



## PROVISION OF MEDICAL CARE

### Introduction

This policy document describes the means by which Epsom College in Malaysia supports pupils with medical needs. It sets out the College's medical protocols, including the management of pupils' medicines.

The College does not discriminate against pupils who have disabilities, which for the purposes of this document includes those with medical needs, with respect to their access to the curriculum and participation in co-curricular activities.

Most pupils will at some time have short-term medical needs, such as having to complete a course of antibiotics. A few pupils, however, will have long-standing medical needs and may require medicines indefinitely to keep them well; for example pupils with well-controlled epilepsy or diabetes. Other pupils may require medicines in particular circumstances, such as those with severe allergies and those with severe asthma who may have a need for daily inhalers, plus additional doses during an attack. Pupils with medical needs are expected to attend College regularly and take part in normal activities, with, in some cases, individual support provided as necessary. Teaching staff and other adults in positions of responsibility may need to take extra care in supervising some activities to make sure that these pupils, and others, are not put at risk.

### The Medical Centre and other medical services

The Medical Centre comprises both the Medical Room in the Main College Building and Sanatorium ("San") based behind Wilson House and G4 pitch. These facilities are staffed by registered nurses, providing 24hr care during term time. Treatment, advice and support is offered to enable pupils to maintain their physical and emotional well-being during their time at the College. Parents wishing to discuss their child's particular medical needs, or to see the medical facilities provided, are welcome to contact staff at the Medical Centre at any time.

**For Medical Room**

Monday to Friday	07:30 to 18:30
Saturday	07:30 to 18:30
Sundays and Public Holidays	09:30 to 10:30 and 18:00 to 19:00

**For San**

Monday to Friday	18:30 to 20:00 Normal running of Medical Clinic 20:00 to 07:30 (Call Duty)
Saturday	18:30 to 09:30 (Call Duty)
Sundays and Public Holidays	10:30 to 18:00 (Call Duty) 19:00 to 07:30 (Call Duty)

A doctor is located nearby in *Mercato* and one of the College nurses will accompany a pupil to see the doctor as and when required. Details of a pupil's medical insurance is required by the Medical Centre in advance of a pupil joining so that such information can be provided in the event a pupil requires medical treatment, whether at the local doctors or – in the case of an emergency - by a hospital.

Boarding pupils who fall ill at College may sometimes be admitted as 'in-patients' to the Medical Centre, where they can be cared for with the necessary facilities at hand and separately overnight from other boarders in the San. Parents or guardians of a boarding pupil who will be kept in the Medical Centre for more than 24 hours will be contacted. In some cases (such as a pupil contracting an infectious disease) it may be necessary for parents/guardians to make arrangements for the pupil to go home/be accommodated with their guardian and the Medical Centre will contact them immediately to arrange this.

Although the facilities and services at the Medical Centre are fully available to day pupils who become ill or are injured while at College, it is expected that for all routine and non-emergency medical care the pupil's own doctor will be consulted. Day pupils who develop illnesses or injuries away from College and who are unable to participate in activities should bring a note from their own doctor confirming details of their illness/injury and how long the pupil is to be off sports form. This must be shown to the nurse at the Medical Centre who will issue an '**off sports chit**' to the pupil, detailing how long the pupil is off sports for and if their illness/injury is specific to a specific sport/activity. The Medical Centre will email both the Director of Sport and HMM of any pupil unable to do sports. A record will be kept by the Medical Centre on iSAMS of pupils they have seen and are officially off games. All staff may view this list but only the Medical Centre have edit rights. The reason given may state 'illness' or refer to a specific injury e.g 'ankle sprain'. More details of a pupil's illness will not be given publically.

During their first term at Epsom College in Malaysia all pupils will undergo a health check carried out by staff at the Medical Centre. It is requested that all new pupils are up-to-date regarding necessary immunisation boosters. Parents are asked to inform the Medical Centre in writing of all immunisations administered elsewhere during their child's time at College.

Pupils have access to the services of an independent Counsellor. Consultations are by appointment in the Counsellor's office above the library.

The College supports recommendations by the governing bodies of rugby and hockey for the wearing of custom-made mouth guards at all levels of both games.

Parents are expected to arrange eye tests and routine dental checks for their children during the College holidays. In an emergency the Medical Centre can assist with finding a dentist for treatment.

Special arrangements may need to be made for a pupil with long-term medical needs, including one who has to attend hospital appointments on a regular basis. It may be appropriate to develop a written health care plan for such a pupil, involving the parents, the pupil's own doctor, the HMM/Head of Prep School. It is recognised that inadequate support for a pupil's medical needs may have a significant impact on the way he or she functions in and out of College. The impact may be direct in that the condition may affect his or her cognitive or physical abilities, behaviour or emotional state. Some medicines may also affect learning, leading to poor concentration or difficulties in remembering. A health care plan would include details of the pupil's condition, special requirements (like dietary needs), possible side effects of any medicines, what constitutes an emergency, what action to take in an emergency, what not to do in the event of an emergency, who to contact in an emergency and the role teaching staff can play.

The College has in place suitable procedures for dealing with medical emergencies, including sports injuries. Teaching and other staff are encouraged to acquire and maintain first aid qualifications. A record of such training qualifications is held in the College Medical Centre.

If a pupil requires emergency medical treatment while under the College's care, every effort will be made to obtain a parent/guardian's consent beforehand. However, should the College be unable to contact a parent/guardian, and delay in receiving treatment might prove serious, the Headmaster or HMM/Head of Prep, acting on the parents' behalf, is authorised to provide the necessary consent for urgent treatment (including anaesthetic or operation) recommended by a doctor.

A written record is kept at the Medical Centre of all illnesses, accidents and injuries suffered by pupils while in College and all medication, treatment, and first aid administered to pupils.

### **Sharing Pupils' Medical Information**

The College aims to co-operate closely with parents and health professionals to ensure that a suitably supportive environment can be provided for pupils with medical needs.

Parents are requested to provide the College with sufficient information about their child's medical needs should treatment or special care be needed. All parents of pupils about to be admitted to the College are required to complete a questionnaire giving details of their child's medical history. Information contained in the questionnaire forms part of the pupil's medical records and remains confidential to the Medical Centre staff in accordance with their professional obligations. Parents are given the opportunity to update this information using a special form sent out at the start of every year.

In order to ensure the safety and well-being of all pupils, **essential** medical information will be shared with teaching staff and others responsible for the day-to-day supervision of their child (for example, allergies or pupils with a special medical condition such as asthma or diabetes).

The Pupil Medical Information Form can be located on the College web-site. This can be returned electronically to the Medical Centre by email, post or in person. Such information is stored on the College's MIS - iSAMS - to which teaching staff have access to essential information. It is made clear that parents are responsible for updating the information and for keeping the College informed about changes to their child's health and medical needs throughout his or her time at the College. The information must be received by the Medical Centre before the pupil commences his/her first day at the College. A pupil may not be permitted to board without such information having been received and the pupil's HMM informed of any special medical conditions. This is to ensure the wellbeing of all pupil's in our care. Parents must accept that if information is withheld staff may not be held responsible if they act incorrectly in giving medical assistance to a pupil while undertaking their duty of care in what they consider to have been good faith. Sharing information is important if staff and parents are to ensure the best care for a pupil. It is particularly important to have sufficient information about the medical condition of any pupil with long-term medical needs. Inadequate support for the medical needs of a child may have a significant impact on the experiences of the child and the way he or she functions in or out of College.

Parents of children who have suffered from any serious illness or accident during a College holiday must notify the HMM/Head of Prep School before the beginning of the following term. This would apply also to half-term breaks. A report from the family doctor or the specialist consulted would be appreciated. In the case of an infectious illness, parents must contact the College before their child leaves home to enable the College Medical Centre to decide if the pupil may return to College.

Pupils returning with medicines, both from Malaysia and from overseas must provide written details from the prescriber of the name, nature, dose and quantity of the medication supplied. All such details must be written in or translated into English. The College Healthcare Co-ordinator's permission must be sought before a pupil may keep and use such medicine while under the care of the College's teaching and medical staff. Where permission is not granted but the pupil continues to keep and use the medicine, parents and guardians will be informed and expected to accept full liability. Normal procedures apply to the storage, administration and recording of such medicines. HMMs and Matrons will routinely check and confiscate any medicines found within the Boarding House.

The College recognises that a pupil may seek medical advice outside College without his or her parents' knowledge. Responsibility for keeping the College informed about the pupil's medical needs then rests with the pupil him/herself. In particular, if as a result of the pupil seeking medical advice without his or her parents' knowledge medication is prescribed or otherwise obtained, the pupil must notify the College Medical Centre/HMM before that medication is brought to College.

Teaching staff and others who have direct responsibility for the care and welfare of pupils in the normal day-to-day running of College activities, both on and off campus, are required to familiarize themselves with the individual medical needs of the pupils in their care, as detailed on iSAMS. HMM should bring details of the special medical needs of any particular pupil to the attention of teaching staff where there is a real need to know; in particular when a change has occurred in the pupil's medical condition.

### **Confidentiality within the Medical Centre**

The Medical Centre aims to provide a safe environment where the College nurses are able to have a private consultation with pupils or staff. All information given to the College nurses is treated as confidential. All records, both written and electronic, are kept securely and accessed by the College nurses only. Parents must respect that their child has a right to confidentiality and may not always wish to inform parents of a condition or treatment. Permission to disclose information to parents will be discussed with the pupil beforehand. All staff with access to medical information will have a confidentiality clause written into their employment contract.

There are occasions when other members of staff need to be aware of a pupil's medical condition, for example in cases of severe allergies or asthma. This information may also be displayed in the pupil's general records on iSAMS. Parents of pupils going out on College trips must complete consent forms detailing any medical issues which is given directly to the teachers involved, and so preventing the need for any possible breaches of confidentiality from the nursing staff.

If a pupil has to be sent home by the nursing staff, for safety reasons they must inform their HMM but do not have to divulge any confidential medical details unless they are happy to do so. If requested, names and times of people having consultations with the nurse may be given to the Deputy Head (Pastoral), but without any confidential medical information, including the reason for the consultation.

The nurses may meet with HMMs on a regular basis to discuss pastoral concerns of any pupils. It is recognised that although it is desirable for teaching/pastoral staff to be aware of any social issues, nurses are still bound by their code of confidentiality, and must be mindful of this when sharing information.

If the nurse feels that a pupil has raised an issue which would benefit from support from his/her teachers, the nurse will ask for consent to discuss it with the relevant staff and also for the pupils themselves to seek support from other staff where appropriate. If the nurse feels it is in the child's best interest to breach their confidentiality, for example in cases of child abuse or serious bullying, then the pupil must be informed prior to disclosing any confidential information to other staff or parents. The nurse must be aware that they may need to justify these actions at a later date.

In Malaysia, until a person turns 21, the parents have the right to access their child's medical records. Once a person turns 21, only then will they be asked whether they would like their parents to be informed. Therefore, the Medical Centre will, as a matter of course, notify parents of any medication or visits to a doctor required by a pupil at the College.

### **Administering Pupils' own medicines**

Many children will need to take medicines during their time at College. It is clear that boarders need to have such medicines kept at College on their behalf and made available to be taken at appropriate times. However, such medicines should only be brought to College by a day pupil when absolutely necessary; that is where it would be detrimental to the pupil's health if the medicine were not administered during the College day. It is therefore helpful, where clinically appropriate, if medicine is prescribed in dose frequencies that enable it to be taken outside College hours. Any boarding pupil, for whom provision must clearly be made to take

medicines while on College premises, should if at all possible have that medicine administered at the start or end of the College day so that the medicine remains at all times either in the house or in the Medical Centre.

It is accepted, however, that there are circumstances where a pupil does need to take medicine during the College day. This will usually be for a short period only; perhaps to finish a course of antibiotics or to apply a lotion. Allowing pupils to do this may minimise a period of absence.

However, pupils are not allowed to carry or keep medicines at College, unless permission has been sought and agreed by the pupil's parents in advance with the HMM and the Medical Centre. Such permission will usually only be given to pupils who are at least 16 and in a Sixth Form Private Study. This applies to both prescribed and non-prescribed ('household') medicines. For any pupils below this age or in a shared room, medication will need to be stored in the Medical Centre and taken in the presence of a College nurse at an agreed time. A record of what has been taken will be made. Parents in any doubt about the appropriateness of their child carrying medicine at College, taking fully into account the safety of other children as well as their own, must come down on the side of caution. The only exception to this may be for pupils with long-term medical needs, such as those with severe asthma who may need to carry an inhaler at all times. It must be stressed that parents are responsible for keeping the College informed about changes to their child's medical needs,

The Medical Centre will produce a Risk Assessment for any Medicines the pupils bring into College (with their permission) or prescribed whilst at College. The only exception to this will be for household pain relief items administered over a 24 hour period, provided parents have confirmed on the Pupil Medical Form on joining that they granted consent for these medicines to be administered and the College had been made aware of any allergies. The Risk Assessment should give brief details: length of course, dose frequency and possible side effects but not the nature of the medical condition for which it was prescribed. The Risk Assessment will be emailed to the pupil's HMM so that they are aware of any medication within the Boarding House. The HMM is expected to speak to the pupil to check the safe storage of the medication and, once the HMM is happy, sign and file the Risk Assessment in their House Medical File.

Any prescribed medicines must be brought to College and kept at all times in the original labelled container, as dispensed by a pharmacist, and carry the prescriber's instructions for administration (the 'patient's information leaflet'). Details should include:

- name of pupil
- name of medicine
- dose
- method of administration,
- time and frequency of administration,
- any side effects
- expiry date

Proprietary non-prescription ('over the counter') medicines and other homely remedies must also be brought in and kept in the original container with the manufacturer's instructions for use. Pupils' own prescribed and non-prescribed medicine may be administered:

- at the Medical Centre under the supervision of qualified medical staff
- by untrained and unqualified staff such as housemasters/mistresses and tutors
- by pupils 'self-managing' their medicine (\*with the required agreed permissions)

There is no legal duty that requires College staff to administer medicines. However, HMMs may be willing in some circumstances to take on this responsibility, or may be willing to assist in other ways; for example, where medicine must be kept refrigerated. During term time there is always on duty in the Medical Centre at least one appropriately trained member of staff who is able to manage medicines as part of his or her duties. However, it is essential that any medication administered by a pupil's HMM (or another member of staff) is properly recorded with an email sent to the Medical Centre informing them of what has been administered, how much and when. IA non-qualified member of staff must never make a diagnosis of an illness themselves and must always consult the pupil's Medical record to check for an allergy before dispensing any medication.

Unqualified staff must check with staff at the Medical Centre before agreeing to administer any medicine to a pupil. It may be necessary to give staff special instruction to ensure that they are aware of issues such as the indications for the use of the medicine, contra-indications, side effects, dosage, precautions to be observed during administration, reasons for not administering the medicine and the duration of treatment before further medical advice is sought.

Staff in any doubt about procedure should not administer the medicine but check with the parents or the Medical Centre before taking further action. If staff have any other concerns related to administering medicine to a particular pupil, the issue should be discussed with the parent, if at all possible, or with Medical Centre staff.

If a pupil refuses to take medicine, staff should not force them to do so, but should make a note of this in the pupil's record. The Medical Centre and the pupil's parents should be informed of the refusal on the same day. If a refusal to take medicine results in an emergency, normal emergency procedures should be followed.

### **Pupils' Self-Management of Medicines**

The College aims to support pupils who are willing and able to take responsibility for managing their own medicines and who fully understand the dangers of misuse, and regards this as good practice. Pupils, especially those with a long-term illness, should if at all possible be encouraged to participate in decisions about their medicines and accept complete responsibility, with full parental approval. Children develop at different rates and so the age at which pupils are ready to take care of and be responsible for their own medicines varies. This needs to be borne in mind when making a decision about transferring responsibility to a pupil: there is no set age when this transition should be made.

There may be circumstances where it is not appropriate for a pupil of any age to self-manage his or her medicines. Parents who do not wish their child to manage their own medicine may stipulate that their child's medicine is kept and administered by the Medical Centre. But those parents who are willing to accept this responsibility on behalf of their child as well as themselves may make an appropriate request to the College via their child's HMM. (As stated earlier in this document, the HMM/M must always be informed in advance by parents before a pupil is allowed to carry or keep medicines in College.

It must be accepted by all concerned that medicines may be harmful to anyone for whom they are not appropriate. The College recognises its legal obligation to assess the risk of misuse of prescribed and non-prescribed medicines kept by its pupils. Details of this assessment, which must be undertaken in every instance, are set out at the end of this document. The final decision on whether or not a pupil may carry or keep medicine while at College must rest with the College Healthcare Co-ordinator. They will need to take into consideration the safety of other children and medical advice from the prescriber in respect of the individual child.

Where permission is not granted (by either parent, the HMM or College Healthcare Co-ordinator) for a pupil to carry or keep medicine while at College, the medicine will be administered under the supervision of the staff in the Medical Centre. The administering member of staff and the pupil will both sign the record to confirm issue and receipt of the medicine.

Occasionally, a pupil in the College will be prescribed a controlled drug (e.g. Ritulin). Controlled drugs must not be handled by minors (pupils below the age of 18) and arrangements will need to be made for pupils to store and take their medication at the Medical Centre. It is good and safe practice to have all controlled drugs kept and administered in the Medical Centre, where special precautions regarding secure storage, record keeping and disposal of unwanted supplies can be arranged. A suitable Risk Assessment and monitoring of the controlled medication by the Medical Centre will also be produced, detailing the medication dosage and keeping a record of how many tablets remaining on a daily basis. Occasionally there may be a need for the pupil's HMM to store and administer the controlled drug; in which case the same recording and safe storage principles must apply.

### **Protocol for Administering Home Remedies**

It is recognised that there are circumstances in which those responsible for a group of pupils away from College (e.g. on a field trip, camp, expedition or overseas visit) staff may be asked to hold medication provided by individual pupils, either prescribed or non-prescribed 'homely remedies', for administration when either they consider it necessary or when a pupil requests it. Under conditions set out in the College's off-site operating procedures, parental consent must be obtained before these can be administered. As with all medicines, they must be stored safely and securely, and preferably in a locked cupboard to which only members of staff assuming responsibility have access. Pupils must never be allowed to 'help themselves'. Staff should not carry non prescribed or 'homely remedies' to be given on an ad hoc basis.

During term time and while on the College campus, there should be no need for any member of staff other than those who work in the Medical Centre to supply non-prescribed 'homely remedies'. An exception might be made for paracetamol-based painkillers, which house staff may be prepared to issue, for example, at night. Medicines may not be given to a pupil under the age of 18 without the written consent of his or her

parents. The Medical Centre lists 11 medications on the medical form and during the initial meeting with parents, the names of each drug are read out to parents.

### **General Guidelines for Staff**

Staff issuing and administering any medicine to a pupil must observe the following protocol:

- Establish the reason for giving the medicine to the pupil at that time
- Check whether the pupil is allergic to any medicine
- Check whether or not the pupil has taken any medicine recently and, if so, what and when (to ensure that the maximum dose recommended for that age, printed on the container or pack, is not exceeded)
- Check whether or not the pupil has taken that medicine before and, if so, whether there were any problems
- Check that the expiry or 'use by' date on the container or pack has not passed
- Supervise the pupil taking or applying the medicine
- Record the details: the name of the pupil, the nature of the medicine, the reason why the medicine was administered, the dose, and the date and time. These must be recorded immediately in the relevant house incident book, expedition log, etc. with the member of staff administering the medicine signing and dating the entry

### **Common Conditions – Practical advice for teaching staff**

The long-term medical conditions in children that most commonly cause concern in schools are asthma, diabetes, epilepsy and severe allergic reaction (anaphylaxis). Some basic information about these conditions is offered on the following pages, but it is clearly beyond the scope of this document to provide detailed medical advice. It is important that the needs of pupils are assessed on an individual basis.

A note will be made on iSAMS of all pupils who have any of these conditions.

#### **Asthma**

Asthma is common and appears to be increasingly prevalent in children and young people.

The most common symptoms of asthma are coughing, wheezing or a whistling noise in the chest, tight feelings in the chest or a shortness of breath. Not everyone will get all these symptoms, and some pupils may only get symptoms from time to time.

There are two main types of medicines used to treat asthma. Relievers (blue inhalers) are medicines taken immediately to relieve asthma symptoms. They are sometimes taken before exercise. Preventers (brown, red and orange inhalers, sometimes tablets) are usually used out of College hours.

Pupils who suffer from asthma need to have immediate access to their reliever inhalers when they need them, and they should always be available during games, other outdoor pursuits and on educational visits. A spacer device is used with most inhalers, and the pupil may need some help to fit this. It is good practice to support pupils with asthma to take charge of and use their inhaler, as most manage to do.

The Medical Centre has a supply of non-prescribed inhalers for emergency use.

## Diabetes

Diabetes is a condition where the level of glucose in the blood rises. This is either due to the lack of insulin (Type 1 diabetes) or because there is insufficient insulin for the pupil's needs or the insulin is not working properly (Type 2 diabetes). About one in 550 school-age children have diabetes. The majority have Type 1 diabetes. They normally need to have daily insulin injections, to monitor their blood glucose level and to eat regularly according to their personal dietary plan. Children with Type 2 diabetes are usually treated by diet and exercise alone.

The diabetes of the majority of children is controlled by injections of insulin each day. Older children may be on multiple injections and others may be controlled on an insulin pump. Most can manage their own injections.

Increasingly, older children are taught to count their carbohydrate intake and adjust their insulin accordingly. This means that they have a daily dose of long-acting insulin, usually at bedtime; and then insulin with breakfast, lunch and the evening meal, and before substantial snacks. They are taught how much insulin to give with each meal, depending on the amount of carbohydrate eaten. They may or may not need to test blood sugar prior to the meal and to decide how much insulin to give.

Pupils with diabetes need to ensure that their blood glucose levels remain stable and may check their levels by taking a small sample of blood and using a small monitor at regular intervals. They may need to do this at lunchtime, before games or more regularly if their insulin needs adjusting. They also need to be allowed to eat regularly during the day. If a meal or snack is missed, and possibly after strenuous activity, a pupil may experience a **hypoglycemic** episode (a 'hypo') during which blood glucose levels fall too low. Staff in charge of games and other outdoor activities should be aware of the need for pupils with diabetes to have glucose tablets or a sugary drink to hand. Hunger, sweating, drowsiness, pallor, glazed eyes, shaking or trembling, lack of concentration, irritability, headache and mood changes, especially angry or aggressive behaviour, are all indicators of low blood sugar — a hypo in a pupil with diabetes. It is very important that the pupil is not left alone and that a fast acting sugar, such as glucose tablets, a glucose rich gel, or a sugary drink is brought to the pupil and given immediately. Slower acting starchy food, such as a sandwich or two biscuits and a glass of milk, should be given once the pupil has recovered, some 10 to 15 minutes later. The Medical Centre should always be contacted.

Some children may experience **hyperglycaemia** (high glucose level) and have a greater than usual need to go to the toilet or to drink.

Tiredness and weight loss may indicate poor diabetic control, and staff will naturally wish to draw any such signs to the attention of parents and Medical Centre staff. If the pupil is unwell, is vomiting or has diarrhoea this can lead to dehydration. If a smell of pear drops or acetone can be detected this may be a sign of ketosis and dehydration and the pupil will need urgent medical attention.

## **Epilepsy**

Children with epilepsy have repeated seizures that start in the brain. An epileptic seizure, sometimes called a fit, turn or blackout can happen to anyone at any time and for many reasons. At least one in 200 children have epilepsy, but most of those with diagnosed epilepsy never have a seizure during the College day. Epilepsy is a very individual condition.

What the pupil experiences depends whether all or which part of the brain is affected. Not all seizures involve loss of consciousness. When only a part of the brain is affected, a pupil will remain conscious with symptoms ranging from the twitching or jerking of a limb to experiencing strange tastes or sensations such as pins and needles. Where consciousness is affected, a pupil may appear confused, wander around, be unaware of the surroundings and may not respond if spoken to. Afterwards there may be little or no memory of the seizure.

In some cases such seizures go on to affect all of the brain and the pupil loses consciousness. The muscles become stiff and rigid, the pupil may fall down, and then there are jerking movements as muscles relax and tighten rhythmically. During a seizure breathing may become difficult and the pupil's colour around the mouth may change to pale blue or grey. After a seizure a pupil may feel tired, be confused, have a headache and need time to rest or sleep.

Another type of seizure affecting all of the brain involves a loss of consciousness for a few seconds. The pupil may appear 'blank' or 'staring', sometimes with fluttering of the eyelids. Such absence seizures can be so subtle that they may go unnoticed. They might be mistaken for daydreaming or not paying attention in class. If such seizures happen frequently they could lead to deteriorating academic performance.

Most children with epilepsy take anti-epileptic medicines to stop or reduce their seizures. Regular medicine should not need to be administered during the College day. Triggers such as anxiety, stress, tiredness or being unwell may increase a pupil's chance of having a seizure. Flashing or flickering lights and some geometric shapes or patterns can also trigger seizures, but this is very rare. Most children with epilepsy can use computers and watch television without any problem. During a seizure it is important to make sure that the pupil is in a safe position, not to restrict his or her movements and to allow the seizure to take its course. In a convulsive seizure putting something soft under the pupil's head will help to protect it. Nothing should be placed in the mouth. After a convulsive seizure has stopped, the pupil should be placed in the recovery position and monitored until he or she has fully recovered. The Medical Centre should always be contacted.

## **Anaphylaxis**

Anaphylaxis is an acute, severe allergic reaction requiring immediate medical attention. It usually occurs within seconds or minutes of exposure to a certain food or substance, but on rare occasions may happen after a few hours. Common triggers include peanuts, tree nuts, sesame, eggs, cow's milk, fish, certain fruits such as kiwifruit, and also penicillin, latex and the venom of stinging insects (such as bees, wasps or hornets).

The most severe form of allergic reaction is anaphylactic shock, when the blood pressure falls dramatically and the patient loses consciousness. More commonly among children there may be swelling in the throat, which can restrict the air supply, or severe asthma. Any symptoms affecting breathing are serious.

Less severe symptoms may include tingling or itching in the mouth, hives (weals) anywhere on the body, generalized flushing of the skin or abdominal cramps, nausea and vomiting. Even where mild symptoms are present, the pupil should be watched carefully: they may be heralding the start of a more serious reaction.

Letters giving details of the procedure to be followed in the event of a pupil developing an allergic reaction or anaphylactic shock are sent from the Medical Centre to parents of children who are known to be at risk. Parents complete a comprehensive form that enables Medical Centre staff to draw up a care plan.

The treatment for a severe allergic reaction at ECiM is the use of antihistamine tablets.