

General Cardiac Action Plan

Student Name: _____ D.O.B. _____ Teacher: _____

Condition: _____

Explanation of Condition: _____

Example: Marfan syndrome is a heritable disorder of the connective tissue that affects mainly the heart and vessels, skeleton, lungs and eyes.

Medications Currently Taking:

Allergies: _____

Past Medical History:

Signs and Symptoms:

- ANY type of chest pain----front, back or both---especially if it is severe or sharp and has a burning or tearing quality.
- Pain, paleness (pallor), or weakness of either the arms/hands or legs/feet or both.
- Respiratory difficulty
- Lethargy/fatigue or temperature over 100 F.
- Other Symptoms: _____

ACTIONS:

1. Report any of above signs and symptoms IMMEDIATELY to Health Office
2. _____ Call 911 (alert EMS that student has Marfan Syndrome or other disorder)
3. _____ Have student lay down and keep calm
4. _____ Call Parents
5. _____ Other Interventions _____

Father _____ Phone # _____

Alternate # _____

Mother _____ Phone # _____

Alternate # _____

Emergency Contact _____ Relationship: _____

Phone # _____

Physician _____ Phone # _____

Parent Signature _____ Date _____

Physician Signature _____ Date _____