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Teachers and other school personnel may feel anxious about having a student with hemophilia in their school. This booklet is designed to alleviate those fears by presenting facts about hemophilia and providing a quick reference guide on what to do in different situations of bleeding. Educators need to be aware that students with hemophilia do not bleed any faster than other students; however, they may have prolonged or delayed bleeding.

This booklet uses the terms “he”, “him” and “his” throughout the text as most people with hemophilia are males. This does not deny that many girls may have bleeding disorders.
WHAT IS HEMOPHILIA?

Hemophilia is a hereditary bleeding disorder, usually affecting males. This results in prolonged bleeding, primarily into muscles and/or joints. People with hemophilia have difficulty with their blood clotting and may bleed longer than usual. This can be prevented if they receive appropriate treatment, which may include Factor replacement.

Hemophilia can affect any race, nationality or social class. It occurs in approximately 1:10,000 male births. Occasionally, female carriers of hemophilia will have bleeding symptoms.

Hemophilia has three levels of severity: mild, moderate and severe. Severity of bleeding may differ from individual to individual but they all have the potential to bleed with injury. At present there is no cure for hemophilia; however, an individual with hemophilia can lead a relatively normal life while taking preventative measures to avoid bleeding episodes. There are treatment options available to students with hemophilia. It is important for school personnel to acknowledge a student’s concern of a bleeding episode, and to recognize signs of bleeding and take appropriate action.
COMMON BLEEDS

MOUTH BLEEDS
Bleeding in the mouth may be troublesome as it is messy, but it is usually minor. Blood mixed with saliva sometimes makes the bleeding look worse than it is. Encourage the student to spit out rather than swallowing blood to avoid an upset stomach.

IF A STUDENT HAS OOZING FROM A CUT IN THE MOUTH, WE RECOMMEND YOU:
• Put on protective gloves.
• Apply firm continuous pressure to the site of bleeding, if possible with a cold cloth for 20 minutes.
• Encourage popsicles or ice, and quiet activities for 24 hours.
• Call the parents/guardian for instructions if bleeding has not stopped after 20 minutes.

NOSE BLEEDS
Nose bleeds may vary in students and are usually not serious. A nose bleed is treated the same as for any other student.

IF A STUDENT HAS A NOSE BLEED, WE RECOMMEND YOU:
• Put on protective gloves.
• Position the student sitting with head slightly forward.
• Apply firm continuous pressure under the bridge (bone) of the nose with a cold cloth for 20 minutes.
• Encourage popsicles or ice, and quiet activities for 24 hours.
• Call the parents/guardian for instructions if bleeding has not stopped after 20-30 minutes.
SUPERFICIAL BRUISING

Students with hemophilia often have many bruises. These usually are superficial and generally are no cause for alarm. If there is ongoing pain or swelling at the site of the injury please contact the parents. Ice can be used as a comfort measure.

LACERATIONS

If bleeding occurs from a cut, scrape or laceration, the first aid treatment is the same as with any other student.

JOINT AND MUSCLE BLEEDS

The beginning of a bleeding episode in a joint and/or muscle may not be readily apparent. The student may be reluctant to use a limb or he may tell you it feels funny or that he thinks that he is having a bleed. If there is bleeding in a joint or muscle, it will be painful, gradually swell and will feel hot to the touch. The joints that most commonly bleed are ankles, knees and elbows. Muscle bleeds can occur anywhere in the body.

IF A STUDENT HAS A JOINT OR MUSCLE BLEED, WE RECOMMEND:

R.I.C.E.
R – REST; Keep the student still to avoid further injury while waiting for the parents/guardian.
I – IMMobilize the affected body part.
C – COLD, may apply ice. Do not leave longer than 15 minutes and make sure there is a cloth layer between ice and bare skin.
E – ELEVATE the body part.

IF A STUDENT WITH HEMOPHILIA SUSTAINS A CUT OR LACERATION, WE RECOMMEND YOU:

• Put on protective gloves.
• Clean cut with a skin antiseptic.
• Apply firm continuous pressure until bleeding stops.
• Apply a band-aid or dressing.
• May use ice as a comfort measure.
• Contact the student’s parents/guardian for instructions or seek medical help if bleeding continues for more than 20-30 minutes.

Call the parents as Factor may be necessary.
LIFE-THREATENING BLEEDS

BLEEDING INTO THE HEAD, NECK, CHEST OR ABDOMEN MAY BE LIFE-THREATENING AND REQUIRES IMMEDIATE MEDICAL ATTENTION.

In the absence of symptoms, notify the student’s parents/guardian as symptoms may appear later.

HEAD INJURY

All head injuries are to be considered serious because of the risk of a brain hemorrhage.

Symptoms of a brain hemorrhage are:

- Loss of consciousness
- Drowsiness
- Dizziness
- Irritability
- Lethargy

- Nausea and/or vomiting
- Dilated or unequal pupils
- Headache
- Confusion
- Unsteady gait

IF THE STUDENT SUFFERS A HEAD INJURY, WE RECOMMEND YOU:

- SEEK IMMEDIATE MEDICAL ATTENTION.
- Notify the student’s parents/guardian immediately.

NECK INJURY OR BLEEDS

Neck bleeding is a serious bleed because of the potential of blocking the airway. Any injury to the area as well as the student’s expression of pain and tenderness should be attended to promptly. Failure to do so could result in the student having difficulty in swallowing or breathing.

IF THE STUDENT SUFFERS A NECK BLEED, WE RECOMMEND YOU:

- SEEK IMMEDIATE MEDICAL ATTENTION.
- Notify the student’s parents/guardian immediately.

CHEST INJURY OR BLEEDS

Injuries to the chest wall may be very painful if there is bleeding into the muscles between the ribs. The student may be very short of breath. Bleeding in this area needs prompt medical attention.

IF THE STUDENT SUFFERS A SEVERE BLOW TO THE CHEST AREA, WHETHER THERE ARE ANY SIGNS OF BLEEDING OR NOT, WE RECOMMEND YOU:

- SEEK IMMEDIATE MEDICAL ATTENTION.
- Notify the student’s parents/guardian immediately.

HEAD INJURY

All head injuries are to be considered serious because of the risk of a brain hemorrhage.

Symptoms of a brain hemorrhage are:

- Loss of consciousness
- Drowsiness
- Dizziness
- Irritability
- Lethargy

- Nausea and/or vomiting
- Dilated or unequal pupils
- Headache
- Confusion
- Unsteady gait
ABDOMINAL INJURY OR BLEEDS
A severe blow to the abdomen is serious because of the potential injury to vital internal organs. Injury can occur without bruising.

IF THE STUDENT SUFFERS A SEVERE BLOW TO THE ABDOMEN, WE RECOMMEND YOU:

• SEEK IMMEDIATE MEDICAL ATTENTION.
• Notify the student’s parents/guardian immediately.

The student will usually inform you when he is experiencing a bleed. Emergencies are RARE.
SPORTS AND ACTIVITIES

Regular exercise is very important for students with hemophilia. Communication between the parents and the physical education teacher will contribute to age appropriate sports and physical activities. Some physical activities/sports/games are not advised for children with hemophilia. First aid kits and/or ice packs may be required. The Hemophilia Treatment Centre can provide advice and resources if necessary.

ACTIVITY AND PLAY

Appropriate physical activity is important for joint and muscle health and socialization.

Things to consider when planning activity:

- Risk of collision
- Repetition
- Speed
- Force of impact
- Height
- Predictability

If unsure if an activity is safe, the family and/or the Hemophilia Treatment Centre should be contacted for further instruction before initiating.

Students with hemophilia will want to try many sports. Discussion with family members, school members and Hemophilia Treatment Centres are essential to positive outcomes regarding sports.

ABSENTEEISM

Absenteeism may occur because the student with hemophilia may occasionally be unable to participate in his usual activities due to a bleeding episode. Consideration must be given to meeting his educational needs, be it through the use of a tutor and/or rescheduling assignments or exams.

RETURNING TO SCHOOL AFTER A BLEED

Rebleeding can occur if adequate rest and treatment is not provided – it may be advised to stay home for a period of time.

When returning to school, accommodations may be needed to reduce risk of re-bleed:

- Quiet play (e.g., no gym or outside play), careful monitoring, compliance with bracing and other equipment for treatment, etc.
- Regular participation can be resumed when the family communicates that it is safe to do so. If unsure, please contact the Hemophilia Treatment Centre.
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SUMMARY

1. Students with hemophilia do not bleed faster, they bleed longer.
2. They can lead a healthy lifestyle if managed properly.
3. Basic first aid is the same as for any other student. Bleeding from severe injuries requires prompt medical attention which may require **Factor replacement.** Call parents immediately.
4. Informed and responsive school personnel play a major role in the safety of the student with hemophilia. If in doubt, call the parents/guardian or the bleeding disorder treatment centre.
5. The bleeding disorder treatment centre is a good source of information.
Please contact the local Bleeding Disorder Clinic with any questions or concerns:

Local Bleeding Disorder Clinic:
Nurse Coordinator: ____________________________
Telephone number: ____________________________
Email address: ____________________________

If additional resource information is required, please see Canadian Hemophilia Society website: www.hemophilia.ca