Health

School Entry Medical Requirements

<u>Health History</u>: A health history needs to be completed, by a child's parent or guardian, for all students upon entering Waitsfield Elementary School. Forms are included in registration packets given out by the office. We ask that health information be updated annually as well as whenever any significant health matter changes (addition of a medication, etc.)

<u>Immunizations</u>: The Vermont Immunization Law requires all students in grades preschool-12th grade be immunized for school attendance unless exempted for medical, religious, or moral reasons. Questions regarding your child's immunization status should be directed to the school nurse.

Medical Exam All kindergarten students and new students entering the Waitsfield Elementary School must have had a medical exam within a period of one year. Documentation must be provided by the child's healthcare provider; forms are available from the school nurse or may be provided by the healthcare provider.

Health Screenings

Periodic health screenings are done according to state mandated schedules. Health screenings include but are not limited to hearing, vision, height, and weight. Screenings in school should not be considered diagnostic. The school nurse will contact families of students whose screening results fall outside of normal limits. In accordance with state recommended practices, vision and hearing screenings are done in preschool, kindergarten, 1st, 3rd and 5th grades.

Illness / First Aid

Although it can present a difficult situation, families need to NOT send ill children to school. Moderately ill children who come to school not only spread the illness to others, but also do not receive enough rest to fully recuperate. As a result, illness may linger unnecessarily. Please refer to the school website for guidelines on when to keep your child home as a result of illness.

Parents or guardians will be called when it is apparent that a student should not be at school due to illness. If a parent or guardian can't be reached, emergency contacts will be notified.

First aid provided at school is generally limited to care of injuries and sudden illnesses occurring during the school day or during any school sponsored activity. In case of accident or injury occurring at school, first aid will be given by the school nurse or her/his designee.

Medications

It is desirable for medication to be given in the home. However, if a child is required to take medication during school hours and the parent or guardian cannot be at school to

administer the medication, only the school nurse or a designee will administer the medication in compliance with the regulations that follow.

Prescription Medications

- 1) Written orders from a physician detailing the name of the drug, dosage and time interval the medication is to be taken, and diagnosis and/or reason for giving the medication.
- 2) **Written permission** from the parent or guardian requesting the school district comply with the physician's order. (Please use our prescription medication form, attached to this document and on our school website)
- 3) Medication brought to school in a container appropriately labeled by the pharmacy or physician.
- 4) Delivery of all medications to the school is the responsibility of the parent/guardian or any other designated adult. Students should not transport medications to and from elementary schools.

Non-Prescription Medications

- 1) **Written permission** from a parent or guardian detailing the name of the medication, dosage and time to be administered, and the reason for giving the medication. (please use our non-prescription medication form, attached to this handbook and on our school website)
- 2) Delivery of all medications to elementary schools is the responsibility of the parent/guardian or any other designated adult. Students should not transport medications to and from elementary schools.
- 3) The medication should be transported in its original container.

Communicable Disease Control

Fever: A child with a temperature of 100 degrees or higher should not attend school. A child should also not attend school if he or she feels unable to play outdoors.

Colds and Coughs: A visit to a physician is recommended for a child who has thick, green nasal discharge, and/or a persistent cough lasting more than two weeks. Children who get red/blue in the face when coughing, or produce whooping or croupy noises after or while coughing, may not attend school until these symptoms are gone.

Conjunctivitis (Pink Eye): Conjunctivitis is highly contagious by contact with discharge from the eye. If your child exhibits redness in the white of the eye, yellow drainage and itching, it is necessary to be diagnosed by a physician for proper treatment. A child must be on medication for 24 hours before returning to school. If you choose not to treat your child, he or she may not return to school until all symptoms are gone.

Strep Throat / Scarlet Fever: Strep throat is characterized by fever, sore throat, white spots in throat, swollen glands, and often times stomach ache. Sometimes a rash accompanies strep throat and is known as scarlet fever. The illness is spread by contact with nasal or oral secretions from the infected person. The incubation period is 2-5 days. If you think that your child has strep throat, he or she should be seen by a physician and

have a throat culture done. If the culture is positive, the child must be treated with medication for 24 hours before returning to school.

Impetigo: Impetigo is a highly contagious infection of the skin that starts as a fragile blister containing yellow fluid. When a blister breaks, the discharge hardens into a yellow scab under which the infection thrives. A child who is thought to have impetigo needs to be seen by a physician. If the diagnosis is positive, the child must have had antibiotic treatment (topical/oral) for a full 24 hours before returning to school.

Diarrhea: A child who has three loose stools beyond what the child normally has in a 24-hour period, or loose stools persisting for more than 48 hours, should not attend school. A child may return to school after being diarrhea-free for a full 24 hours.

Vomiting: Children who have vomited may not attend school until they are able to tolerate solid food and/or they have not vomited for 24 hours.

Chicken Pox: Chicken pox is characterized by an itchy rash of small red blisters, usually beginning on the head and then moving to the trunk and limbs. The blisters open and drain, and then form scabs. An airborne virus spreads chicken pox, and the incubation period is 14-21 days. The child is contagious from 24 hours before the rash appears until all of the blisters of the rash have dried up. A child may return to school after all lesions have scabbed over.

Head Lice

While Pediculosis (head lice) presents no threat to the health or safety of children, we recognize that it is presents great disruption and challenges to families. The treatment of a child's head lice is the responsibility of the parents; the school will work with parents to support their efforts to treat an occurrence of lice in their child(ren). The school follows an established, adopted procedure and policy around response to head lice; please contact the school nurse if you have any questions regarding this policy and related practices.