

## **THE SCHOOL OF SACRED HEART ST. FRANCIS de SALES HEALTH AND WELLNESS HANDBOOK**

### **GENERAL ILLNESS OR INJURY**

- A. If your child is ill or appears to be ill; you are requested to keep him/her at home. In this way we can prevent the spread of infections. Please contact the school if your child is going to be absent or tardy.
  
- B. If a child comes to school ill or becomes ill at school, the parent or guardian will be contacted at home or work to come for him/her.
  
- C. It will be the responsibility of the parent or guardian to provide transportation and care taking for his/her ill or injured child. Be sure that we have a telephone number where you can be reached at all times. You are requested to provide two (2) names and phone numbers of family or friends who will take responsibility for your child when you are unavailable.
  
- D. In general, any child attending school must participate in physical education and outside activity. In some instances, the parent or nurse may excuse a child for up to one (1) week. Non-participation for longer than one (1) week will be permitted only with a written doctor's excuse.
  
- E. School personnel will wear gloves at all times when in contact with blood/body fluids from all persons.
  
- F. It is not the school's responsibility to diagnose or treat illness or injury. School personnel is responsible for giving immediate aid and notifying parents.

### **INJURIES AND EMERGENCY PROCEDURES**

- A. All injuries occurring at home are the parent's/guardian's responsibility.
  
- B. In the event of a medical emergency, the following procedure is used:
  - 1. The parent/guardian is notified as soon as possible after the emergency occurs.
  - 2. If the injury appears to be serious, the child will be transported by the Bennington Rescue Squad directly to the hospital emergency room.

3. Every attempt is made to have the nurse present, but if this is not possible any adult present on the scene follows this procedure.
4. The school does make every effort to contact parents either at home, work or otherwise. If we do not find you on our first try we continually call until we reach you.
5. If a child must be taken to the emergency room at the hospital, **A PARENT WILL NEED TO BE PRESENT**. If they are seriously ill or injured, evaluation and treatment will be started prior to your arrival. The hospital has a form you will be required to sign for treatment.

### **MEDICATION**

- A. We urge that any medication be given at home if possible.
- B. Prescription medications will be given in school only with **WRITTEN PERMISSION FROM BOTH THE PARENT/GUARDIAN AND THE PHYSICIAN**.
- C. Non-prescription medication will be given in school only with **WRITTEN PERMISSION OF THE PARENT/GUARDIAN**. Non-prescription medications to be given over 3 weeks must be accompanied by a written physician's order.
- D. Prescription and non-prescription medication forms are available at school (for A and B above).
- E. All medications (prescription and non-prescription) must come to school in a bottle from the pharmacy or labeled as follows: child's name, medication and directions. Ask the pharmacist for two bottles. Medication will not be given if in an envelope or a plastic bag. This includes non-prescription drugs.
- F. **NO ASPIRIN OR SALICYLATES WILL BE GIVEN IN SCHOOL** (unless prescribed by a physician) because of its possible association with Reye Syndrome. We advise that you contact your physician before giving aspirin at home.

**PLEASE NOTE:** If your child has a history of any allergic reactions to bees, wasps, etc. and is required to have a "bee sting kit" or other medication in school, you **MUST** notify the school at once. It is the parent/guardian responsibility to provide the appropriate medication and written physician's directions for administration of medication. If your child is stung, you will be notified immediately. If your child is

having an allergic reaction, he/she will be transported to the hospital emergency room.

### **VISION SCREENING**

A. Routine vision screenings are done for all students. Students are also screened if referred by a teacher, parent or physician.

B. Children are retested if necessary. Any child failing the retest will be referred. A parent or guardian will be contacted by written note and/or telephone.

C. We do request a report from the doctor on his/her findings.

### **HEARING SCREENING**

A. Routine hearing screenings are done for all students. Students are also screened if referred by teacher, parent, or physician. The audiologist assisted by the school nurse does some testing.

### **IMMUNIZATIONS**

Vermont State Law and Sacred Heart St. Francis School requires all students to have the following immunizations:

#### **Before enrolling in Kindergarten -**

- ◆ DTaP - 5 doses. (diphtheria, tetanus, and pertussis) vaccine
- ◆ Oral Polio - 4 doses.
- ◆ MMR - 2 doses of MMR (measles, mumps, and rubella) vaccine
- ◆ Hepatitis B - 3 doses
- ◆ Chickenpox (varicella) – 2 doses

#### **Before enrolling in seventh grade –**

- ◆ All of the immunizations listed above **AND**

- ◆ Tdap – 1 doses (tetanus, diphtheria, and pertussis) vaccine.

These requirements also apply to all students entering as a new student in our school.

### SCREENINGS

- ◆ Heights and weights - These are done on all students in grades Pre-K - 8.
- ◆ Scoliosis Screening - Scoliosis (curvature of the spine) screenings are done on all 6th grade students and any girl age 11, or boy 13. You will be notified when the screening is completed and the results, if a problem is indicated.
- ◆ Blood Pressures - Blood Pressures are taken on all students.
- ◆ Physicals - Physicals are recommended on all Kindergarten and sixth grade students. It is not required, but highly recommended.
- ◆ Records - A health record is maintained for each student in Pre-Kindergarten through Grade 8 and is part of the cumulative record.
- ◆ Conferences - Conferences are held with parents at any time deemed necessary.

**Parents are ultimately responsible for their child's health.**

### COMMUNICABLE DISEASES

#### General Information

Children with an elevated temperature and/or other signs of illness will be excluded from school. Children should be fever free for 24 hours before returning to school. If children are put on medication (e.g. antibiotic) they must be on the medication at least 24 hours before returning to school.

Children who are immuno-suppressed will be notified of the occurrence of a high-risk disease (e.g. chicken pox).

- ◆ AIDS/HIV Infection - A child with AIDS may attend school in compliance with school policy.

- ◆ Chicken Pox - The child will be excluded from school until all lesions are dry and crusted (approximately 6 -8 days following eruption).
- ◆ Cold Sores (fever blisters, Herpes simplex) -The child may attend school if feeling well and fever free. The child should avoid direct contact with a lesion. Frequent hand washing is strongly encouraged.
- ◆ Conjunctivitis (Pink Eye) - If suspected, the child will be referred to the parent and excluded from school until a release is signed by a physician.
- ◆ Diarrhea - The child with diarrhea will be excluded from school. He/she may return to school when the diarrhea has stopped. Frequent hand washing with soap is encouraged.
- ◆ Fever Blisters - (See Cold Sores)
- ◆ Fifth Disease - The child diagnosed with "fifth disease" may return to school when fever free and feeling well. The rash may still be present.

**PLEASE NOTIFY THE SCHOOL NURSE IF THIS DIAGNOSIS IS MADE.**

- ◆ **Head Lice** -Children with head lice will be excluded from school until there is no evidence of lice or viable eggs (live nits). Treatment with an appropriate medicated shampoo or rinse and combing out of dead nits will be necessary. Your child will be rechecked for head lice.
  - A. We urge parents to check their children's hair at least once a week for signs of head lice. If you do not know what to look for, please contact the school.
  - B. Periodic head checks may be done at school. If your child is found to have signs of head lice, you will be notified by note or telephoned.
  - C. The child must be treated with a pediculicide shampoo or rinse, and every effort made to remove all nits.
- ◆ **Hepatitis A** - The child may return with a release signed by a physician after a minimum of one week following onset of jaundice. Frequent hand washing with soap is encouraged.
- ◆ **Hepatitis B** - Active Disease  
The child may return to school when blood tests indicate there is no risk of contagion and with a release signed by the physician.

**CARRIER STATE** - Please contact the school.

- ◆ **Herpes Simplex** (See Cold Sores)
- ◆ **Herpes Zoster** (See Chicken Pox)
- ◆ **Impetigo - Multiple Draining Boils - Skin Infections.** The child will be excluded from school until the child is under a physician's care and there is no longer a sign of drainage. The child must have a signed physician's release to return to school.
- ◆ **Measles** - The school **MUST** be notified if your child is diagnosed with measles. The child may return to school when released by the physician.
- ◆ **Meningitis – Viral**  
The child with viral meningitis may return to school when fever free for twenty-four hours, feeling well and with a physician's release.
- ◆ **Meningitis - Bacterial**  
May return to school with a physician's release.
- ◆ **Mononucleosis**  
May return to school with a physician's release.
- ◆ **Mumps**  
May return to school ten days following the onset of swelling. Children must be fever free and feeling well.
- ◆ **Pertussis (Whooping Cough)**  
The child may return to school with a signed physician's release verifying treatment.  
**PLEASE NOTIFY THE SCHOOL NURSE IF THIS DIAGNOSIS IS MADE.**
- ◆ **Pneumonia**  
May return to school when released by a physician.
- ◆ **Ringworm**  
May attend school while being treated by a physician.

◆ **Rubella (German Measles)**

May return to school six days after rash appears. A child suspected of having Rubella will be sent home with a parent.

**PLEASE NOTIFY THE SCHOOL NURSE IF THIS DIAGNOSIS IS MADE.**

◆ **Scabies**

The parent of a child suspected of having scabies will be notified by note and/or phone call. The child may return to school after diagnosis by a physician and appropriate treatment. They must have a signed physician's release to return to school.

◆ **Strep Throat, Scarletina, Scarlet Fever**

The child with a physician diagnosed strep throat, scarlatina or scarlet fever may return to school when fever free, has been taking a prescribed antibiotic for twenty-four hours and feels well.

◆ **Sties**

The child with a sty may attend school if there is no drainage from the sty. Hand washing is strongly encouraged.

◆ **Upper Respiratory Infection (Common Cold, Flu, Croup)**

The child may return to school after symptoms have subsided (for example: fever, muscle and joint discomfort, vomiting, diarrhea, and cough).