



GOVERNMENT OF THE DISTRICT OF COLUMBIA
DEPARTMENT ON DISABILITY SERVICES

DDS TRANSMITTAL #19-8

TO: All Developmental Disabilities Administration Providers of Residential, Day and Employment Services

FROM: Erin Leveton, Deputy Director
Quality Assurance and Performance Management Administration 

DATE: June 28, 2018

RE: Summertime Precautions

Summer is here! While that offers us all a chance to enjoy some fun in the sun, the Department on Disability Services (DDS) is issuing this transmittal to remind everyone that extra precautions may be needed for persons supported by the Developmental Disabilities Administration (DDA) to enjoy the weather, because of the associated risks that come with the summer season. Areas of concern include: sun/heat exposure/exhaustion, dehydration, swimming pool safety, and vacation. Additionally, at summertime barbecues (BBQs) and picnics, mealtime protocols and food texture requirements for each person must be maintained to ensure the person's safety.

Sun/Heat Exposure/Exhaustion

At community outings, please protect against sun/heat exposure/exhaustion by ensuring that people are:

- Drinking plenty of fluids.
 - Please pay particular attention to persons whose resting facial expression involves an open mouth position leading to increased insensible water loss.
- Protected with sun block.
- Appropriately dressed for the weather.
 - Please ensure that people are wearing light-colored loose fitting clothing made of light cotton or breathable fabrics.
- Never left in a parked car. Consider having an attendance check-list when using a van.

Additionally, please take extra precautions with certain medications, many of which are listed at the end of this transmittal.

- Please be on the lookout for heat-related problems if the person takes medications that can affect the body's ability to stay hydrated and dissipate heat.
- Familiarize yourself with the attached list (see pages 4-5) of psychotropic medications that cause sun and/or heat sensitivity.



Some of the signs and symptoms of heat exhaustion may develop suddenly or over time, especially with prolonged periods of exercise, and they include:

- Cool, moist skin with goose bumps when in the heat;
- Heavy sweating;
- Faintness;
- Dizziness;
- Fatigue;
- Weak, rapid pulse;
- Low blood pressure upon standing;
- Muscle cramps;
- Nausea; or
- Headache.

If you think the person is experiencing heat exhaustion, have them stop all activity and rest, move to a cooler place, and drink cool water or a sports drink to help restore electrolytes (these typically contain a modest amount of salt). Contact the agency nurse for an assessment of whether the person requires additional care. Typically, you should contact the person's doctor if the signs or symptoms worsen or if they do not improve within one hour.

DO seek emergency attention if the person becomes confused or agitated; is unable to drink; has flushed, dry skin and no sweat even when exerting themselves during hot weather; or loses consciousness – these and other symptoms can be symptoms of the life-threatening condition heat stroke.

Dehydration

Take precautionary measures to avoid the harmful effects of dehydration including:

- Make sure that people drink plenty of fluids, especially when working or playing in the sun;
- Ensure that people are taking in more fluid than they are losing;
- Whenever possible, schedule people's physical outdoor activities for cooler parts of the day; and
- When people engage in outdoor activities, consider supplying people with appropriate sports drinks to help maintain electrolyte balance.

While each person may experience the symptoms of dehydration differently, the following are the most common symptoms of dehydration:

- Thirst;
- Less-frequent urination;



- Dry skin;
- Fatigue;
- Light-headedness;
- Dizziness;
- Confusion;
- Dry mouth and mucous membranes (look for cracked lips); or
- Increased heart rate and breathing.

Dehydration, if caught early, can often be treated at home under a healthcare provider's guidance. Please contact the agency nurse for an assessment and guidance. In cases of mild dehydration, the person should drink fluids for simply rehydration. Many sports drinks on the market effectively restore body fluids, electrolytes, and salt balance. If caught early enough, simple rehydration may be effective. Cases of serious dehydration should be treated as a medical emergency, with immediate action taken. Hospitalization, along with intravenous fluids, may be necessary for full recovery.

Swimming Pool Safety

While cooling off and having fun, it is important to be safe when it comes to swimming pool safety. Provider staff taking people to swimming pools must ensure the pools are staffed with lifeguards and remain with people at all times. Additionally, everyone must be aware of signs and symptoms of “dry drowning” and “secondary drowning.” In “dry drowning” water never reaches the lungs. Instead, breathing in water causes the person’s vocal cords to spasm and close up, shutting off the airways and making it hard to breathe. “Secondary drowning” happens when water gets into the lungs and irritates the lungs’ lining and fluid builds up, causing pulmonary edema. If this happens the person would have trouble breathing, a symptom that might worsen over the next 24 hours. Symptoms may include:

- Coughing;
- Chest pain;
- Trouble breathing; or
- Feeling extremely tired

Any problems that develop are usually treatable if medical treatment is sought right away. Alert the provider nurse and keep a close eye on the person over 24 hours if they experienced any problems while in the water.

Vacation and BBQs/Cookouts

As a reminder, when supporting people on vacations, staff should be prepared with people’s health passports, adequate doses of medications, and insurance information. Staff should prepare



in advance by learning where urgent care centers and local hospitals are located, and having those telephone numbers and addresses available in case they are needed.

Lastly, keep in mind people's mealtime protocols and food textures when preparing for any BBQs/cookouts. Be prepared with the necessary equipment to achieve the necessary food textures and follow all mealtime protocols.

Thank you for your partnership in helping to keep the people we support safe. Please feel free to ask any questions of, or relay any concerns you may have to, Titilayo Ilori at (202) 590-7536 or Chioma Nwachukwu at (202) 615-8268, Supervisor Nurse Consultants.

Common Medications that cause sun and/or heat sensitivity

Trade Name	Generic Name
Abilify	Aripiprazole
Asendin	Amoxapine
Artane	Trihexyphenidyl
Aventil, Pamelor	Nortriptyline
Chlorpropamid	eDiabines
Cloazril	Clozapine
Cogentin	Benztropine
Compazine	Prochlorperazine
Desyrel	Trazodone
Effexor	Venlafaxine
Elavil, Limbitrol, Triavil	Amitriptyline
Eskalith, Lithobid, Lithonate	Lithium
Geodon	Ziprasidone
Haldol	Haloperidol
Loxitane	Loxapine
Ludiomil	Maprotiline
Mellaril	Thioridazine
Moban	Molindone
Naproxen	Naprosyn
Piroxicam	Feldene
Navane	Thiothixene
Norpramin	Desipramine
Phenergan	Promethazine
Prolixin	Fluephenazine
Promethazine	Phenergan
Remeron	Mirtazapine
Risperdal	Risperidone
Serentil	Mesoridazine
Seroquel	Quetiapine
Sincquan	Doxepin



Stelazine	Trifluoperazine
Thorazine	Chlorpromazine
Tofranil	Imipramine
Tretinoin	Avita, Renova, Retin-A
Trilafon	Perphenazine
Wellbutrin	Bupropion
Xanax	Alprazolam
Zoloft	Sertraline
Zyprexa	Olanzapine