P.O.T.S. CARE PLAN

Student Photo

School _____ Date _____

Student _____ **Birthdate** _____ **Grade/Rm.** _____

EMERGENCY CONTACTS:

NAME	RELATIONSHIP	TELEPHONE NUMBER

Treating Physician _____ Telephone _____

Prescription medications (with instructions): _____

Known POTS triggers: _____

Significant Medical History _____

Allergies/ Intolerances _____ (☐ No allergies)

Approximate date of POTS diagnosis _____

Postural Orthostatic Tachycardia Syndrome (POTS) is a disorder of the body's innate regulatory systems. Individuals with POTS can experience racing heart rate, dizziness, and fainting. This is often triggered by standing up quickly after a period of lying or sitting down. Students with POTS need to drink plenty of fluids throughout the day to regulate their blood pressure. Keeping salty snacks available helps to maintain the body's blood volume so the water they drink doesn't get processed and wasted immediately. Doctors often recommend POTS patients eat two salty snacks a day or consume electrolyte-infused drinks. Anyone with this diagnosis ought to be allowed to **carry a water bottle** and **salty snacks** (like chips, pretzels, or an electrolyte solution) with them throughout the school day and have as-needed **access to the restroom**.

SYMPTOMS OF POTS EPISODE

- Dizziness
- Feeling faint or fainting
- Fatigue
- Headache
- Tunnel vision or Auditory disruption
- Abdominal pain
- Nausea
- Sweating/ temperature dysregulation
- Heart palpitations

INTERVENTIONS FOR POTS EPISODE

- Create a safe physical space for student
- Lay student down and elevate their feet
- Offer cool compress if student overheating
- Offer fluids if they are able to safely drink
- Stay with student until they acute phase passes
- Call student's parent/guardian
- Re-assess student's ability to sit up after 15 min

THE FOLLOWING SYMPTOMS SHOULD TRIGGER AN ESCALATED RESPONSE:

- Loss of consciousness for more than 2 minutes
- Unresponsiveness
- Vomiting
- Pulse >160 bpm at rest
- Failure to return to baseline after 15 minutes with intervention

➔ Call student's parent/guardian
➔ Call 911

Additional information: _____

Parent name: _____ Parent signature: _____

Provider name: _____ Provider signature: _____

(Updated 7/2024)