QUICK REFERENCE CHART

SYMPTOMS AND TREATMENT FOR ASTHMA, ANAPHYLAXIS, TYPE 1 DIABETES, SEIZURE DISORDER

	ASTHMA	ANAPHYLAXIS	TYPE 1 DIABETES	ISEIZURE DISORDER
WHATITIS	Asthma is a chronic inflammatory disease of the airways. When in the presence of triggers, the airways of the lungs can react by narrowing and/or fill with mucus making it difficult to breathe. If an asthma flare-up is not treated properly, it can lead to death.	Anaphylaxis is a severe, potentially life threatening allergic reaction to a stimulus (e.g. peanuts) having sudden onset, involving one or more body systems (e.g. skin, respiratory tract, cardiovascular system) with one or more symptoms.	Type 1 Diabetes occurs when insulin-producing cells in the pancreas are destroyed by the immune system. Low blood sugar (hypoglycemia) is the greatest immediate danger. (The level of sugar present in the blood is inadequate for the brain to function properly).	Seizures are the physical effects of a sudden, brief, uncontrolled burst of abnormal electrical activity in the brain and may include unusual sensations, mental confusion, loss of consciousness, uncontrolled or repetitive muscle contractions throughout the entire body, incontinence and vomiting.
TRIGGERS	Asthma triggers: cigarette smoke, animals, dust mites, moulds, pollen, air pollution, cold air, chalk, dust, indelible markers, colds/viral infections, cleaning products, fumes, scents and perfumes/ aftershave, exercise/activity.	The most common triggers include: Food products such as: peanuts, tree nuts, milk, eggs, wheat, shellfish, fish, soy, sesame seeds, plus others. Other triggers: bee/wasp stings, latex, drugs, and exercise-induced anaphylaxis (often in conjunction with a food allergy).	Low blood sugar – hypoglycemia: Insufficient food due to a delayed or missed meal. More exercise than usual. Too much insulin.	Common Seizure Triggers include: Stress, missed medication, flickering lights, illness, fever, allergies, emotions (i.e. worry, anger, fear etc.), heat and/or humidity, fatigue, unknown causes.













RESOURCE MATERIAL

Symptoms of an asthma flare-

up/worsening asthma:Continuous coughing.

▶ Wheezing.

ASTHMA

- ▶ Shortness of breath.
- ▶ Chest tightness.
- Difficulty breathing.

Treatment:

- ▶ Give the reliever inhaler: Two puffs one puff at a time with 30 seconds between puffs.
- If performing a physical activity, have the participant stop the activity.
- ▶ If exposed to a personal asthma trigger, remove the trigger or the participant from the trigger.
- ▶ Have the participant breathe slowly and deeply.
- ➤ Two puffs of the reliever inhaler should help within 5-10 minutes. If it does not, repeat the administration of two puffs of the reliever inhaler and see below.

Symptoms that indicate an emergency situation:

- ➤ Symptoms not improving after using the reliever inhaler within 5-10 minutes.
- ▶ Breathing is difficult and fast, unable to catch breath.
- ▶ Can only say 3-5 words before needing another breath.
- Lips or nail beds are blue or gray.
- ▶ Any doubts about the participant's condition.

Treatment:

- ▶ Call 9-1-1. Always transport participant by ambulance.
- ▶ Give two puffs of the reliever inhaler immediately with 30 seconds separating puffs.
- If the participant is not feeling better and symptoms are not improving, continue inhaler every few minutes until help arrives.
- ▶ Tell participant to breathe slowly and deeply.
- ▶ Call parents/guardians.

ANAPHYLAXIS

SYMPTOMS – think F.A.S.T. A person experiencing an allergic reaction might have one of the following symptoms.

Face – itchiness, redness, swelling of face and tongue.

Airway – trouble breathing, swallowing or speaking.

Stomach – stomach pain, vomiting, diarrhea.

Total – hives, rash, itchiness, swelling, weakness, pallor (paleness), sense of doom, loss of consciousness.

Treatment: Think... A.C.T.

A - Administer the epinephrine auto injector (Epi Pen) IMMEDIATELY, at the first sign of a reaction, in conjunction with the child's contact with their life threatening allergen.

Administer the injection in the muscle, on the outer mid thigh.

Hold needle in the leg for a count of 10 seconds. Remove the needle and message the area for 10 seconds. A second dose may be administered 10-15 minutes or sooner, if symptoms have not improved or worsened.

C – Call 911. Inform EMS the participant is having an anaphylactic reaction.

T – Transport to hospital by ambulance. Participant must go to the hospital even if symptoms are mild or have stopped. Call parents/ quardians.

TYPE 1 DIABETES

Symptoms of low blood sugar – hypoglycemia:

- ▶ Cold, clammy, sweaty skin
- ► Extreme tiredness, dizziness, trembling
- Hunger, irritability, mood changes
- ► Lack of coordination, staggering gait
- ► Confusion appearing intoxicated

Treatment:

- ▶ Have participant check his or her blood sugar.
- If reading is below 4.0 on the meter give fast acting sugar immediately.
- If unable to check blood sugar, provide fast acting sugar (e.g. 6 oz juice).
- ▶ Wait 15 minutes.
- If participant still feels unwell, repeat above treatment and call parent/ quardian.
- ▶ Do not leave participant alone or to use stairs.

Symptoms of extreme low blood sugar – hypoglycemia:

Unconscious/unresponsive/ having a seizure

Treatment:

- CALL 9-1-1. Inform EMS that the participant has type 1 diabetes and is unconscious/unresponsive/ seizing.
- DO NOT give food or drink.
- ▶ Roll participant on his/her side.
- Stay with participant till ambulance arrives.
- ▶ Call parents/guardians.

DISORDER

SEIZURE

Symptoms of a convulsive (tonic-clonic) seizure:

Typically presents as a loud cry, body's muscles stiffen, falling to the ground, loss of consciousness, followed by uncontrolled jerking of entire body. Possible loss of bladder/bowel control.

Treatment:

Call 911 when a convulsive seizure occurs to a:

- participant not diagnosed with a seizure disorder.
- participant diagnosed with a seizure disorder unless a written physician's letter directs you to wait.
- if in doubt call 911.

Response to a convulsive seizure:

- 1. Keep calm. Stay with the participant. Time the seizure.
- 2. Do not restrain or interfere with seizure.
- 3. Protect the head. Use your hand, an article of clothing or a pillow under the head.
- 4. Move obstacles away from path of participant.
- 5. Loosen tight clothing especially at the neck.
- 6. Do not place anything in the participant's mouth. (It is not possible to swallow tongue)
- After the seizure subsides roll the participant to his/her side. (Allow drool/vomit to flow out of the mouth away from the throat and airway)
- 8. Talk gently to comfort and reassure the participant.
- 9. Wait for ambulance.









