



Hemophilia and Other Bleeding Disorders at School

A regular kid with a bleeding disorder

Be sure to tell parent about any bumps and bruises that happen at school.

Early, immediate communication is key.

What do school personnel most need to know?

Blood disorders are treatable and most bleeding problems are preventable. The key to proper treatment is communication with the child and parent. If you have a school nurse on site, be in contact with them about the communication plan at your school. Children with bleeding disorders don't bleed more, they bleed more easily and longer. Though a bump may seem minor, the internal bleed can show up later. It's important to start treatment early and report all school incidents to parents. Always believe a child when he says "I have a bleed," or complains of pain.

What are the most common bleeding disorders?

The three most common bleeding disorders are:

- **Hemophilia** - a disorder of the clotting system mostly affecting boys. A protein required to stabilize blood clots is lacking. There are different 2 primary types of hemophilia and range in severity.
- **Von Willebrand disease** - a condition of low levels of Von Willebrand protein or Von Willdbrand protein that is not working normally. This is a protein in the blood that helps platelets to stick together. This is the most common inherited bleeding disorder, and affects boys and girls equally.
- **Platelet disorders** - when platelets are not working properly. Platelets are cells that serve as the first step in blood clotting.

Are there any activity restrictions for this child?

Children with bleeding disorders are like any other child – they explore, test their strength, and socialize through play and organized sports. There is no way to ensure that a child won't ever get hurt. However, some sports are just not worth the risks that they bring. For example, intentionally high-impact contact sports such as contact football, wrestling, hockey and lacrosse are advised against since the risks outweigh the benefits.

Common first aid needs

Most children with bleeding disorders respond to general first aid like any other child would. And as a general rule, communicate with the parents whenever a child with a bleeding disorder gets any injury at school – be it a scrape, bump, or bruise. You would treat minor scrapes and bruises like you would for any other child – with one exception – USE LOTS OF ICE early on for most bumps. See "RICE" on the following page.

Bleeding minor cuts, scrapes

Use standard universal precautions when handling any blood, as you would with any child, and follow school district first aid procedures.

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Bruises and bumps/muscle soreness

For a student with a bleeding disorder, Rest, Ice, Compression and Elevation (known as the acronym RICE) is your friend. Do not apply warm packs to a child with bruising or give a warm drink to child with a mouth bleed. The earlier the RICE treatment is started after an injury, the better it works:

- **R**est the injured area. If moving the injured area causes pain, this is the body's way of saying stop. Rest the affected area. Do not use or bear weight (such as standing or walking).
- **I**ce packs to the injured area will help to prevent or reduce swelling. Swelling causes more pain and can slow healing. Apply a cloth-covered ice pack to the injured area for no more than 20 minutes at a time, 4 to 8 times a day.
- **C**ompression (e.g., use of an Ace wrap) also may help to prevent or reduce swelling. Wrap the injured area with an Ace bandage snugly but not tight. It should not hurt or throb. Fingers or toes beyond the bandage should remain pink and not become "tingly." The Ace wrap should be taken off every 4 hours and reapplied.
- **E**levation means raising the injured area above the level of the heart. The affected part should be elevated so it is 12 inches above the heart, to help reduce swelling.

Problem	Recommendation
Bruising	May not need intervention. Use ice pack if painful. Communicate with parents.
Nose bleeds	Wear gloves. Tilt head forward, pinch tip (not bridge) of nose 10-15 minutes. Call parents to report bleed or if heavy bleeding does not stop after 15 minutes.
Cuts and scrapes	Wear gloves. Clean with soap and water as per school protocol.
Mouth bleeds and Nosebleeds	Wear gloves. Apply direct pressure with gauze. Tongue cuts can be more serious. Give cold things like ice or popsicle. For nosebleeds, pinch nostrils together for 10-15 minutes and have child lean forward so that they do not swallow blood. Call parents if bleeding does not stop after 10-15 minutes or rebleeds.
Menorrhagia (heavy or prolonged bleeding during menstruation)	Girls should be excused from PE class as necessary. Girls should not be restricted on use of bathroom during their period. Contact parents as needed.
Fever	If a child has a central line, call parents immediately for a temperature of 100.4° F or higher for 1 hour or any temperature greater than 101° F.
Head injury	Call 911 for loss of consciousness. Call parents immediately for <u>any</u> head trauma. Watch for symptoms such as nausea, vomiting, severe pain, blurred vision or sleepiness.
Throat/neck injury	Call 911 for any breathing trouble due to trauma to neck. Call parents immediately for any trauma to throat or neck injury. Internal bleeds to neck area can be serious.
Stomach/abdominal injury	Call parents immediately. Watch for skin color changes, tightness of the stomach muscles, increased pulse, and decreased blood pressure.

Signs and symptoms of infection of a central line

- Temperature of 100.4° F or higher for 1 hour or any temperature greater than 101° F
- Redness, swelling, pain or draining of port (central line) site

Signs and symptoms of bleeding

- A reported “tingling” or other kind of sensation
- A nosebleed that does not stop after 10-15 minutes
- Menstrual bleeding that requires having to change feminine hygiene products more than every 2-3 hours
- Arm or leg held in an abnormal position
- Obvious signs of discomfort or pain
- Area of bleeding warm to touch
- Swelling does not necessarily occur
- Muscles in the bleeding area are tight and tender to the touch
- Restriction of all range of motion indicates bleeding within a joint
- More bleeding than is expected for type of injury

Emergency plan

**CALL 911 FOR BREATHING TROUBLE OR
LOSS OF CONSCIOUSNESS**

Non-emergency plan

It is good to call a child's parents and report anytime a child with a bleeding disorder gets bumped, cut or bruised. Call parents or emergency contacts listed on page 3 right away when the student has symptoms such as:

- Unable to stop bleeding
- If the child has a central line, call if they have a temperature of 100.4° F or higher for 1 hour or any temperature greater than 101° F
- Any trauma to head, throat, neck or stomach
- If child is complaining of any pain that could indicate bleeding (above)
- Walking with a limp

Other:

For support, or when unable to reach parent or emergency contact

If a parent or emergency contact cannot be reached, for any need, urgent or not, call

**Seattle Children's Hematology Clinic
206-987-2106**

Call and ask to speak with a hemophilia nurse specialist.