



Bleeding Disorder Action Plan

STUDENT DETAILS

Name:	Date of birth:
Room/Year level:	Teacher name:
Medical diagnosis: Von Willebrand disease (VWD) Platelet disorder Deficiency of Factor: Fibrinogen disorder Other	
Parent name:	Parent signature:

EMERGENCY CONTACT DETAILS

Parents/guardians should always be contacted in the first instance regarding any health concerns.

1. Parent/guardian:
2. Ambulance: **000**
3. The Royal Children's Hospital (RCH) switchboard: **03 9345 5522** (ask for Haematologist on call)

ABOUT YOUR CHILD'S BLEEDING DISORDER

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ACTION PLAN IS ACCURATE AS AT:

Date:	Doctor name:	Doctor signature:



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TRAUMA, INJURY AND BLEEDING ACTION PLAN (FIRST AID)

1. Apply standard First Aid procedures—Protect, Rest, Ice, Compression, Elevation (P.R.I.C.E).
2. Apply firm and sustained pressure for 5 to 10 minutes to cuts or grazes.
3. Nose bleeds should normally stop by applying firm pressure to the nostrils for 10 to 20 minutes.
4. Bruises are common and generally don't need treatment.

ALERT

A child with a bleeding disorder does not bleed faster than a person without a bleeding disorder, but will bleed for longer. The child will NOT gush blood from a simple cut or injury.

Children with bleeding disorders should not take aspirin or ibuprofen. Paracetamol is safe to use.

SIGNS AND SYMPTOMS OF A BLEED

- the child says it hurts (or a young child does not settle as usual)
- visible bleeding (nose bleed, bleeding from the mouth, deep cut, heavy period)
- the skin over an injured muscle or joint feels warm and/or appears red
- swelling (the injured area is larger than the other arm or leg)
- not able to move arm or leg
- limping or pain while walking

CONTACT PARENTS IF SERIOUS INJURY TO:

- head (head injury)
- eye
- throat and neck (difficulty breathing)
- chest or spine
- abdomen
- joints and muscles
- broken bones
- severe cuts requiring stitches

ADDITIONAL RESOURCES

If you require additional bleeding disorder resources please go to Haemophilia Foundation Australia:
www.haemophilia.org.au