

# STUDENT HEALTH HANDBOOK 2019-2020



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*Sycamore Community Schools will provide challenging and engaging educational experiences to equip students with critical skills that promote intellectual, social, emotional, and physical growth.*

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## **INTRODUCTION**

This handbook has been prepared to acquaint parents in Sycamore Community Schools with the basic health policies and procedures for students in preschool through grade 12.

An attempt has been made to include information in this handbook that is of interest and concern to parents. If you have further questions after reading this handbook, please contact the nurse in the school your child attends.

The goal of the school nurse is to assist students in attaining their optimum physical and emotional health so they are able to achieve academic success.

The school nurses of Sycamore Community Schools work toward this goal by providing:

1. Screening programs
2. Health counseling and education
3. Communicable disease control
4. First aid and safety
5. Family assistance

Parents have the basic responsibility for the health of their children. The school health program exists to assist families and health care providers in promoting and maintaining the well-being of the students.

District health forms are available on the district website, [www.sycamoreschools.org](http://www.sycamoreschools.org).

## **STATEMENT OF PURPOSE**

The purpose of this handbook is to provide Sycamore Community Schools' students and parents with specific information concerning major health policies, procedures, and regulations.

While every effort is made to present the information accurately, the information contained in this handbook is continually updated and the actual text of the policy, procedure or law should be consulted as the authoritative source of information.

Questions regarding this handbook should be directed to the school nurse.

## **PHYSICAL AND DENTAL EXAMINATIONS**

Physical and dental examinations are required annually for every preschool student in Sycamore Community Schools. Examinations are also recommended for kindergarten students and new elementary students who have never had physical and dental exams.

## **EMERGENCY FORMS**

Section 3313.712 of the Ohio Revised Code requires that an emergency form be on file for each student. *This must be done annually.*

Parents are asked to complete all information online in FINAL FORMS at the beginning of each school year or at the time the child is enrolled in a school. The parent/guardian electronic signature on this form indicates whether or not the parent(s) gives consent for treatment of their child by a doctor or dentist in the event of an emergency and when all efforts to reach a parent have been unsuccessful. If refusal to treat is checked, you must complete additional information on who to contact in an emergency if the parent/guardian cannot be reached.

The Emergency Medical Authorization page lists pertinent information for contacting all necessary parties in the event a student has a severe illness or injury. It is important to keep these forms current and accurate. If, at any time during the school year, there is a change of address, telephone number, alternate contact person, physician, dentist, etc., the parent should update the information in FINAL FORMS.

In addition, if a parent is going to be out of town and their child is going to be left in the care of someone else, please provide the school with this information by completing a Parent Out of Town/Vacation form.

These forms are available on the district website, [www.sycamoreschools.org](http://www.sycamoreschools.org).

*For the safety of the students, pertinent pupil health information will be shared with appropriate staff as necessary. This includes, but is not limited to: administrators, teachers, support staff, bus drivers, food service staff, custodians, coaches and substitute employees. Please, notify the school nurse if there are concerns with the sharing of information.*

## **HEARING SCREENING**

Puretone hearing screenings are performed annually for students in preschool, kindergarten, and grades 1,3, 5, 9, and 11. Tympanometry screening, to test for mobility of the eardrum and for the possibility of middle ear problems, is done in preschool and kindergarten.

## **VISION SCREENING**

Vision screenings are performed for students in preschool, kindergarten and grades 1,3,5, 7, 9 and 11th. Students who do not pass are rescreened. If there is still a question regarding the results, parents are contacted and further testing is recommended. If a parent wishes to have a child tested in a grade other than those listed, they are encouraged to contact the nurse in the child's building.

## IMMUNIZATION REQUIREMENTS

The Revised Code of the State of Ohio (3313.671) states that a child must have the required immunizations as a prerequisite for school attendance. Students who fail to meet immunization or other health regulations may be excluded from school. Contact the nurse at your child's school for additional information.

### Preschool:

- **4 DPT** (diphtheria, pertussis, and tetanus), DTaP, or any combination
- **3 Polio IPV**
- **1 MMR** (measles, mumps and rubella) administered on or after the child's first birthday.
- **HIB** (3-4 doses if given 0-14 months; 1 dose if given 15-60 months)
- **Hepatitis B** (series of 3)
- **Varicella** (Chickenpox) 1 dose administered on or after the child's first birthday

### Kindergarten through Grade 9:

- **5 DPT** (diphtheria, pertussis, and tetanus) unless fourth was given after the fourth birthday. In this case only four are required.
- **4 Polio** (3 if all were documented as **IPV** and final dose given on or after the 4<sup>th</sup> birthday).
- **2 MMR** (measles, mumps and rubella) with the first administered on or after the child's first birthday.
- **Hepatitis B** (series of 3)
- **2 Varicella** (Chickenpox) with the first one administered on or after the first birthday.

### Grades 10 through 12:

- **4 DPT** (diphtheria, pertussis, and tetanus)
- **Tdap booster** required **before** entering **grade 7** or for **newly enrolled grades 7 - 12 if not done already.**
- **4 Polio** (3 if all were documented as **IPV** and final dose given on or after the 4<sup>th</sup> birthday).
- **2 MMR** (measles, mumps and rubella) with the first administered on or after the child's first birthday.
- **Hepatitis B** (series of 3)
- **Varicella** (Chickenpox) administered on or after the first birthday  
**2** (two) doses required for **grade k-8** and **1** (one) dose required for **grades 10-12**
- **MCV4** (Meningococcal A,C,W,and Y) One (1) dose required prior to entering grade 7
- **MCV4** (Meningococcal A,C,W, and Y) Two (2) doses required prior to entering grade **12**  
If the first (1st) dose of MCV4 was administered on or after the 16th birthday, only 1 dose is required.

## TUBERCULIN SKIN TESTING

All newly enrolled foreign born students from high risk countries who have been in the US for 5 years or less must provide documented evidence of having a negative Tuberculin test within 90 days of their enrollment. This also includes students that travel to high risk countries for vacations more than 2 weeks.

**NOTE:** County immunization clinics are available to give required vaccines for qualified families. Please see the school nurse for information.

## **STUDENTS WITH SPECIAL HEALTH NEEDS**

Food and insect allergies, asthma, diabetes, and many more unique conditions present challenges to the health and safety of our students. Many of these conditions can be potentially life threatening medical problems. The parents, school nurse, Child Nutrition Staff and other employees of Sycamore Community Schools will work together to provide a safe environment for all students with these conditions.

**The following restrictions/modifications are requested** in our buildings for the safety of our children with health issues:

- Limited use of sugar products for parties, treats, rewards, or manipulatives. (See pg. 8)
- Restricted exposure of children to animals. (See pg. 8)
- No latex gloves or latex balloons. (See pg. 8)

**Parents of children with special health needs should:**

- Contact the school nurse prior to the start of school to begin organizing a comprehensive plan for the child's care.
- Communicate to the school nurse changes in health status or precautions which necessitate revision/s to the comprehensive health plan.
- Notify the school nurse/coach/sponsor any time the student is enrolled in a school sponsored extracurricular activity if there is significant potential that emergency care might be required.
- Identify the child to his/her bus driver on the first day of school and explain the health issue.
- Consider themselves as part of a school health team, willing to advocate for their own children while understanding the need for schools to balance the health requirements of the entire student population.

## INFORMATION ON DISPENSING MEDICATION AT SCHOOL

Sycamore Community Schools has a medication policy that is in compliance with the Ohio Revised Code. The following information is provided to help clarify the understanding of this policy.

1. **Medication should not be given at school** unless it is absolutely necessary for the health and well-being of the student.

2. A **Physician/Dentist Medication Orders Form** must be on file at school, **signed by a parent/guardian and a physician**, before prescribed medication or over-the-counter medication may be administered. It is also needed for students to carry Inhalers, EpiPens (Epinephrine autoinjectors), or Diabetes medications and supplies. This form is available on the district website, [www.sycamoreschools.org](http://www.sycamoreschools.org).

The following must be included with the order form:

- a. Name and address of the student.
- b. Name of medication and dosage to be given.
- c. Reason for administering the medication.
- d. Times at which medication should be given.
- e. Dates the administration of medication is to begin and end.
- f. Adverse reactions that should be reported to the physician.
- g. Special instructions (i.e. sterile conditions, storage, etc.)
- h. Acknowledgement that the prescriber has provided the student with training in the proper use of the EpiPen and/or Inhaler and the student may carry the emergency medication.

**NOTE 1: Any changes in a medication order require a revised statement signed by the physician.**

**NOTE 2: If a student does not take a daily scheduled medication for more than 30 days, a new order is required.**

3. Medication must be in the **original container**.

4. **Students may not transport** medication to school. (Exception: Inhaler, EpiPen, or Diabetes medications with a completed Physician/Dentist Medication Order Form, may be transported by a student. Parents are requested to provide a back-up inhaler, and **are required by law** to provide a back-up dose of EpiPen.)

5. A **new Physician/Dentist Medication Orders Form is required each year** for ongoing medication. All medication must be picked up by a parent/guardian at the end of the school year. If it is not picked up, it is discarded.

6. **Only the school nurse, a substitute nurse, the principal, or a person designated by the principal, are authorized to administer medication at school.** (Note: If an EpiPen is administered, emergency services will be called.)

## HEALTH CONSIDERATIONS/ALLERGIES

*Animal/Pets In The Classroom: Due to the large number of children and staff members at risk for illness or allergic reaction to animals, animals/pets with fur or feathers are not allowed in classrooms. The exception to this is:*

- Zoo presentations. (It is felt that the professional can manage this situation, and that children with allergies can be maintained at a safe distance. Teachers will assess this on an individual basis.)
- Guide dogs.
- Police drug dogs.

Reptiles, amphibians, and fish may be used for educational purposes; however, students are to be discouraged from handling these. If contact is made, hand washing should be required.

### **Balloons**

Rubber balloons that decorate parties, carnivals, proms, etc. can pose a serious health threat to latex-sensitive individuals. People with chronic health conditions (spina bifida, hydrocephalus treated with shunts, etc.) who have been frequently treated with latex products are especially predisposed to this severe and, possibly, life threatening allergy. Latex allergy is also reported in healthy individuals, especially those with common conditions such as asthma and eczema. Routes of exposure include contact with skin, wounds, mucous membranes, and inhalation of latex laden powder particles from items such as rubber gloves or balloons. For these reasons, latex balloons are not permitted in all school buildings. Mylar balloons are suggested as safe substitutes.

**Classroom Treats: Many students suffer from severe food allergies and eating, smelling, or touching certain allergens (i.e. peanuts, nuts, etc.) can be fatal to people who are sensitive. Because of issues such as these, parents are asked to carefully select food items when treating a child's class. The teacher should be asked if any students have food allergies or diabetes. Consideration of healthy food choices that are nutritious and not too high in sugar is appreciated. Non-food alternatives such as craft activities or prize bags can also be a choice to make classroom parties a healthy celebration.**

**Students With Special Dietary Needs:** At the beginning of each school year, or at the time of enrollment, parents are responsible for communicating any special dietary needs of their child, including food allergies, to the district. Students with dietary needs that qualify as disabilities under law will be provided reasonable accommodation.

Substitutions to regular school meals provided by the district will be made for students who are unable to eat such meals due to a qualifying dietary need when that need is certified in writing by the student's physician. Such meals will be provided in the most integrated setting appropriate to the needs of the student.

The nature of the student's qualifying dietary need, the reason such need prevents the student from eating regular school meals (including foods to be omitted from the student's diet). The specific diet prescription along with the needed substitution must be specifically stated in the physician's statement. The district, in compliance with the USDA Child Nutrition Division guidelines, will provide substitute meals to food-allergic students based upon the physician's signed statement.



## **ATTENDANCE AND ABSENCE**

Regular attendance is essential for successful school achievement. Therefore, students are expected to attend class on a regular basis. Absence shall be excused for personal illness, illness in the family, religious reasons, death in the family, or for other reasons the home and school agree are for good cause. All other absences shall be unexcused.

Any student who is absent for personal illness or other excused reasons shall be responsible for contacting the teacher and completing the make-up work on a schedule approved by the teacher.

A student may not miss more than 10% of any school year to participate in activities, unless there has been an extended illness. A student must be in school for at least half of a day to participate in extracurricular activities that day.

Excessive absence from school may result in the withholding of credit and loss of driving privileges at the secondary level, or the retention of a student at the elementary level.

Ohio law requires that parents call school whenever a child is absent. We have established the following reporting numbers for each school. Please call on the morning of your child's absence.

### **Attendance Lines:**

<b>Blue Ash Elementary</b>	<b>784-2474</b>
<b>Maple Dale Elementary</b>	<b>784-2471</b>
<b>Montgomery Elementary</b>	<b>784-2472</b>
<b>Symmes Elementary</b>	<b>784-2473</b>
<b>Edwin H. Greene Intermediate</b>	<b>784-2470</b>
<b>Sycamore Junior High</b>	<b>784-2475</b>
<b>Sycamore High School</b>	<b>784-2476</b>

### **Licensed School Nurses - Contact Information:**

<b>Blue Ash Elementary</b>	<b>Diana Wyrick, MS, BSN, RN, NCSN</b>	<b>686-1713</b>
<b>Maple Dale Elementary</b>	<b>Carolyn Adee, MS, BSN, RN</b>	<b>686-1723</b>
<b>Montgomery Elementary</b>	<b>Susan Linton, MSN, BSN, RN, NCSN</b>	<b>686-1733</b>
<b>Symmes Elementary</b>	<b>Julie Ferron, MS, BSN, RN, NCSN</b>	<b>686-1743</b>
<b>Edwin H. Greene Intermediate</b>	<b>Laurie Dobrowolski, BSN, RN</b>	<b>686-1753</b>
<b>Sycamore Junior High</b>	<b>Amy Bonham, MA, BSN, RN</b>	<b>686-1763</b>
<b>Sycamore High School</b>	<b>Jennifer Ferris, BSN, RN, LSN, NCSN</b>	<b>686-1773</b>

## **KEEPING STUDENTS HOME FROM SCHOOL DUE TO ILLNESS and DESCRIPTIONS OF ILLNESSES**

It can be difficult to decide when and how long to keep an ill child home from school. The timing of the absence is often important in order to decrease the spread of disease to others and to prevent your child from acquiring any other illness while his/her resistance is lowered. Details on common childhood illnesses and recommendations of the School Nursing Services, Hamilton County Office of Education follow.

**Chicken Pox:** A skin rash consisting of small blisters which leave scabs. A slight fever may or may not be present. There may be blisters and scabs all present at the same time. Your child should remain home until all blisters have scabbed over, usually 5-7 days after the appearance of the first crop of blisters.

**Common Cold:** Irritated throat, watery discharge from the nose and eyes, sneezing, chills and general body discomfort. Your child should remain home if symptoms are serious enough to interfere with the ability to learn. Medical care should be obtained if symptoms persist beyond 7-10 days, fever develops, or discharge becomes yellow to green.

**Fever:** If your child's temperature is 100 degrees Fahrenheit or greater (or 1 or 2 degrees above the child's normal temperature) she/he should remain home until without fever for a full 24 hours.

**Flu:** Abrupt onset of fever, chills, headache and sore muscles. Runny nose, sore throat and cough are common. Your child should remain home from school until symptoms are gone and is without fever for 24 hours.

**Head Lice:** Lice are small grayish-tan, wingless insects that lay eggs called nits that attach to the hair shafts, close to the scalp. Nits (white specks usually found at the nape of the neck and behind the ears) much easier to see and detect than lice. A child may return to school after receiving treatment with a pediculicide shampoo and nits are removed. After treatment and removal of nits, the student will report to the school nurse to be checked.

Sycamore Community Schools has a commitment to meet the health needs of its students during the school day. Pediculosis (head lice) is a public health concern for school children and their families. Therefore, schools will contact the parent when it has been determined that a student has lice and/or nits (the eggs of lice) on the hair shaft (less than 1 cm. from the scalp). Parents will be instructed to treat the child's hair with an effective pediculicide and remove nits (Ohio Department of Health Communicable Disease Chart, 4/2009). Nit removal decreases diagnostic confusion, reduces unnecessary retreatment, and decreases self-reinfestation. The child should report to the nurse the next day before returning to class.

### **Head Lice Procedure:**

1. Identification of student (How do we know a child has head lice?)
  - Self reported
  - Parent or friends report
  - Teacher observation
  - Nurse's inspection
2. Identification of other students in the class/team
  - The nurse will inspect other children as appropriate. The parents of student(s) who are infested or who have nits will be contacted. They will be instructed on effective treatment and procedures for removing nits.
  - If there are no other cases identified, the inspections will end.
  - If there are more positive cases, other students or classes may be inspected as appropriate.

3. Follow-up

- A note may be sent home and educational materials will be offered to classroom teachers, students, and parents as needed.
- After appropriate treatment the student should report to the nurse to be checked.

**Impetigo:** Blister-like lesions which later develop into crusted pus-like sores. Your child should remain home from school until receiving 24 hours of antibiotic therapy and sores are no longer draining.

**Pain:** Pain or behavior indicating pain should be evaluated by a physician before going to school.

**Pinkeye:** Redness and swelling of the membranes of the eye with burning or itching, matter coming from one or both eyes, or crusts on the eyelids. Your child should remain home from school until receiving 24 hours of antibiotic therapy and discharge from the eyes has stopped. Spread of infection can be minimized by keeping the hands away from the face, good hand-washing practices, using individual washcloths and towels, and NOT touching any part of the eyes with the tip of the medication applicator while administering the antibiotic.

**Skin Rashes:** Skin rashes of unknown origin should be evaluated by a physician before going to school.

**Strep Throat and Scarlet Fever:** Strep throat begins with fever, sore and red throat, pus spots on the back of the throat, tender swollen glands of the neck. With scarlet fever there are all the symptoms of strep throat as well as a strawberry appearance to the tongue and rash of the skin. High fever, nausea and vomiting may also occur. Your child should remain home from school until receiving a full 24 hours of antibiotic therapy and until without fever or vomiting for 24 hours. Most physicians will advise rest at home 1-2 days after a strep infection. To completely eliminate the strep germ, antibiotics are to be taken until all medication is gone, no matter how well the child feels after the first few days of receiving medication.

**Vomiting and Diarrhea (Intestinal Viral Infections):** Stomach ache, cramping, nausea, vomiting and/or diarrhea, possible fever, headache and body aches. Your child should remain at home until without vomiting, diarrhea or fever for a full 24 hours. If your child has had any of these symptoms during the night s/he should not be sent to school the following day.

## COMMUNICABLE DISEASES

The following precautions shall be taken for children suspected of having a communicable disease:

1. The parent or guardian will be notified immediately of the child's condition.
2. Until discharge, the student will be isolated in the nurse's office to the best possible means.
3. A child isolated due to suspected communicable disease shall be:
  - Cared for in a room or portion of a room not being used in the nurse's office, if possible
  - Made comfortable and provided a cot, if possible. After use of the cot, it will be cleaned and disinfected with an appropriate germicidal agent.
  - Observed carefully for worsening condition with an adult in sight and hearing at all times
  - Discharged to parent, guardian, or person designated by the parent or guardian as soon as practical
4. A note will be sent home in the classes involved and educational materials will be offered to classroom teachers, students, and parents as needed regarding the communicable disease.

## **SUMMARY**

Your child's health and safety are important to all of the Sycamore staff. School nurses are in place in each building to work in partnership with parents and staff, facilitating care for students. Please, notify the school nurse concerning:

- pertinent health history
- news of a serious illness or accident
- the presence of a fracture
- the need for stitches
- additional screening
- mental health issues
- family assistance

District health forms are available on the district website, [www.sycamoreschools.org](http://www.sycamoreschools.org).

