**Headache Action Plan and Medication Orders for School/Childcare** Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: Date of Birth: \_\_\_

Place student photo here

School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact: Phone: \_\_\_\_\_\_\_\_\_\_\_

Treating Provider: Phone: \_\_\_\_\_\_\_\_\_\_\_

**\*This plan is valid for 12 months unless specified otherwise in district policy\***

***Headache Information***

My diagnosis is: Triggers:

Aura (if any):

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| --- | --- |
| *I authorize the quick-relief medication(s) listed in the Yellow Zone:*  Provider’s Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_  School Nurse’s Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_  Parent/Guardian’s Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_  **Parent/Guardian Phone Number:** ­­1)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_2) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | *to be administered by school personnel*  *to be administered only by parent*  *Student understands the proper use of his/her medication and in my opinion can carry and administer at school independently, in alignment with school policy.* |

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| **Green Zone – Prevent more headaches** | | |
| **Do/take this every day to help prevent YOUR headaches:**  It may take 4-6 weeks to see a big change, so stick with it!  Visit [*www.headachereliefguide.com*](http://www.headachereliefguide.com/) to manage your headaches | Image result for green apple | * Get enough sleep; keep a regular schedule * Eat healthy foods; don’t skip meals * Drink enough water; avoid caffeine * Get regular exercise; manage your weight * Learn ways to relax; manage your stress |
| **Yellow Zone – 1st line and 2nd lines** | | |
| **Go to the health office right away. Take your quick relief medicine as soon as your headache starts.**  •Drink some water or sports drink if you can  •Allow to rest in a dark, quiet place for up to 30 minutes, and practice your relaxation exercises (e.g., deep breathing, guided imagery), if you can  •You may need a different PE activity, dark glasses, or a quiet place to work for a while  **Parent**: let provider know if child needs to take their quick relief medicines 3 or more days a week or if this plan is not working. | Related image | 1) Take \_\_\_\_ Dose Route \_\_\_\_\_ May repeat after \_\_\_\_\_ hours.  2) Take \_\_\_\_ Dose Route \_\_\_\_\_ May repeat after \_\_\_\_\_ hours.  3) Take \_\_\_\_ Dose Route \_\_\_\_\_\_ May repeat after \_\_\_\_\_ hours. |
| **Red Zone – Time to get more help – 3rd line** | | |
| **If headache persists and student is unable to participate in schoolwork after all above treatments/accommodations have been offered:**  **Parent** needs to contact **provider’s office**­­ if:   * Child’s headache is much worse, lasting much longer than usual   **Parent** needs to take child to the **Emergency Room** if:   * Child has new and very different symptoms like loss of vision, unable to move one side of your face or body, trouble walking or talking, very confused or unable to respond | Image result for call | * **Contact parents to pick up student and administer further medications at home.** * **Call 9-1-1 if** child experiences any of these symptoms: loss of vision, unable to move one side of face or body, trouble walking or talking, very confused or unable to respond, loss of consciousness. * Call parent/guardian and school nurse * Stay with child and remain calm * Help child to practice relaxation techniques |

**Headache Toolbox**

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| **Attendance** | |
| We ask that you allow excused school absences for medical appointments. We also request that you are patient and provide support for school absences related to headaches that cannot be treated with the treatment plan below while we work with the child to improve their headaches. | |
| **Tools for home** | |
| Your brain works best when it knows what to expect. Keeping your brain in balance can prevent more migraines. Visit <https://www.healthychildren.org> for advice on healthy living and [www.headachereliefguide.com](http://www.headachereliefguide.com) to make a plan. | |
| **Hydration** | Drink enough water to make your urine pale. Drink more water when it’s hot outside and before, during and after you exercise. Avoid drinks with caffeine and added sugar. |
| **Food** | Don’t skip meals. Choose fresh fruits, vegetables, whole grains, and lean protein when you can. Avoid foods high in salt, sugar or corn syrup, or with many chemicals listed on the label. |
| **Sleep** | Teens need 8-10 hours and pre-teens need 9-12 hours of sleep each night. Keep a regular schedule. No electronics 30 minutes before bedtime. Report snoring or breathing difficulty. |
| **Exercise** | Try to exercise every day. To lose weight, you need 20-30 minutes of activity strong enough to make you sweat. Be sure to warm up first and don’t exercise past the point of pain. |
| **Emotions** | Stress is part of life and learning to deal with it is important for growth. Learn and practice positive coping strategies. Avoid over-scheduling and allow some downtime to de-stress. |
| **Cognitive Behavior Therapy (CBT)** | CBT teaches you new ways of thinking about pain and new ways of responding to it by setting goals, pacing activity, and using your brain to turn down your body’s pain response. |
| **Biofeedback** | A machine uses sensors to measure your stress level and a computer screen shows you how your stress level changes as you practice different stress-reducing exercises. |
| **Tools for school** | |
| Students with headaches can struggle to focus and may take longer to finish their schoolwork. This added stress can lead to more headaches and increased absences. Share your concerns with school officials, including the school nurse, and discuss options such as an Individual Health Plan or a 504 Plan. The strategies below may help improve the student’s ability to function properly at school and could be incorporated into a plan of care. | |
| **Trigger Management:** | * Allow student to keep a water bottle at his/her desk * Allow student to use restroom when needed * May need to eat a mid-morning and/or mid-afternoon snack * May need access to a quiet place to eat lunch with a companion * May need an anti-glare screen filter or paper copies of assignments * May need to use a rolling backpack or obtain a second/digital copy of books for home * Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Symptom Management:** | * Allow student to go to nurse/health office as soon as his/her headache or aura starts * Allow student to rest for up to 30 minutes before returning to class * Allow light-sensitive student to wear dark glasses for a few hours when pain is severe * Allow noise-sensitive student to work in a quiet place (i.e., library) for a few hours when pain is severe * Allow a PE alternative (e.g., walking, stretching, yoga) when pain is severe * Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Workload Management:** | * May need extended time to take tests or complete work when headache is severe * May need a copy of class notes/homework packet when absent or unable to concentrate * May need extra time to make up exams or assignments missed due to severe headache * Consult school psychologist to evaluate for suspected learning problems * Consider modifying assignments (fewer problems, test of mastery) or class schedule (half days, rest breaks, fewer classes) if returning to school after an extended absence * Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |