

School Nurse Emergency Triage Training Protocol

School Nurse 'Need to Knows' - Nurse Response Team (NRT)

The purpose of School Emergency Triage Training (SETT) is to have a system in place for Mass Casualty Incidents (MCIs) that sorts the most amount of victims in the quickest time period, in order for proper care to take place. As a nurse, we must be able to sort and triage patients quickly - within **30 seconds** and move forward. It is our job to triage through the victims and not treat. We have teams who treat.

1. Scene safety is first and foremost, do not put yourself in a situation in which you are unsafe because you will not be able to save any lives.
2. Know your triage assessment skills and be confident in your decisions, we have the background and ability to do this role the best in a school environment.

Airway

Breathing

Circulation

Disability

Environment/Exposed

Full Assessment

Give Comfort

History/Health Assessment

Inspecting - posterior

START and **JUMPSTART** Triage - **START** is 9 years and older. **JUMPSTART** is 8 years and younger.

Simple

Triage

And

Rapid

Treatment

JUMPSTART, Always use motions and hand gestures when triaging groups so the people that cannot hear you, but can see you and who can follow directions, will follow them.

1. Respiration
2. Perfusion
3. Mental Status - **AVPU**
 - a. **Alert**
 - b. **Voice**
 - c. **Pain**
 - d. **Unresponsiveness**

JumpSTART - Why do we treat 8 years old and younger differently?

- They will crash quicker
- Harder time maintaining stability
- Burns - lose more energy quicker
- Limited glycogen stores
- Increased metabolic rate
- Higher center of gravity
- Big tongue
- Shorter neck
- Smaller diameter airway
- Higher percentage of body water
- Higher Cardiac output

GREEN - **Walking Wounded** - minor injuries and can assist in own care

YELLOW - **Delayed** - Serious injuries - won't deteriorate in next 2 hours

RED - **Immediate** - Needs immediate attention in 60 minutes - Compromised breathing/circulation

BLACK - **Expectant** - Not expected to survive or already deceased

- Are they breathing? - Lift head and reposition, give rescue breaths - if breathing, then **RED**, if not breathing, then **BLACK**.
- If breathing, is it >30bpm, then **RED**.
- Cap refill or pulses present - If outside normal limits (<2 seconds or faint or bounding), then **RED**.
 - If cap refill or pulses within normal limits, then **YELLOW**
 - If altered mental status, then **RED**

Nurses -

- Always Tag **Right** limb - arm first, then leg.
- In big groups, quickly decide an organized fashion - either zig zag through groups or group into quadrants to start the triage system.
- Then Re-triage after everyone has been initially triaged.
 - ◆ Red team is providing care to red tagged victims
 - ◆ Yellow team treats yellow, but if more victims are in red, then yellow needs to treat red.
 - ◆ All CPR certified members should be on the red or yellow team.
 - ◆ Do not send members to help green unless all victims of red and yellow have been treated first.
 - ◆ If all red, yellow, and green is done being treated, then those members can go back and re-triage black.

Team members - when handing off to EMS, tell them the following:

Situation - Anything about the situation and types of event(s)

Background - health history, mechanism of injury, any type of first aid given

Assessment - triage color, vital signs, head to toe nursing assessment, level of consciousness

(LOC)- objective, nursing documentation

Recommended Care - needs transportation ASAP - as a nurse, what do you recommend?

Transferring to Parent - always follow Jeffco's Reunification Plan, it is a slow, but necessary process to ensure accuracy and consistency.

School Response Teams (SRTs) for emergency procedures:

<https://teamjeffco.jeffcopublicschools.org/cms/one.aspx?portalId=2918833&pageId=4426053>

**Nurses need to be familiar with this document.

First Aid Zuca Bags Inventory:

Outside of Bag: Algorithm cheat sheets

Inside the bag:

1. Clipboard
2. Pad of paper
3. Green, Yellow, Red, Black folder
 - a. 3 victim tracker sheets
 - b. 1 algorithm sheet
4. Green, Yellow, Red, Black table cloth
5. Green, Yellow, Red, Back apron
6. Triage tags
7. Large notepad
8. Orange NURSE vest
9. Nasopharyngeal airways
10. 2 water bottles

Outside Zipper Bag:

1. 10-15 4x4s
2. Band aids
3. ABD pad 5x9
4. ABD pad 8x10
5. Gauze cling 4x5
6. Gauze cling roll 2x5
7. Ace wrap 2x5
8. Kerlix roll

Other outside zipper bag:

1. Scissors
2. Bulb syringe

Inside clear pocket - bottom:

1. Glucose
2. Emergency blanket

Inside clear pocket - top:

1. Sharpies
2. Ball point Pens

Outside Mesh pocket:

1. White tape - label anything
2. Green, Yellow, Red, Black electrical tape
3. Black trash bag
4. Ziploc bags - 1 gallon and 1 quart size

Tiny Zipper pouches:

- Hair ties
- 2 CPR Face shields

Outside Zipper Bag:

1. 10-15 4x4s
2. Band aids
3. ABD pad 5x9
4. ABD pad 8x10
5. Gauze cling 4x5
6. Gauze cling roll 2x5
7. Ace wrap 2x5
8. Kerlix roll

Opposite Mesh pocket:

1. Stop the Bleed kits
2. Blue gloves

Blue First Aid Bags Inventory:

Business card in back of bag

Center pocket:

1. Glucometer
2. 2 ice bags - instant cold
3. 1 emergency blanket
4. 2 triangle bandages
5. 2 burn dressings
6. 1 Finger splint
7. 10-15 4x4s
8. Band aids
9. ABD pads - 1 8x10, 1 5x9,
10. 1 Oval eye pad
11. Gloves
12. 1 roll Silk tape
13. 3 Kerlix - 4x5, 3x5, 2x5
14. Ace Bandage 2x5
15. 1 Coban
16. 1 BP cuff
17. 1 stethoscope
18. Alcohol pads and insect wipes
19. Small notebook
20. Ziploc bags - 1 gallon and 1 quart size
21. Small notebook - track items used out of bags and also anything needed for notes
22. 2 sharpies
23. 2 ball point pens

Outside Pocket:

1. 1 CPR face shield
2. 2 scissors
3. Hemostat
4. Tweezers
5. Face goggles
6. Tourniquet
7. Good time tool (Car escape tool)- seat belt cutter, glass breaker, charger, flashlight
8. Pulse ox
9. Penlight
10. 2 sharpies and 3 ball point pens

Other Outside Pocket:

1. Narcan
2. Albuterol
3. EpiPen
4. Glucose
5. Ammonia inhalants - box of 10
6. Business Card

Triangle bandage

Most common use is to sling or elevate and arm

It can also be used for:

- Covering burns on the head
- In a pinch you can use it to:
 - Wrap ankles
 - Putting pressure on bleeds
 - Stabilize shoulder injuries

1. Ask the individual to support their arm with their other hand. Gently slide the triangular bandage underneath the arm. The point of the triangle should be underneath the elbow of the injured arm. Bring the top end of the bandage around the back of the neck.



2. Fold the lower end of the bandage up over the forearm to meet the top of the bandage at the shoulder of the injured side.



3. Tie the two ends of the bandage together in a reef knot above their collar bone and tuck in the free ends.



4. Adjust the sling so that it supports their arm all the way to the end of their little finger.



5. Make sure that the edge of the bandage by the elbow is secured by twisting the fabric and tucking it in, or using a safety pin to fasten.



6. Check the circulation in their fingertips every 10 minutes. Press their nail for 5 seconds until it turns pale, then release to see if the color returns within 2 seconds.



*Pictures and step by step found on <http://www.sia.org.uk/sia/first-aid-advice/first-aid-techniques/how-to-make-an-arm-sling.aspx>