

# NYACK PUBLIC SCHOOLS – Accident Procedure for Walking Trips - All Staff

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Name: \_\_\_\_\_

Date: \_\_\_\_\_

Building: \_\_\_\_\_

Trip Date: \_\_\_\_\_

Contact Cell #: \_\_\_\_\_

Destination: \_\_\_\_\_

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**ALL CHAPERONES FOR WALKING FIELD TRIPS MUST HAVE A CELL PHONE**

**All trips must have a First Aid Kit from Nurse's Office, including an EPIPEN**

**This form must be brought on all trips**

**Rationale**

This procedure is an outline to follow in the event of an accident while walking off school grounds (any walking trips where students are accompanied by District staff). The purpose of this document is to ensure the safety and well being of all parties involved. As with other procedures, this document can in no way cover all contingencies. In no case should this document be interpreted in a manner that would negate sound judgment.

In the event that a staff member or a student becomes injured or requires medical attention during a walking trip, the following outline should be followed:

**Procedure**

**1. Assess the situation:**

- ✓ **If the injury appears to be life threatening, call 911 immediately.**
- ✓ **Minor injuries may receive First Aid on the scene by District staff:** bumps, bruises, scrapes, small cuts, splinters, nose bleeds (non-contact), loss of baby tooth, and vomiting (associated with activity level). Please have the school nurse examine the student/staff upon returning to building.
- ✓ **Injuries requiring immediate medical attention by school nurse or EMS (911):** Possible dislocation or fracture, fainting, seizures, loss of consciousness, electric shock, burns, any injury to eye, neck, or back, injuries associated with extremes of temperature, all breathing issues, bee stings, and animal bites.

**2. Contact your school nurse, or if unavailable, a District Nurse to notify them of the situation:**

- Peggy D'Auria            HS    845-353-7140
- Miriam Lynn            MS    845-353-7210
- Laura Weigel (Sub)    UN    845-353-7270
- Kathleen Fredericks    LB    845-353-7250
- Pat Kozar                VC    845-353-7290

**3. Contact Building Principal, immediately:**

- ✓ Principal and/or Designee will contact:
  - District Office
  - Parent/Guardian/Staff Contact

Signature \_\_\_\_\_

Date \_\_\_\_\_