do not cut and suck the wound.

4. Do not apply a tourniquet.

5.* Gently wash the bite with soap and water then rinse.

6.* Apply a cold compress to the wound (do not use ice as it will hasten tissue damage).

7. Take the student immediately to the nearest hospital emergency room. The hospital should be notified that a student is coming with a suspected rattlesnake bite.

8. Have a school employee notify the parents/guardian while another employee is transporting the student to a hospital.

* Nos. 5 and 6 can be omitted in the interest of time.

Note: Waiting for a Rescue Squad may be unwarranted. With private cars usually available, it would be advantageous for the student to be taken to a hospital immediately.

For additional information, see regulation JLCE-1-R.