
North Carolina Farmworker Health Program
Office of Rural Health and Community Care
Updated 2010
**How to Use this Guide**

This guide has been developed with the purpose of providing protocols and procedures that outreach staff can follow when responding to specific health conditions and illnesses experienced by migrant and seasonal farmworkers. Many lack access to care due to multiple barriers, and their nursing or outreach visit may be their only contact with the health system, for major and minor illness care.

The guide can also assist outreach staff in conducting health assessments, providing health education, and/or responding to immediate adverse health events, such as an asthma attack, heart attack, etc. It lists the typical symptoms of common problems, the danger signs that suggest the need for immediate medical attention, useful over-the-counter treatments, and self-care techniques.

Since some outreach workers are not medically trained, they should refrain from diagnosing a condition and/or providing medical care. Make sure you know who you can call if you have questions or problems arise. One good resource for outreach workers are nurses.

Registered nurses (RNs), in particular, are trained to make nursing assessments and to follow orders appropriate to those assessments. RNs can provide basic health advice concerning self-care and the appropriate use of over-the-counter (OTC) medication to treat common symptoms experienced by farmworkers. They also can assess the farmworker to determine if consultation or referral is indicated.

Please review the guide with your supervisor to assure they are in accordance with your center’s policies and procedures. Some programs do allow outreach workers to distribute anti-fungal creams for self-identified fungal infections, 1% hydrocortisone cream for itchy rashes related to tobacco harvesting, and medications such as Dramamine for green tobacco sickness prevention and treatment. Some allow distribution of first aid kits with health education. Other programs restrict this activity.

Remember to always follow your agency policies on how to respond to health conditions in your area.

For more information and/or questions regarding these guidelines, please contact:

NCFHP’s Medical Director  
North Carolina Farmworker Health Program  
2009 Mail Service Center  
Raleigh, NC 27699  
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Medical assistants and others who work for a physician and do not have independent licensing boards are covered under the medical practice act. Physicians may delegate “to a qualified person any acts, tasks, and functions that are otherwise permitted by law or established by custom.” This person is then functioning as an extension of the physician, who is liable for their actions. (Medical Practice Act 90-18)

This regulation can be used to allow outreach workers to give out first aid kits (and possibly other OTC medications, for example Miconazole cream for athlete’s foot) if this activity is delegated by a physician. The physician and the outreach worker must have a close working relationship, and the physician must be sure the outreach worker has appropriate training. Outreach workers can educate farmworkers about the use of first aid kit items, and teach them how to prevent and treat common ailments and discomforts experienced by farmworkers.

Outreach workers who are not licensed as nurse practitioners, physician assistants, or physicians should avoid “practicing medicine”, which involves diagnosing, treating or prescribing for a specific medical condition in a specific farmworker. Practicing medicine without a license is a Class 1 misdemeanor (Medical Practice Act 90-18).
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The Health Assessment

When outreach staff comes into contact with farmworker families, a health assessment must be conducted for each person, including women, children and adolescents.

As an outreach worker conducts the health assessment using the appropriate health assessment form, he/she may learn of health conditions that farmworkers are experiencing. Some of these health conditions may need immediate attention and others may simply require health education. Some conditions may be reported by the farmworker. Other conditions may be observed by the outreach worker.

On occasions, the outreach workers need to gather more information on certain health conditions and ask more probing questions. See the Advanced Health Screening Questions section of this guide for a list of such questions according to the health condition.

When assessing a farmworker with a health concern and/or responding to an adverse health event, it’s good practice to:

1. Always use precautions (latex gloves, mouth guards used for mouth-to-mouth resuscitation, etc) to avoid coming into contact with any bodily fluids, such as blood, saliva, stool, etc.
2. Ask about allergies and current medications.
3. Ask about current medical problems. If the farmworker has kidney failure, consult a medical provider prior to recommending any oral medications such as ibuprofen. If HIV, diabetes, asthma or heart disease, consult provider immediately for any infection, respiratory symptom, or chest discomfort.
4. Ask women about the possibility of pregnancy, or if they are breastfeeding.
5. If the farmworker has symptoms of cough and fever lasting over 3 week, they may have tuberculosis. Whenever possible, work outdoors. If you must be indoors or in a car, wear a TB mask, if available. If you do not have a TB mask, then both you and the farmworker should wear a surgical mask and minimize the time you spend together in an enclosed area.
6. If the farmworker appears ill or if you are concerned about their symptoms, recommend or arrange for further evaluation.

When a health event occurs that needs immediate emergency care, the outreach worker must not hesitate in calling 911.
When to Call 911

If you come upon an emergency, follow the 3 steps:

✓ Check the scene and the victim
✓ Call 911
✓ Care for the victim.

Call 911 for an ambulance if a person or Farmworker has the following symptoms and no medical providers are available to assist in the evaluation.

- Unconsciousness, confusion, or decreased level of consciousness
- Severe trouble breathing or abnormal breathing
- Persistent pain or pressure in the chest
- Pain or pressure in the abdomen that does not go away
- Vomiting or passing blood
- Seizures which are unusual for the Farmworker, severe headache, or slurred speech
- Sudden onset of weakness in part of the body
- Injuries to the head, neck, or back
- Poisoning: if the Farmworker is not having any symptoms, you may call poison control first at 1-800-848-6946. Obtain all information about the poison, including the bottle, label, and any remains of the material in question.

Be prepared to give your location, telephone number, your name, and a description of the problem. Follow instructions given by the dispatcher. Do not hang up first. They will tell you when to hang up.

While you wait, do the following:

- Assure the safety of the Farmworker, bystanders, and staff
- Clear a passageway for emergency vehicles
- Administer CPR or first aid if they are needed and you are trained to do so.

⇒ Special Situations

If a person or Farmworker is suicidal, keep talking to them while another staff member calls 911.
If they are on the telephone, attempt to obtain their address and telephone number. If you are unsuccessful in getting this information before the Farmworker hangs up, call the telephone operator immediately to obtain the telephone number. Then call 911 with all the information.

If a person or Farmworker threatens to become violent (intends to harm you or someone else), notify your supervisor and attempt to clear non-essential persons from the area immediately. If you are in danger, leave the area and call 911. If you are not in imminent danger, try to calm the Farmworker while another staff member calls 911.

Call 911 for fires, explosions, presence of poisonous gas, and any other emergencies.

Call 911 if you see any signs of suspicious or toxic materials; “meth lab” odor or emissions.
Remember the First Aid Kit!

It is recommended that outreach staff have a First Aid Kit with them at all times or in their car. Outreach staff may also deliver first aid kits containing the commonly used over the counter (OTC) medications to farmworker camps. This activity can be combined with the provision of health education on how to treat common health conditions farmworkers experience. As this activity is not to be connected to an individual farmworker’s diagnosis and treatment, most programs are comfortable with this being done by outreach workers.

There are many ways in which outreach staff can obtain medications for first aid kits. If you decide to purchase items, health departments and community health centers can receive public health pricing when ordering medications. Pharmaceutical representatives will often supply free Tylenol, Advil, and cough syrups in sample-sized packages. Many churches (youth, women or auxiliary groups), volunteer groups, and other agencies will assemble first aid kits for you to distribute.

If there are children in the camp, you need to take extra precautions. Ensure medications are in child-resistant containers, and instruct farmworkers to keep the first aid kit out of the reach of children. You may want to return with a cabinet child-proofing device if they do not have one.

*See Appendix II: Field Kits for a list of medications and items to include in your kit.*
Protocols and Procedures for Specific Health Conditions

(In alphabetical order)
**Assessment:**

1. **Farmworker-reports**
   
The Farmworker is exposed to something (a vaccine, a medication, an insect sting), and develops any of the following symptoms within the next hour:
   - trouble breathing
   - feeling of tightness in the chest or throat
   - swelling of the face, neck, and tongue
   - rash, hives, dizziness, or confusion

2. **You Observe:**
   
   Farmworker may develop a rash, facial swelling, wheezing, inability to breathe, tachycardia, or hypotension.

**Response:**

1. **Call 911 immediately** and tell them you have a Farmworker with a severe allergic reaction who may need epinephrine. This is a medical emergency!

2. Medical regimen: If a First Aid Kit is available containing epinephrine, help him or her to use it according to instructions.

3. Monitor vital signs (pulse, breathing, blood pressure) until EMS arrives

**Follow-up:**

1. As directed by medical provider.
2. Educate about avoidance of allergens and use of prescribed medications.
3. Educate in use of epinephrine kit if prescribed.

Source: First Aid Fast, by the American Red Cross
**ASSESSMENT:**

1. **Farmworker Reports**
   
   Farmworker reports a history of asthma in themselves or their children.

2. **RESPONSE:**
   
   1. Ask the following questions:
      
      - Do they use medications every day? If so, what medications?
      - Do they wheeze or feel short of breath every day, even while taking medications?
      - If they feel well, will they run out of medications before the end of the season?
   
   2. Arrange a medical visit for all people with asthma who need daily medications or who have symptoms more than twice a week unless they refuse:
      
      - Within 1 month if they have enough medication and are feeling well
      - As soon as possible if they do not meet the criteria above.
   
   3. Remind them to take all medication and packaging with them to each clinic visit.
      
      - The packaging is particularly important if the medication is from another country, as it may contain the generic names and doses of the medication.
      - A review of the actual inhalers and medication bottles allows the provider to check for duplicate and missing medication, to see how many refills remain for each medication, and to see when the bottle was last refilled to tell them how often the Farmworker is using their medication.

   If the farmworker will run out of medication, try to obtain a refill for them before the clinic visit.

   Make sure they receive a flu and H1N1 (if applicable) shot between October and February!

3. **You Observe**

   If a farmworker with asthma complains of shortness of breath that lasts more than 15 minutes and does not respond to their medication while you are seeing them, help them see a doctor right away. They may be having an asthma attack. Asthma attacks can kill, and are much easier to treat if caught early.

4. **Response:**

   Call 911 immediately and tell them you have a farmworker that is having an asthma attack. This is a medical emergency!

5. **Self-care:**

   - Do not smoke, and stay away from tobacco and other types of smoke.
   - Minimize exposure to dust, pollen, animal dander, chemicals, and anything that makes them wheeze or feel short of breath.
   - Practice good hygiene and frequent hand washing to avoid colds and flu.
ASSESSMENT:

Farmworker Reports
Farmworker reports pain in lower or upper back after working in fields. Usually better when lying down, worse when sitting or standing for long time periods.

You Observe
Look for abnormal gait, slowed or painful movements

RESPONSE

1. Call provider/urgent visit if: fever, leg weakness, leg numbness, problems with (inability to control) bladder or bowels, acute injury involving force (fall, car accident, farm accident). Advise a routine clinic visit if Farmworker requests or if there is moderate discomfort.

2. Medical regimen:
   - Ibuprofen 200 mg 2 tablets every 4 hours if no contraindications (contraindications include ulcer/gastritis/esophagitis; pregnancy; allergy to aspirin, ibuprofen, or NSAIDs)
   - If contraindications, use acetaminophen in available dosage strength
     - Acetaminophen 325 mg 2 tablets every 4 hours
     - Acetaminophen 500 mg 2 tablets every 6 hours
   - In addition, Farmworker may apply analgesic balm/cream every 4 hours as needed.

3. Follow-up with clinic/provider if not better in 2 weeks. Instruct Farmworker to call or see provider urgently if fever, leg weakness, leg numbness, or problems with bladder or bowel occur.

Self-care:
Educate on proper lifting techniques, body mechanics, and use of heat or ice, back exercises.
CHEST PAIN

Chest pain can be the first and only sign of a heart attack, and must be taken seriously. Many Farmworkers will need to go to the Emergency Room via ambulance, because it is difficult to rule out heart attack, pulmonary embolism, or other severe pathology in the field.

ASSESSMENT:

1 Farmworker Reports
   Chest pain right now

   RESPONSE:
   • Call 911 right away for most Farmworkers who have chest pain while you are seeing them, especially for men > 40 and women > 50

2 Farmworker Reports
   Recent chest pain which is not there anymore, especially if they had shortness of breath, dizziness, sweating or nausea with the pain

   RESPONSE:
   • ER visit right away
     - Recent, new onset chest pain require an ER visit unless they have obvious chest wall tenderness, pain is reproduced by a single movement of the arm, OR you consult a provider and they advise otherwise

3 Farmworker Reports
   Young age, with good general health
   Very brief – moments to minutes – chest pain
   Pain mostly when they move their arms or their body
   Pain is increased when they push on their chest wall
   No shortness of breath, dizziness, radiation to arm or jaw, sweats, or nausea

   RESPONSE:
   • Refer to clinic visit
DENTAL PAIN

ASSESSMENT:

Farmworker Reports
Farmworker complains of pain in teeth or jaw.

You Observe
Swelling or fever may be present, indicating active infection.

RESPONSE:

1. Urgent visit to dentist if swelling of jaw, pus or swelling visible around tooth line, fever, or severe pain. If not dentist available, a medical provider can prescribe antibiotics for the infection.
   Refer to routine dental visit if mild or moderate pain.

2. Medical regimen pending dental visit (choose one):
   - Ibuprofen 200 mg 2 tablets every 4 hours if no contraindications (Contraindications include ulcer/gastritis/esophagitis; pregnancy; allergy to aspirin, ibuprofen, or NSAIDs)
   - If contraindications, use acetaminophen in available dosage strength
     - Acetaminophen 325 mg 2 tablets every 4 hours
     - Acetaminophen 500 mg 2 tablets every 6 hours

3. Follow-up: return to dentist if pain persists more than a week after visit.

Self-care
Frequent mouth rinses with warm salt water, or with hydrogen peroxide mixed with water in a 1:4 ratio. Warm compresses to jaw.
Get dental care at least once a year. This includes: a dental exam, dental varnish application (for children), and dental health education.
**Assessment:**

1. **Farmworker Reports**
   
   Farmworker reports that he/she has diabetes.

**Response:**

1. Ask the following questions:
   - Do they have symptoms of diabetes, like excessive thirst, frequent urination, blurred vision, and fatigue?
   - Are they checking their blood sugar, and what levels they are obtaining?
     
     Goal blood sugar: fasting blood sugar < 120; 2 hours after eating blood sugar < 140
   - Are they taking any medications, and will they need more before the end of the season?
   - Are they having symptoms of hypoglycemia or low blood sugar? (hungry, shaky, sweaty, dizzy, nervous, sleepy, confused, weak, or difficulty speaking)

2. Test their blood sugar if you are able to do so or make referral to testing site.

3. Arrange a medical visit for all people with diabetes so they can have their tetanus shot and pneumococcal vaccine, blood work, and other examinations:
   - Within 1 month if they have enough medication, are feeling well, and blood glucose is < 200.
   - As soon as possible if they do not meet the criteria above.

4. Remind them to take all medication, bottles, and packaging with them to each clinic visit.
   - The packaging is particularly important if the medication is from another country, as it may contain the generic names and doses of the medication.
   - A review of the actual medication bottles allows the provider to check for duplicate and missing medication, to see how many refills remain for each medication, and to see when the bottle was last refilled as a gauge of medication adherence.

It is very important for the Farmworker to take all medications on the day of their clinic visit, so that the provider can determine if the dose is correct. If the Farmworker will run out of medication, try to obtain a refill for them before the clinic visit. Help them get a flu shot every fall.

**You Observe**

If a farmworker with diabetes complains of chest pain or shortness of breath lasting more than 15 minutes while you are seeing them, call 911. They may be having a heart attack.

If they have nausea, vomiting, dizziness, weakness, or extreme fatigue, help them see a doctor immediately.

**Self-care**

- Avoid concentrated sweets (sodas, sweet tea, fruit juice and fruit drinks, candy, desserts), fatty or greasy foods, and alcoholic beverages. Eat high fiber foods like vegetables, whole grains, and up to 2 fruits per day. Drink water, 1% or skim milk, or diet drinks.
- Exercise for 30 minutes 5 times a week
- Reduce their weight by at least 10 pounds if overweight, or ideally to a body mass index of 24 or less.
- Check feet for sores or lesions every day. Eye exam or retinal screen annually.
DIARRHEA

**ASSESSMENT:**

1. **Farmworker Reports**
   
   Four or more loose stools daily; often associated with nausea, vomiting, abdominal cramps, and fever.

2. **You Observe**
   
   Farmworker with mild diarrhea will look healthy. Farmworker with severe diarrhea may have findings listed below.

**RESPONSE:**

1. Call provider or arrange urgent visit if:
   - Vomiting or fever over 100.4°F lasts more than one day
   - Over ten stools per day
   - Black or bloody stool
   - Severe abdominal pain
   - Signs or symptoms of dehydration (dry lips/mouth, dizziness, urination less than once every 8 hours, loose skin, sunken eyes, fallen fontanelle).

   Routine visit if Farmworker requests or diarrhea lasts more than one week.

2. Medical regimen:
   - Small frequent sips of clear fluids: Oral Rehydration Solution (ORS) is ideal [recipe, packets, or ready-made (Pedialyte and others)]. Diluted sports drinks or fruit juice, flat Coke or ginger ale, tea, and broth may be used if symptoms are mild.
   - Bland solid foods as tolerated for children and adults (bananas, rice, applesauce, toast, crackers, tortilla, potatoes). Advance quickly to normal diet once vomiting stops.
   - Babies may continue breast-feeding. They may also take formula as tolerated.
   - Acetaminophen in available dosage strength as needed for fever over 100.4 °F.
     - Acetaminophen 325 mg 2 tablets every 4 hours
     - Acetaminophen 500 mg 2 tablets every 6 hours

3. Follow-up:
   
   Refer to clinic/provider if diarrhea not resolved in two weeks. See provider urgently if any of the following symptoms develop: vomiting or fever over 100.4 °F lasting more than one day; black or bloody stool; severe abdominal pain or tenderness; signs or symptoms of dehydration.

**Self-care**

Teach signs and symptoms of dehydration (dry mouth, dizziness, urination less than once every 8 hours, loose skin, sunken eyes, fallen fontanelle) – seek medical care immediately if these occur.

Advise frequent handwashing after each trip to the toilet or diaper change, and before and after eating or food preparation. Check kitchen for sanitation concerns such as mayonnaise in the cabinet rather than the refrigerator, food left out on the counter overnight, etc.

**ORS Recipe:**

1 liter clean water
2 level tablespoons sugar
¼ teaspoon salt and ¼ teaspoon baking soda (½ teaspoon salt if no baking soda available)
½ cup orange juice or mashed banana for flavor

Taste to make sure it is no more salty than tears, then drink sips every 5 minutes until urinating normally.
YOU WILL NEED TO CONSULT WITH A HEALTH CARE PROVIDER IF YOU SEE A FARMWORKER WITH FEVER IN THE FIELD. ASK THE QUESTIONS BELOW AND MEASURE THEIR TEMPERATURE BEFORE CALLING.

Background information: North Carolina has the highest incidence of Rocky Mountain spotted fever in the country. This tick-borne rickettsial illness can be deadly, and presents with fever, headache, and body aches. In general, these symptoms during times of year when ticks are present require referral to a health care provider. The usual treatment is with doxycycline unless contraindicated.

Some people with fever have a mild viral infection that will go away on its own, while others have a life-threatening illness.

ASSESSMENT:

Farmworker Reports

Farmworker reports fever

You Observe

Measure farmworker’s temperature

RESPONSE:

1. Find out how high the temperature has gone and how long the person has had fever. Many people say they have fever, when actually they are experiencing headache, hot flashes, or any of a number of other symptoms.

2. Ask about associated symptoms such as headache, sore throat, cough, pain with urination, rash, abdominal pain. Ask what medications they have taken already (antibiotics, acetaminophen or Tylenol, ibuprofen or Advil, etc.)

Call the Ambulance if...
- fever + headache + stiff neck
- confusion, weakness, farmworker looks very ill
- shortness of breath
- blood pressure less than 90 systolic in an adult with fever

Send to Emergency Room if...
- Infant < 3 months with fever unless caused by vaccine
- Farmworker looks moderately ill or has symptoms and cannot go to clinic
- Temperature T 105 °F or higher

Arrange urgent medical visit if
- Infant or child with T 104 °F
- Ill-appearing person of any age with T 100.4 °F or higher
- Most people with fever lasting more than 2 days should see a doctor

Self-care

Gentle hydration, offer food as tolerated, acetaminophen or ibuprofen as needed, cooling baths or cool compresses. Do not bathe children in alcohol, and do not give aspirin.
FAINTING

**Assessment:**

👉 You Observe

Farmworker loses consciousness.

**Response:**

1. Elevate legs, loosen clothing
2. Check if person is breathing and has a pulse. If no pulse or respiration, call 911 immediately and if trained, start CPR.
3. Give nothing to eat or drink until fully awake and nausea resolved
4. When awake, then assess need for further medical care
   - Ask about chest pain, shortness of breath, severe headache, focal weakness, head injury, heat illness, etc., and refer to ER if appropriate
   - If seizure activity is observed, follow seizure protocol
   - Older farmworkers should be checked by a medical provider

If ER visit or 911 not needed, farmworker should rest in shady area and drink fluids until fully recovered.

If diabetic, check blood sugar if possible.
(Loss of consciousness symptoms can appear similar for severe low and high sugar)

If glucose 70 or below, or if cannot check blood sugar, give a “quick fix” food right away

- 2 or 3 glucose tablets
- ½ cup of any fruit juice or regular soft drink
- 1 cup of milk
- 5 or 6 pieces of hard candy
- 1 or 2 teaspoons of sugar or honey
- 1-2 packets of pancake syrup
Explain the symptoms of Green Tobacco Sickness (GTS) to Farmworkers, and the ways they can keep themselves from becoming ill – see Health Education Module.

**ASSESSMENT:**

1. **Farmworker Reports**

Farmworkers will complain of nausea, vomiting, dizziness, weakness, or headache after working in tobacco.

**RESPONSE:**

1. Have the farmworker shower and change clothes before going to clinic or seeking medical care if possible. This removes the nicotine from their skin so they do not continue getting worse.

2. Call provider or arrange urgent visit if farmworker has fever or bloody vomit, symptoms last longer than 2 days, or farmworker is very weak, dizzy, or seems very ill or uncomfortable.

3. If there is any concern about pesticide exposure, follow pesticide protocol.

4. If mild symptoms, set up routine visit if farmworker requests.

5. Medical regimens:
   - Dimenhydrinate (Dramamine) 25 mg: 1 – 2 tablets every 6 hours
   - Meclizine (Bonine) 25 mg: 1 – 2 tablets every 6 hours
   - Diphenhydramine (Benadryl) 25 mg: 1 – 2 tablets every 6 hours

   Consult with your medical director to choose a preventive medication to recommend. All three are available over the counter, and some programs allow outreach staff to distribute a small supply of the chosen medication to farmworkers. Warn farmworker the medication will cause drowsiness.

4. Follow-up with clinic/provider if not improved in 2 days.

**Self-care**

Advise gentle hydration, rest. Counsel farmworker on measures to prevent GTS in the future, such as avoiding contact with wet tobacco, use of raincoat or long-sleeved shirt which is changed after the tobacco dries, and taking a cool shower as soon as possible after working.

Those severely affected, who will not be driving or operating machinery, can be advised to take one tablet of their treatment medication prior to exposure, with a repeat dose immediately after work.

See Health Module on Green Tobacco Sickness for more information and health education tips.
Headaches are a common symptom, but occasionally are a sign of serious illness such as stroke, brain tumors, or meningitis or other infections. Pesticide exposure, heat illness, and green tobacco sickness all cause headaches. Alcohol and caffeine withdrawal also can cause headaches. The following information can be given as health education if farmworkers bring up this subject. Danger signs and referral guidelines are listed below.

Tension type headaches cause mild to moderate band-like or squeezing pain in the temples and forehead, and are common with stress, exposure to sunlight, missed meals, or awkward postures.

Migraine type headaches may be pounding, and often are associated with nausea, sensitivity to light or sound, and visual symptoms. People often go to bed with a migraine, and feel better when they wake up.

**ASSESSMENT:**

1. **Farmworker Reports**
   - Weakness or numbness in part of the body
   - Difficulty seeing, talking, swallowing, or walking
   - “This is the worst headache of their life”.
   - Fever, facial pain, rash, confusion, or stiff neck are present

2. **You Observe**
   - Farmworker looks sick, like they have any of the above listed symptoms but are unable to say so.

**RESPONSE:**

1. Call provider or arrange emergency room visit

2. Arrange clinic visit if Farmworker has frequent or worsening headaches, if headache has lasted more than 2 days, if pain is worse with coughing or sneezing, if Farmworker requests, or if headache is not getting better with over the counter treatment.

3. Medical regimen (choose one with medical director):
   - Ibuprofen 200 mg 2 tablets every 4 hours if no contraindications (contraindications include ulcer/gastritis/esophagitis; pregnancy; allergy to aspirin, ibuprofen, or NSAIDs)
   - If contraindications, use acetaminophen in available dosage strength
   - Acetaminophen 325 mg 2 tablets every 4 hrs (contraindications include liver disease/failure)
   - Acetaminophen 500 mg 2 tablets every 6 hours

4. Follow-up to clinic/provider if headaches worsen or do not resolve in 2 days, or if fever, rash, stiff neck, or facial pain develop

**Self-care**

Farmworkers with mild, ordinary headaches may take over-the-counter pain medications as listed in the First Aid Kit Protocol. They should not take these more than 3 days per week.

Many people can reduce the number of headaches they have with adequate rest, increased fluid intake, reduction of caffeine and alcohol intake, use of sunglasses when outdoors, regular schedule for meals and sleep, eating breakfast, massage of neck and shoulders.
HEAT CRAMPS

ASSESSMENT:

Farmworker Reports
Painful muscle spasms, usually in the legs and abdomen

You Observe
Normal temperature and vital signs

RESPONSE:

1. Begin self-care immediately. Do not give salt tablets. Seek medical attention if heat cramps do not resolve in one hour.

2. Follow-up:
   Instruct in adequate hydration and rest periods. If Farmworker has been working in heat less than two weeks, need extra breaks until acclimatization takes place.

Self-care

- Have person rest in a cool place.
- Give water or a commercial sports drink (many Latinos prefer cool drinks to ice-cold drinks when they are hot and sweaty).
- Lightly stretch and gently massage the muscle.
NEVER LEAVE A VICTIM OF HEAT ILLNESS ALONE, AS THEY MAY BECOME CONFUSED, WANDER AWAY, OR EVEN DIE. DETERMINE STAGE OF HEAT ILLNESS AS DESCRIBED BELOW.

EARLY STAGE - HEAT EXHAUSTION

ASSESSMENT:

1️⃣ Farmworker Reports
Headache, nausea, dizziness, weakness, and exhaustion

2️⃣ You Observe
Cool, moist, pale or flushed skin
Heavy sweating

RESPONSE:

1. If vomiting or loss of consciousness, call 911.
2. Use the buddy system – never leave victim alone!
3. Move to shade
4. Fluids orally if conscious and not vomiting
5. Fan
6. Loosen or remove clothing
7. Cold water, wet towels, ice to skin
8. Massage arms and legs
9. Do not give salt tablets.

Follow-up:

If Farmworker recovers quickly, instruct in adequate hydration and rest periods. If Farmworker has been working in heat less than two weeks, need extra breaks until acclimatization takes place.

If Farmworker does not recover quickly, call 911.
LATE STAGE - HEAT STROKE

ASSESSMENT:

 nível Farmworker Reports
Vomiting, weakness, dizziness, confusion, loss of consciousness

You Observe
Red, hot dry skin, elevated temperature if measured (rectal or tympanic most accurate), rapid pulse and respiration, changes in level of consciousness

RESPONSE:

1. Activate EMS. This is a medical emergency! Call 911
2. Medical action: Give intravenous fluids if available. Do not give salt tablets.
3. Nursing actions:
   - Move person to a cool place, air-conditioned if possible
   - Loosen tight clothing
   - Remove perspiration-soaked clothing
   - Apply cool, wet cloths to the skin
   - Place ice or cold packs on wrists, groin, neck, and armpits
   - Fan the person
   - If conscious and not vomiting, give cool water to drink
   - Place person on side if decreased level of consciousness
   - Continue to check breathing and pulse

4. Follow-up:

After Farmworker discharged from emergency room/hospital, instruct in adequate hydration and rest periods. If Farmworker has been working in heat less than two weeks, need extra breaks until acclimatization takes place.
**HIGH BLOOD PRESSURE**

**ASSESSMENT:**

1. **Farmworker Reports**
   Symptoms that include severe headaches, chest pain, shortness of breath, swelling of the feet and legs and/or if a farmworker does not have symptoms but has blood pressure of greater than 240/140

   **RESPONSE:**
   - Refer to emergency room immediately

   Farmworker complains of chest pain or shortness of breath lasting more than 15 minutes while you are seeing them

   **RESPONSE:**
   - Call 911 immediately. They may be having a heart attack.

2. **You Observe**
   When taking blood pressure, you find the following:

<table>
<thead>
<tr>
<th>Systolic BP mm Hg</th>
<th>Diastolic BP mm Hg</th>
<th>Blood Pressure is categorized as….</th>
<th>Referral</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt; 120 and</td>
<td>&lt; 80</td>
<td>Normal</td>
<td>No referral needed, recheck in 2 years</td>
</tr>
<tr>
<td>120 – 139 or</td>
<td>80-89</td>
<td>Prehypertension</td>
<td>Lifestyle counseling; No referral needed, recheck in 1 year</td>
</tr>
<tr>
<td>140 - 159 or</td>
<td>90-99</td>
<td>Stage 1 hypertension</td>
<td>May repeat in 1 week, and refer if BP still elevated, -OR- Refer to clinic within 1 month Lifestyle counseling</td>
</tr>
<tr>
<td>≥ 160 or</td>
<td>≥ 100</td>
<td>Stage 2 hypertension</td>
<td>Refer to clinic within one week or less if farmworker has no symptoms but has BP &gt; 180/110. Refer to clinic within three weeks if farmworker has no symptoms but has BP &gt; 160/100.</td>
</tr>
</tbody>
</table>

   **RESPONSE:**
   1. Give a written record of BP, ask them to show it to their health care provider at their clinic visit, and to tell their health care provider if:
      - BP is above 140/90 when taking their medication correctly
      - BP is over 160/100 at any time
      - They are having symptoms of headache, difficulty breathing, or chest discomfort.

   2. **Remind them to take all medication bottles or boxes with them to each clinic visit.** The packaging is particularly important if the medication is from another country, as it may contain the generic names and doses of the medication. A review of the actual medication bottles allows the provider to check for duplicate and missing medication, to see how many refills
remain for each medication, and to see when the bottle was last refilled as a gauge of medication adherence.

3. Try to obtain a refill for them before the clinic visit, if the farmworker will run out of medication.

Self-care

Share healthy lifestyle information with ALL hypertensive and pre-hypertensive farmworkers.

- Stop non-prescribed medications that can cause high blood pressure – many cold and sinus remedies, many weight loss pills and supplements, many energy drinks such as Red Bull, drugs of abuse such as cocaine, methamphetamine, and anabolic steroids.
- See your doctor to talk about use of prescribed medications that can cause high blood pressure – such as birth control pills or nonsteroidal anti-inflammatory medications like ibuprofen or naproxen. Bring your blood pressure card.
- Don't smoke cigarettes or use any tobacco product
- Lose weight if you're overweight. (Desirable Body Mass Index = 18.5 - 24.9)
- Exercise regularly – 30 minutes per day on days not spent working in the fields
- Eat a healthy diet that includes lots of fruits, vegetables, nuts, beans, and low-fat dairy products
- Limit your salt intake – sodium intake should be less than 2,400 mg per day
- Limit alcohol to no more than 2 drinks on any given day for men, 1 drink per day for women
- Limit caffeine intake
- Try relaxation techniques

See Health Module on Hypertension for more information and health education tips.
PESTICIDE EXPOSURE

ASSESSMENT:

Farmworker Reports

Farmworker reports exposure to pesticides during this agricultural season – drift, overspray, exposure to plants with obvious residue, entry into field before the end of the re-entry interval, household exposure, or other.

You Observe

Farmworker is experiencing difficulty breathing, decreased level of consciousness, or severe vomiting or dizziness.

RESPONSE:

Assess presence or absence of symptoms and attempt to determine when exposure occurred. If exposure occurred less than one week ago or symptoms are apparent, follow the steps below. If exposure occurred over one week ago and farmworker is not currently experiencing symptoms, gather information using the Pesticide Exposure Report Form and file with NCDA (NC Department of Agriculture) using instructions below. In October of 2006, health care providers may be required to start reporting pesticide illness and injury to the State Department of Health or to the North Carolina Poison Control Center.

1. If life-threatening symptoms – severe vomiting or dizziness, difficulties with breathing, abnormal level of consciousness – call 911 and warn them of the presence of hazardous chemicals. While waiting for EMS:
   - Start decontamination, taking care to protect yourself from contact with chemicals.
     
     **Pesticide on skin:**
     - remove clothes
     - wash with water immediately if soap or shower not available
     - shower and shampoo with lots of soap and water as soon as possible
     - put on clean clothes
     
     **Pesticide on clothes:**
     - discard heavily contaminated items
     - wash lightly contaminated items separately from other laundry
     
     **Pesticide in eyes:**
     - rinse eyes with water for 15 minutes
   - Use Neoprene or polyurethane gloves and cover your clothing to avoid exposure to yourself. Place all contaminated clothing and materials in plastic bags and seal them so the chemical does not continue to evaporate into the air. When you are finished assisting the farmworker, wash all exposed skin thoroughly with soap and water, and shower and change clothing as soon as possible.
   - Obtain pesticide label if possible, or the MSDS or the name of the chemical
   - Determine if other workers or family members are affected
• File report with NCDA
• Provide health education if appropriate

2. If a farmworker is not severely ill, ask specifically about typical pesticide symptoms

   Classic organophosphate pesticide symptoms are:
   - Dizziness
   - Nausea, vomiting, diarrhea
   - Blurred vision
   - Difficulty breathing, tightness in chest
   - Headache
   - Muscle cramps
   - Drooling, tearing
   - Unconsciousness
   - Pinpoint pupils

   Classic irritant pesticide symptoms are:
   - Skin rash
   - Eye or throat irritation

   If symptoms are present but not life-threatening, ask the Farmworker to decontaminate immediately using procedures described above.

   • Obtain pesticide label if possible, or the name of the chemical, and follow any instructions
   • Determine if other workers or family members are affected
   • Call Poison Control 1-800-848-6946 for further advice
   • File report with NCDA

3. If symptoms are not present but exposure has occurred recently:

   • Decontaminate as above
   • Obtain pesticide label if possible, or the name of the chemical, and follow any instructions
   • Determine if other workers or family members were exposed
   • File report with NCDA
   • Provide health education

How to file a report:

• Complete Pesticide Exposure Report Form if this is an agricultural exposure occurring in North Carolina during the current agricultural season (though they will accept reports up to three years after the incident)
• Ask the farmworker if you may include his/her name and contact information on the report. The form may be completed anonymously, but this is less effective.
• Submit report to NCDA (NC Department of Agriculture) unless the farmworker asks you not to do so
• You may report over the telephone at 919-733-3556, or fax to 919-733-3556
• NCDA is required to assess the workplace within 24 hours.

Other resources:
Pesticide Drift Hotline will provide further advice and support: 1-877-NO-DRIFT (1-877-663-7438)

Self-care
Provide health education as described in Health Education Module on pesticides.
Recent Pesticide Exposure
(less than 1 week)

**yes**

**Common symptoms**
nausea, vomiting, weakness or dizziness, blurred vision, muscle cramps, headache, difficulty breathing, altered state of consciousness, rash, eye irritation

**Life-threatening or severe symptoms**
(persistent vomiting, severe weakness or dizziness, altered level of consciousness)

- Call 911
- Decontaminate
- Obtain label, MSDS* sheets, or name of pesticide if possible
- File Pesticide Exposure Report w/ NCDA
- Provide Health Education

**Mild or no symptoms**

- Decontaminate
- Obtain label, MSDS* sheets, or name of pesticide if possible
- Call poison control 1-800-848-6946 to determine need for medical referral
- File Pesticide Exposure Report w/ NCDA
- Provide Health Education

**If occurred in NC w/in this season, File Pesticide Exposure Report w/ NCDA**

**Provide Health Education**

2/15/06

*Material Safety Data Sheets
Pesticide Exposure Report Form

File report with NCDA if exposure occurred this calendar year in North Carolina

1. Describe the pesticide exposure: __________________________________________________________
   ________________________________________________________________________________________
   ________________________________________________________________________________________
   ________________________________________________________________________________________

Examples (if event occurred when not wearing appropriate Personal Protective Equipment):
   • Being sprayed with pesticides, or feeling drift on skin
   • Working in an area while it is being sprayed (field, greenhouse, building)
   • Entering an area before the completion of the Restricted Entry Interval after it has been sprayed with pesticides
   • Entering an area while the “Danger, Do Not Enter” sign is still posted
   • Entering an area while the plants are still wet with pesticides
   • Direct contact with pesticides while mixing/loading/transporting/applying
   • Direct contact with pesticides while repairing equipment used in pesticide application

2. When did the exposure occur? (Include date and time if possible) __________________________
   ________________________________________________________________________________________

3. Where did the exposure occur? (Provide specific information about location of field, greenhouse, or building) ____________________________________________________________
   ________________________________________________________________________________________

4. Did you suffer any symptoms after the exposure? (Circle any symptoms reported)
   • Dizziness, nausea and vomiting, blurred vision, chest tightness, headache, muscle cramps, drooling, loss of consciousness, skin rash, eye or throat irritation, other: ______
   ________________________________________________________________________________________
   • Did you see a doctor? Please give name and address of doctor: _________________________________
   ________________________________________________________________________________________
   • Are you having any symptoms now? If so, list: ______________________________________________
   ________________________________________________________________________________________

5. What pesticide(s) were you exposed to? (Name(s), how it was applied, crop or other target if known).
   ________________________________________________________________________________________

6. Grower name and contact information: _____________________________________________________
   ________________________________________________________________________________________

Send to:
North Carolina Department of Agriculture
FAX number: 919-733-9796
Telephone number: 919-733-3556

For further support:
Pesticide Drift Hotline
1-877-NO-DRIFT (1-877-663-7438)

Contact information (You may file anonymously, but this may decrease effectiveness):
Name of person filing report: ________________________________
Name(s) of exposed persons: ________________________________
Contact information: _______________________________________
Date of Report: ___________________________________________
RASH ON BODY

Rash is often a symptom of other illnesses.

- If farmworker is taking any medications, contact provider to ask if rash could be due to a medication allergy.
- If farmworker feels systemically ill or has significant symptoms in addition to rash, contact provider or arrange urgent visit.
- If the farmworker might have scabies, chickenpox, rubella, measles, or any other contagious condition, check with the provider’s office or emergency room before bringing the farmworker into the building. Often the farmworker needs to go directly into an exam room to avoid exposing other clinic patients.
- Rubella, measles, and syphilis both cause a red rash, chickenpox causes a rash composed of small blisters at varying stages, and shingles cause a rash which concentrates in one area of the body, with lesions following a dermatome.

**ASSESSMENT:**

These findings suggest **SKIN INFECTION**:

- Red, warm, tender, or swollen areas of skin
- Red streaks traveling away from the affected area
- Insect bite or wound preceding the onset of redness and pain
- Fever or chills – check temperature

**RESPONSE:**

1. If cellulitis is suspected, the Farmworker must see a provider right away.
2. Warm compresses and soaks can be used while waiting for the Farmworker to be seen.
3. Td vaccine should be updated in Farmworkers with cellulitis.

These findings suggest **CONTACT DERMATITIS OR ALLERGIC REACTION**:

- Itchy red rash on parts of the body that are not covered by clothing
- Rash may be made up of tiny blisters

**RESPONSE:**

1. Call provider or arrange urgent visit to rule out infection if there is fever, pain, or swelling
2. Arrange urgent visit for involvement of face, hands, or genitals; involvement of large areas of the body, or Farmworker distress or discomfort

**Self-care**

For contact dermatitis:

- Cool compresses to affected areas, followed by Calamine lotion or hydrocortisone 1% cream up to every 4 hours as needed.
- Diphenhydramine 25 mg 1-2 tablets every 4 hours as needed for itching. Caution Farmworker to avoid driving or heavy machinery, as the medication will cause drowsiness. Loratidine 10 mg once daily may also be used.
- Recommend mild soap such as Dove, Tone, or Caress, and advise Farmworker to avoid scratching.
- Counsel on use of protective clothing to prevent further episodes.
- If rash is arranged in streaks and poison ivy is suspected, educate about the appearance of the plant, the importance of avoiding it, and washing with soap and water immediately touching it.
ASSESSMENT:

Farmworker Reports

Farmworker reports itchy, scaly, peeling rash and itching on feet, especially between the toes. These findings suggest ATHLETE’S FOOT.

RESPONSE:

Arrange clinic visit within 12 hours or call medical provider if fever, severe redness, pain, or swelling are present. If rash does not improve in two weeks, see a provider and bring the tube of cream they have been using.

Self-care

Purchase one of these creams over the counter, and apply twice a day to clean, dry feet.

- Miconazole 2%
- Clotrimazole 1%
- Tolnaftate 1%
- Lamisil 1%

Wash feet daily, dry thoroughly between toes, and leave feet open to air when possible.

Wear flip-flops or shower shoes in the shower.
RASH IN GROIN

ASSESSMENT:

Farmworker Reports

Farmworker complains of red, scaly, itchy rash in the groin area (skin fold between inner thigh and body). These findings suggest JOCK ITCH / TINEA CRURIS

RESPONSE:

1. Arrange medical visit if Farmworker complains of rash, ulcer, or sores on penis or scrotum, or if he has fever, pain with urination or pus or discharge from the penis.

2. Arrange visit if Farmworker requests, if there has been a possible STD exposure, if Farmworker is concerned about STDs, or if the Farmworker is vague about where and what his problem is.

3. Arrange a visit if self-care has not resolved the problem; remind him to bring the tube of medicine he has been using to the office visit.

4. Farmworkers with severe tinea cruris should be checked for diabetes.

Self-care

- Keep the area clean and dry
- Apply anti-fungal cream twice a day to the affected area after showering and thoroughly drying the skin. These are all available for purchase over the counter.
  - Miconazole 2%
  - Clotrimazole 1%
  - Tolnaftate 1%
  - Lamisil 1%
ASSESSMENT:

Farmworker Reports
Farmworker reports runny nose, sneezing, watery eyes, and itching of eyes, ears, nose, throat; often worse at certain seasons of the year.

You Observe
Clear watery discharge from eyes and nose. Farmworker does not have fever or sinus tenderness.

RESPONSE:
1. Arrange a clinic visit if Farmworker requests, if Farmworker is very symptomatic, or if over the counter treatments are not effective.
2. Call medical provider or arrange urgent visit if wheezing or shortness of breath.

Self-care
- They can try Loratidine (Claritin) 10 mg 1 tablet daily, or use with diphenhydramine (Benadryl) 25 mg 1 – 2 tablets PO every 6 hours. Caution the Farmworker not to drive or use heavy machinery while taking diphenhydramine, as this will cause drowsiness.
- They can add pseudephedrine 30 mg 1 – 2 tablets PO every 6 hours if drowsiness results or if symptoms persist on loratidine or diphenhydramine.
- They should avoid dust, pollen, and obvious irritants. Use a mask in the field if symptoms are much worse there. If symptoms are worse in the home, look for dust or mold in the house and remove it.
RESPIRATORY SYMPTOMS- COMMON COLD

ASSESSMENT:

Farmworker Reports

Farmworker says he/she has stuffy or runny nose, sneezing, post-nasal drip, cough, cold symptoms.

RESPONSE:

Call provider or arrange urgent medical visit if Farmworker has shortness of breath, wheezing, coughing up blood, ear pain, chest pain, or looks ill.
Routine visit if Farmworker requests, if fever over 100.4 °F, if sore throat lasts more than one day, or if respiratory symptoms last longer than 2 weeks.

Self-care

- Rest, drink plenty of fluids (especially juice and broth)
- Frequent handwashing to reduce transmission to others
- Stuffy or runny nose: pseudephedrine 30 mg, 1 –2 tablets 4 times a day. Avoid if history of high blood pressure, thyroid disease, insomnia, or severe anxiety, or if Farmworker is breastfeeding.
- Loratidine 10 mg once daily or diphenhydramine 25 mg can be taken at bedtime for these symptoms if pseudephedrine cannot be used.
- Cough: use 1 cough drop every 2 hours, or Robitussin DM or equivalent 1 tablespoon every 4 hours. (Choice based on Farmworker choice and/or pharmacy availability.)
- Aches and pains:
  - Ibuprofen 200 mg 2 tablets every 4 hours if no contraindications (contraindications include ulcer/gastritis/esophagitis; pregnancy; allergy to aspirin, ibuprofen, or NSAIDs)
  - If contraindications, use acetaminophen in available dosage strength
  - Acetaminophen 325 mg 2 tablets every 4 hours
  - OR Acetaminophen 500 mg 2 tablets every 6 hours
SEIZURES

ASSESSMENT:

You Observe

Farmworker is experiencing a seizure. This may include, but is not limited to, convulsions, chewing movements, difficulty talking, drooling, eyelid fluttering, eyes rolling up, falling down, foot stomping, hand waving, inability to move, incontinence, lip smacking, making incoherent noises, shaking, staring, stiffening, swallowing, sweating, teeth clenching/grinding, tongue biting, tremors, twitching movements, and breathing difficulty.

RESPONSE:

2. Clear the area of hard, sharp, or hot objects that could cause injury. Place something soft under the head.
3. Do not restrain the person – you cannot stop a seizure once it has begun.
4. Do not force anything between the teeth. Attempts to prevent tongue-biting can do more harm than good.
5. After the seizure, turn the person on his side to allow saliva to drain out of the mouth. Often the person will be sleepy and need to rest.
6. Do not offer anything to drink until the person is fully awake.
7. Observe – what exactly is happening and how long does it last?
8. Monitor symptoms after seizure stops

Call 911 if:

1. The person has one seizure after another without waking up.
2. The person does not stop breathing after the seizure. (It is normal to have difficulty breathing during the seizure.)
3. The person has been injured.
4. This is the person’s first seizure.
5. If they have had seizures before but have a fever, severe headache, or more than one seizure in 24 hours, encourage them to seek medical attention.
6. If EMS is called, report to them exactly what you observed during the event and ask them to write it on their report, as it will be helpful to the emergency room staff.

Source: “What is Epilepsy?” by the Comprehensive Epilepsy Program of Wake Forest University School of Medicine
SUBSTANCE ABUSE: ALCOHOL

ASSESSMENT:

Farmworker Reports
When conducting health assessment, the farmworker reports he/she uses alcohol and the amount of alcohol consumed is within the following range:

- Men > 14 drinks / week or > 4 drinks per occasion
- Women > 7 drinks per week or > 3 drinks per occasion

RESPONSE:

1. Ask Advanced Screening Questions about alcohol use - CAGE
   - Have you ever felt that you should Cut Down on your drinking?  Yes No
   - Have people Annoyed you by criticizing your drinking?  Yes No
   - Have you ever felt bad or Guilty about your drinking?  Yes No
   - Have you ever had a drink first thing in the morning to steady your nerves or get rid of a hangover? (Eye opener)  Yes No
   
   Positive: 2 yes answers. If positive, refer for further assessment and treatment.

2. State, “I am concerned about your drinking and want you to cut down”, and agree on a drinking goal that falls within the following range:

   - Men < 14 drinks / week or < 4 drinks per occasion;
   - Women < 7 drinks per week or < 3 drinks per occasion.

3. Refer to health center and/or if available, to mental health provider

Self-care
- Advise women who drink to abstain if they become pregnant.
- Advise everyone not to drink and drive.
ASSessment:

1 Farmworker Reports

- Gastritis or ulcer can cause discomfort or burning pain in epigastric area, which may be changed by food and temporarily improved by antacid
- "Heartburn" is a non-medical term for gastroesophageal reflux, where acid or stomach contents enter the esophagus or mouth, leading to a bitter taste in the mouth and a burning sensation in the upper abdomen and chest. This is usually worse after eating, smoking, or ingestion of sodas or caffeinated beverages.

response:

1. Call provider or arrange urgent visit if urgent symptoms are present: vomiting, blood in emesis, black or bloody stools, constant or severe pain, any pain in low abdomen or right abdomen, pregnancy, fever, jaundice.
2. Medical regimen: liquid antacid 1 TBSP after each meal and at bedtime or 2 antacid tablets after each meal and at bedtime; if taking antibiotic check for interactions. If insufficient improvement, the following OTC medications may be recommended:
   - Prilosec 20 mg 1 tablet once daily
   - Zantac 75 mg or 150 mg 1 tablet twice daily
   - Pepcid AC 10 mg 1 tablet twice daily
3. Routine visit if Farmworker requests or if Farmworker has already tried over the counter treatment without benefit. Remind Farmworker to bring their medication to the medical visit.
4. Heart attacks can feel like indigestion. If farmworker has persistent chest discomfort, follow Chest Pain Protocol.

Self-care

- Stop all irritants, including aspirin, ibuprofen (Advil and others), anaprox or naprosyn (Alleve), NSAIDs, coffee, caffeinated sodas, alcohol, smoking, fatty foods, spicy foods, and any food that makes them feel worse.
- Eat small frequent meals
- For reflux, they should not eat or drink anything for 2 hours before bedtime, and elevate the head of the bed about 6 inches
ASSessment:

Farmworker Reports

Women who could become pregnant need to take a multivitamin containing folic acid 0.4 mg daily to prevent certain birth defects. Men often request a vitamin to help with appetite loss, fatigue, or other non-specific symptoms.

You Observe

Normal

RESPONSE:

1. Call MD if Farmworker is pregnant to request prenatal vitamins.

2. Males and females that are not of child-bearing age: Instruct Farmworkers to take one tablet daily. Avoid vitamins which contain iron, unless the Farmworker is known to be anemic.

3. Women of child-bearing age should be especially encouraged to take a vitamin containing folic acid daily to prevent birth defects and to improve general health and well-being. Give literature about the importance of folic acid in promoting healthy pregnancies, and encourage her to obtain more vitamins when she finishes the supply you have given her. Be sure to document on your encounter form that you have given vitamins and shared this health information with the Farmworker.

4. Nursing actions: instruct in eating three balanced meals per day, adequate rest, adequate fluid intake for work and weather conditions.

5. Follow-up:

   Women who become pregnant should contact the clinic for prenatal vitamins and prenatal care. They should continue their multivitamin until they start their prenatal vitamins.

Thank you for helping prevent neural tube defects in North Carolina!
**Assessment:**

1. **Farmworker Reports**
   
   Mild discomfort

2. **You Observe**
   
   Burn, abrasion, or superficial laceration of skin

**Response:**

1. Arrange urgent medical visit if: deep or puncture wound, large or deep burn, loss of movement, strength or sensation in affected limb, severe bleeding, deformity or possible fracture, signs of infection.
   - If sutures will be needed, refer within 8 hours.
   - Splint limb deformities and refer immediately
   - Stabilize neck and back injuries and call 911.

2. Medical/nursing actions for wounds not requiring referral:
   - If active bleeding, immediately put on disposable gloves (or use thick dressing if gloves not available) and apply pressure until bleeding stops.
   - Wash hands, put on disposable gloves.
   - Wash wound with soap and water.
   - Apply antibiotic cream or ointment, then Band-Aid or gauze/roll bandage/tape as appropriate.
   - Instruct Farmworker to wash wound and re-dress daily.
   - Td (tetanus) vaccine within 48 hours if indicated

3. Follow-up: instruct Farmworker to call or come in for fever of 100.4 °F or more, redness, or pus coming from the wound or burn. Burns should be rechecked in 2 days unless extremely minor.