

Congenital heart defects: Information for teachers

Reviewed by SickKids Hospital Staff | Last updated: November 6th 2009

A teacher's guide to congenital heart defects. Learn what you can do to help and what to expect if one of your students has a congenital heart defect.

Key points

- A heart condition will often have some impact on a student's performance at school, both in and out of the classroom.
- Teachers should be aware of any restrictions on physical activity a student has because of a heart condition.
- Teachers should understand that heart surgery will be disruptive to the student's school work and may also have other physical and behavioural effects.
- By co-ordinating with the student's parents and staff at the child's cardiac clinic, teachers can help children with heart conditions succeed.

What is a congenital heart defect?

A congenital heart defect is a condition that develops early in pregnancy. It may involve one abnormality or a combination of abnormalities in the structure of a child's heart. Some of the more common defects are:

- holes in the walls between the heart chambers
- abnormal valves
- abnormalities in the blood vessels entering or leaving the heart



In most cases, the cause of a congenital heart defect cannot be determined. In some, certain medications or infections, such as rubella, contracted during pregnancy have been known to cause heart abnormalities.

Congenital heart defects are usually diagnosed before a child is enrolled at school.

Students with a congenital heart condition

Most children with simple heart defects do not require any special care when they attend school. Those with more complicated heart defects, however, may show signs that occasionally require attention. These signs include:

- **Cyanosis:** This is a blueness of the lips and nail beds that may increase with exercise but should not bother the student. It is caused by reduced oxygen in the blood flow to the body.
- **Increased fatigue:** Children may tire more easily or may be short of breath after exercise.
- **Increased susceptibility to chest infections:** Students may be more likely to get common respiratory infections such as bronchitis and [pneumonia](#). In some types of heart disease, too much blood reaches the lungs, making them more susceptible to infection.
- **Small size:** Students with heart defects may be shorter or lighter than their classmates. Many children with congenital heart defects have difficulty gaining weight.

What teachers need to know

It is important that teachers know the nature of a student's heart condition and the implications it has for school activities. For example, if there are only five minutes between classes but a child with a heart condition needs ten minutes to travel from one class to another, arrangements should be made to give the child the extra time to get to class and not be penalized for taking a few extra minutes. Parents, cardiology clinic nurses, and physicians can provide you with information about the student's health, permitted activity level, medications, and future treatment.

Your student's permitted activity level

Permitted activity levels are determined by your student's physicians. Ask the parents if the student has any activity restrictions. In general, activity restrictions are graded in the following manner:

- **Full:** The student is allowed to exercise at will and participate fully in all sports.
- **No competitive sports:** The student is allowed to exercise but is not allowed to participate in races, organized games, or team sports.
- **Restricted:** Please obtain specific guidelines from your student's parents.

If you have any questions about any activity restrictions, please contact the child's parents or, together with the child's parents, speak to the staff at the child's cardiac clinic.

Your student's medications

Medication is usually taken at home. In cases where children need to take some medication while at school, arrangements should be made between school board officials, and the parents. As the teacher, you should be kept informed of the medications your student is taking and of their specific purpose.

Your student's future treatment

Continuing contact with your student's parents will keep you informed about plans, if any, for a student's future hospitalization. This information can help you identify and respond to the child's needs and concerns. The prospect of hospitalization and/or surgery may create anxiety, which sometimes results in changes in behaviour and performance at school.

What to do if your student is going for surgery

To help your student before surgery, you may want to discuss with the child's parents the date of surgery, the reason for it, the proposed length of hospitalization, and the time needed to recover before the student returns to school. You should know what specific information your student knows about the coming surgery, and whether it is all right for you to discuss the surgery with the student or classmates.

If you have any questions about preparation for surgery for your student or about what to say to classmates, please contact the child's parents or, together with the parents, speak to the medical or nursing staff at the child's cardiac clinic. Many hospitals have a teacher on staff to help child patients keep up with their schoolwork. If your student is going to be in hospital longer than two weeks, continuation of schoolwork can be arranged.

A student in hospital can benefit from contact with their classmates. It can take the form of get-well cards or audio cassettes sent to the hospital, or visits once the patient has returned home. Students over the age of twelve may be able to visit a classmate in hospital. Please check with the parents of the hospitalized child before visiting or suggesting visits.

What you should know after your student's surgery

Generally, children recover at home for about two weeks following heart surgery. A gradual return to school and other normal activities is usually the recommendation. For example, a student may initially attend classes for half days for the first few days back at school.

Possible behavioural changes

You may see an improvement in the colour and/or activity level of your student after surgery. It is important for you to discuss with parents, or, together with the parents, speak to the medical or nursing staff at the child's cardiac clinic regarding any changes in the limitations placed on the student's activities.

You may encounter some behaviour changes when your student returns to school. These changes may occur in response to hospitalization and surgery and are usually temporary. Some children will require more of your time and attention than before surgery. Others experience nightmares and disrupted sleep patterns, and tire more quickly than usual. All these things may affect their school behaviour.

Possible physical and mental effects due to surgery

Depending on the type and difficulty of the surgery, some students may experience vision problems, neurological impairments, or gross and fine motor delays. This may be more common following open-heart surgery. These deficits can affect a child's everyday functioning and social and emotional well-being. Prompt identification of deficits in any of these areas can lead to early interventions and improved outcomes.

Support from teachers and the school board

Students with congenital heart disease need your support to develop their full academic potential, since physical limitations may exclude them from certain types of employment. Your help is essential. If a student has any special needs arising from a cardiac problem, they should be referred for review by the appropriate school or board committee. Please discuss your student's needs with the parents or, together with the parents, speak to the medical or nursing staff at the child's cardiac clinic.

[Please visit AboutKidsHealth.ca](https://www.aboutkidshealth.ca) for more child health information.

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