

WHY SCHOOLS MATTER

You may see it first



A child with PANS or PANDAS can change almost overnight, and it often happens during the school day. Teachers, nurses, counselors and aides see students for hours at a time, so they are often the first adults to notice.

Recognizing the pattern early and sharing what you see with the family can shorten a long, frightening search for answers.

It's often mistaken for...

- A new behavior or discipline problem
- ADHD or a learning disability
- Anxiety, school refusal or "just a phase"
- An eating disorder
- A primary psychiatric illness

The clue is the sudden change. The question to ask is less "what is this child like?" and more "when did this child change, and how fast?"

This guide is for education only and is not medical advice. It is not a tool for diagnosing a student. Only a licensed clinician can diagnose PANS/PANDAS.

ABOUT US

Pediatric H.E.L.P. Organization



We are a California nonprofit building Southern California's first integrated center for children with PANDAS, PANS and related post-infectious neuroimmune disorders. The center will bring diagnosis, infusion treatment, family support and insurance advocacy under one roof.

We offer **in-service trainings** for school nurses, counselors, psychologists and teachers across Los Angeles, Ventura and Orange counties.



Scan for more resources, family stories, and to request a training for your school or district.

Pediatric H.E.L.P. Organization

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Sources: PANDAS Physicians Network (pandasppn.org/school); PANDAS Network, "Signs and Symptoms" (pandasnetwork.org); Virginia Department of Health, "PANDAS/PANS School Systems Handout." Consensus PANS criteria: Swedo et al., 2012.



FOR SCHOOL NURSES, TEACHERS & STAFF

What to Look For

Recognizing PANDAS & PANS in the school setting



A sudden change in a student's behavior, schoolwork or health may be more than it looks. Here's what to watch for, and what to do next.

"Every Child Deserves HELP"

Healing · Encephalopathy · Leadership · Program

THE BASICS

What are PANS & PANDAS?

PANS (Pediatric Acute-onset Neuropsychiatric Syndrome) is a sudden, dramatic onset of obsessive-compulsive symptoms or severely restricted eating, together with other neuropsychiatric symptoms.

PANDAS is a subtype linked to a **strep infection**. Other triggers include flu, mycoplasma, Lyme disease and other infections. Researchers believe the immune system mistakenly affects the brain, which causes inflammation that shows up as behavior.

The hallmark: onset is sudden

Parents often describe it as "a different child overnight." The change usually happens within **24–72 hours** and often comes days to weeks after an illness. Symptoms may then flare and ease over time, often with new infections.

How clinicians identify PANS

A sudden onset of OCD or restricted eating, **plus at least two** of: anxiety · mood swings or depression · irritability or aggression · regression · decline in school performance · sensory or motor changes · physical symptoms such as sleep problems or urinary frequency.

Criteria from Swedo et al., 2012, and the PANDAS Physicians Network.

SIGNS TO WATCH FOR

In the classroom & nurse's office

Behavior & emotions

- New obsessions or rituals: repeated hand-washing, checking, redoing work, "just right" rituals
- Severe separation anxiety or refusal to come to school
- Sudden rage, irritability or oppositional behavior
- Extreme mood swings, crying or depression
- Acting much younger than their age (regression)

Learning & schoolwork

- **Handwriting suddenly gets worse.** Compare it with work from earlier in the year.
- New trouble with math, reading or memory
- Can't focus, or processes information more slowly
- Pulls away from friends

Physical signs & health office visits

- Frequent or urgent bathroom trips, or new daytime wetting
- Barely eating at lunch, or new fears about food, swallowing or contamination
- New motor or vocal tics (blinking, shrugging, throat clearing)
- Sensitivity to noise, light, textures or clothing
- Tired from poor sleep, joint pain, dilated pupils
- A recent strep throat, sore throat or other illness

WHAT TO DO

If you notice a sudden change

- 1 Write it down.** Note what you saw, when it started and how quickly it came on. Keep dated work samples, especially handwriting.
- 2 Share what you see with the family, the same day if you can.** Describe the behaviors without labeling them: "We've noticed a big change this week..."
- 3 Suggest a pediatrician visit soon.** Families can ask about a possible infection trigger and whether a strep test is appropriate.
- 4 Tell families about strep cases in the classroom.** A new exposure can bring on a flare.
- 5 Coordinate the team.** Include the teacher, nurse, counselor and school psychologist. A **504 plan or IEP** may be needed.

Classroom supports that help

- Reduced workload
- Extra time
- Unlimited restroom pass
- Quiet, safe space
- Own water bottle
- Spare clothes
- Flexible attendance

If a student is in crisis or talks about hurting themselves, follow your district's crisis protocol, call or text **988**, or call **911**.

See our companion guide, "**Where to Turn**," for who to contact next.