

PARENT INFORMATION FROM THE SCHOOL NURSE HOLY FAMILY SCHOOL

OFFICE HOURS: Daily 10:00 a.m. to 2:00 p.m. **PHONE:** 330-757-3713 **FAX:** 330-757-7648

FIRST AID Will be administered to students and staff who become injured or ill during the course of the school day. PLEASE BE SURE TO KEEP PHONE CONTACT NUMBERS CURRENT ON YOUR CHILD'S EMERGENCY MEDICAL AUTHORIZATION FORM.

PLEASE NOTE: KEEPING OUR STUDENTS AND STAFF HEALTHY:

Students who are ill BEFORE COMING TO SCHOOL should remain at home when their presence in school endangers their own health and the health of others! Students returning from an absence due to illness should be symptom-free and should not have had any fever, vomiting, diarrhea, etc. for at least 24 hours prior to their return to school.

If a student has had a throat culture testing for strep throat, PLEASE DO NOT SEND A CHILD TO SCHOOL UNTIL RESULTS ARE KNOWN. IF POSITIVE FOR STREP, STUDENT SHOULD NOT RETURN TO SCHOOL UNTIL HE/SHE HAS TAKEN AN ANTIBIOTIC FOR AT LEAST 24 HOURS, AND IS FEELING WELL ENOUGH TO ATTEND.

MEDICATION POLICY:

For students who are well enough to attend school, but may require medication for a short time, it is strongly recommended that these medications be administered outside of school hours. The child's physician may be able to order some medications in a time-release or long-acting form, eliminating the need to take the medication at school. Sometimes this is not possible.

PERMISSION FORMS FOR MEDICATION:

ALL medication, whether prescription medication or an "over the counter" remedy, **MUST** have been ordered by a physician BEFORE it can be administered at school. You may ask Mrs. Clune, the school secretary, or myself for a medication form if you anticipate needing one. These forms are also available on the school website. Please be sure to print the correct form (Asthma Inhaler, Epinephrine Autoinjector, Occasional Use/Emergency Medication, or Daily Medication). The parent or guardian is responsible for delivering the medication to the school office with the medication in its original container, accompanied by the medication form.

ASTHMA INHALERS:

Ohio law allows students requiring asthma inhalers to carry them with them during the school day with a form on file at school. This form must have been signed by the student's physician and parent, BEFORE the inhaler is brought to school by the student. Please call me if your child will be needing to carry his/her inhaler, and I will send a form to you.

EPINEPHRINE AUTOINJECTORS

Ohio law now permits students who have the possibility of a life-threatening allergic reaction to food, insect stings, etc., known as ANAPHYLAXIS, to possess and carry on his/her person an auto injector, more commonly referred to as an EpiPen or Twinject device. A form must have been signed by the prescribing physician and parent BEFORE the autoinjector is in the student's possession. 911 and the parent are called if it has been necessary to use the autoinjector. If your child will be needing to carry his/her autoinjector, please call and I will send a form to you.

FOR SAFETY REASONS, STUDENTS ARE **NOT PERMITTED** TO CARRY OR SELF-ADMINISTER ANY TYPE OF MEDICATION AT SCHOOL (except parent/physician-authorized asthma inhalers and EpiPens w/administration under supervision of an adult)

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IMMUNIZATIONS:

All student immunizations required for school attendance by the state of Ohio are audited and kept on file in the nurse's office. If your child is deficient in immunization(s), you will be notified. In order to stay in school, the child's immunizations must be kept up to date. For your convenience, any and all childhood immunizations may be obtained for a small fee at regularly scheduled immunization clinics throughout Mahoning and Columbiana counties. These clinics are conducted by the Nursing Division of the Mahoning County District Board of Health. Call 330-270-2855 for dates and times. No family will be turned away for inability to pay for immunizations. Required immunizations may be given by your child's personal physician, if you desire. If any immunizations are received during the school year, please send a copy of the doctor's record and I will update the student's health record.

SCREENINGS PERFORMED DURING THE SCHOOL YEAR:

VISION: Grades PreK, 1, 3, 5, and 7
Parent or Teacher referral

HEARING: Grades PreK, K, 1,2, 3, 5, and 8
Parent or Teacher referral

POSTURAL SCREENING: Grades 5 through 8 with parental permission

PEDICULOSIS (HEAD LICE): Screenings may be performed at anytime during the school year. PLEASE NOTIFY ME IF YOUR CHILD HAS HAD HEAD LICE, OR HAS BEEN RECENTLY EXPOSED TO IT. THIS IS VERY IMPORTANT TO PREVENT SPREAD OR REINFESTATION IN THE CLASSROOM. ALL SCREENING RESULTS REMAIN CONFIDENTIAL.

FOOD ALLERGIES:

School Food Services will make food substitutions for students who are unable to consume regular lunch because of medical or other special dietary needs. A note from the child's Physician to Mrs. Ramsey, Cafeteria Supervisor, documenting specific dietary restrictions will be required. Please be sure that Mrs. Ramsey receives such notification BEFORE the first day of school. A note may be faxed by the physician's office to Mrs. Ramsey at 330-757-7648, mailed to the school, or delivered in person to the school office.

***** As a safety measure, students with life-threatening food allergies are seated in a reserved area in the cafeteria along with other students who should not be exposed to specific food allergens.

I am looking forward to working with you and your children in helping them to remain healthy learners at Holy Family School! Please know that I am available to discuss any questions or concerns you may have concerning your child's health during the school year. Please feel free to call, and I will return your call as soon as possible.

Sincerely,

*Jeneane Beato RN
School Nurse*