Medical Protocol for Penn Pipeline Program Participants

WHAT YOU NEED TO KNOW TO PROPERLY UNDERSTAND THE MEDICAL PROTOCOL PROCEDURES

**Is this a medical problem or a medical emergency?**

**What constitutes a typical medical problem?**

Typical medical problems include:

- Short term illnesses (such as colds, strep throat, mono, stomach viruses, urinary tract infections)
- Minor injuries (such as a sprained ankle or a pulled back muscle)
- Chronic medical conditions (allergies, asthma, diabetes, high blood pressure)

**What constitutes a medical emergency?**

A medical emergency is a severe condition that potentially threatens the life or health of an individual. Symptoms that indicate a possible medical emergency include:

- Crushing chest pain
- Severe shortness of breath
- Extremely high fever (>102°F) despite taking anti-fever drugs like acetaminophen or ibuprofen especially if associated with shaking chills
- Severe headache, especially if associated with a stiff neck, or if described as the worst headache of your life
- Loss of consciousness
- Severe abdominal pain
- Broken bone

**What is the role of the Summer Program staff in the event of a medical emergency?**

In the event of a medical emergency, the Penn summer program staff member who is present (or first to arrive) should stabilize the situation, activate and emergency notifications (including Public Safety, as needed) and notify all of the appropriate Penn personnel and departments of the emergency.

**Penn’s Student Health Service (SHS) is here for non-emergency medical problems.**

If the special summer program has made contractual arrangements for the service, the Student Health Service (SHS) is available for non-emergency medical care. A more detailed description of services at SHS is available on our website (https://shs.wellness.upenn.edu/). Services include:
• Evaluation, treatment, and follow-up for short term medical illnesses and injuries
• Follow-up after Emergency Room visits
• Evaluation and ongoing management of chronic medical conditions
• Immunization and allergy desensitization services
• On-site specialty care for gynecology, sports medicine, podiatry and nutrition
• Coordination of care for specialty referrals outside of Student Health Service

If you are unsure if an urgent medical problem is a true medical emergency, call SHS for advice (available 24/7 at 215-746-3535; when the office is closed, the line is answered by a hospital operator – please ask them to page the Student Health provider on call and SHS will call you back). When calling, let SHS know that you are calling about a summer program participant, and identify your program name.

Sources for emergency medical care vary depending on the extent and severity of the emergency. These include several nearby Emergency Rooms (the hospitals will bill the patient for these services):

• Hospital of the University of Pennsylvania (HUP) and Penn Presbyterian Medical Center (PPMC) emergency room (for participants 18 and over)
• Children’s Hospital of Philadelphia (CHOP) emergency room (for participants under age 18)
• See the table of Important Emergency Contacts above for detailed information.

PROTOCOL:

1. If you have a medical emergency on campus, contact the Division of Public Safety immediately in order to activate the necessary emergency services, such as ambulance.
2. For medical problems that are not a true medical emergency, care might best be sought at Student Health Service, a local Urgent Care provider, or a local hospital Emergency Room. The staff at Student Health can assist with making this decision.
3. The Program Director (or designee) is responsible for arranging medical care for program participants.
   o For Emergency Care, arrange for the participant to be evaluated in the hospital Emergency Room.
   o For Non-Emergency Care, the options depend on whether your program has made prior financial arrangements with Student Health Service (SHS) to care for your participants.
     ▪ This goes without saying, but for simple medical issues, consider basic first aid and self-care approaches first. Some issues do not require a medical visit if they can be resolved by your program staff. Consider what a parent might do if they were present. Start there, and consider formal medical evaluation for which the basic approach is insufficient.
     ▪ If your program has made prior arrangements with SHS, your Program Director should call SHS when a participant needs treatment. Dial 215-746-3535 and press option 3 to speak to a nurse (if SHS is closed, tell the operator that you need to speak with Student Health on call, and we will call you back). During regular office hours, SHS can evaluate the participant in our office at 3535 Market Street, Suite 100.
     ▪ If your program does NOT have a prior arrangement with SHS, you may seek non-emergency care at one of the local Urgent Care centers or some other resource in the surrounding medical community. For example:
       ▪ myDoc Urgent Care University City 3717 Chestnut St. (215) 921-8294
4. Planning for care at Student Health
   o A staff member from your program must accompany the program participant to Student Health and must be available to escort them back afterward.
   o Please bring all necessary documents for the participant (see below). Also bring any information about the participant’s medical history.
   o Student Health will evaluate and treat as necessary. Afterwards, if the patient is deemed safe for discharge from SHS, appropriate instructions will be provided. SHS will involve parents by phone as appropriate. Depending on the results of the evaluation, SHS might recommend that the participant return home to complete their treatment with their personal healthcare provider.
   o Sometimes, the evaluation reveals a more serious condition that requires transfer to the hospital Emergency Department for additional evaluation and perhaps hospitalization. If that is the case, SHS will coordinate the transfer. If an ambulance is medically needed, the patient (or their insurance) will be responsible for the fees.

5. If there is a medical issue for which the Program has concern about the health of the broader community (e.g., highly contagious situations), please bring these to the attention of Student Health leadership so that we can work with you on an appropriate public health communication plan.