

Antelope Valley Union High School District

Individualized School Healthcare Plan – Neurological Condition

Student:	DOB:
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School employees with student assignments will recognize the signs of illness and initiate the following health plan.

Nursing Diagnosis:

- Risk for impaired neurological function, chronic, related to altered brain structure, secondary to congenital or acquired abnormality.

Student Health Goals:

- Neurological status will remain stable.
- Student will participate in school activities, with accommodations, to the fullest extent possible.

Signs of illness	Interventions
<ul style="list-style-type: none"> • Inability to attend to task • Changes in level of consciousness • Changes in behavior • • • • • • • 	<ul style="list-style-type: none"> • Provide emergency care, as necessary • Provide for student safety • Maintain student privacy • • • • • • •

Call 9-1-1 when:

- Unconscious, unresponsive or stops breathing
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Schedule	Care Required	Location for Care	Care Given by	Training date
As needed	Emergency care	Student location	All adults with current CPR and first aid	Variable

Date / Copy of ISHP Given

Date Student	Date Health Office Technician	Date
Date Student's Parents	Date District Nurse	

Parent Signature _____

Date _____

District Nurse Signature _____

Date _____