

# A Healthy Handbook

**A publication from the Henderson ISD Health Services Department**

**Henderson**  
Independent School District  
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## **What does the school district do to help students stay safe and healthy?**

The Henderson Independent School District is committed to helping all of its students stay healthy, safe and ready to learn each day. Part of that commitment is shown through the Health Services Department which provides services that contribute to a student's achievement and/or maintenance of optimal health.

Their responsibilities include:

- Emergency care of the sick and injured;
- Communicable disease control;
- Health education and counseling for students, families and staff;
- Injury prevention;
- Specialized procedures for children with health care needs;
- Administration of medication;
- Health assessments, including state-mandated vision, hearing and spinal screenings;
- Assisting families in accessing appropriate, local health care resources.

To contact the HISD nurses call 657-8511. ext. 267

## **Immunizations-what does my child need?**

All school children in Texas must have certain immunizations. Personal immunization records are kept on every child enrolled in the Henderson Independent School District. Texas law provides that the following immunizations be completed prior to the child's entering school:

**Diphtheria-Tetanus (DTP/DTaP/DT):** Five doses of any combination DTaP/DTP unless 4<sup>th</sup> dose was given on or after the fourth birthday. A booster is required every ten years thereafter.

**Polio:** Four doses unless the 3<sup>rd</sup> dose was on or after the 4<sup>th</sup> birthday.

**Measles (Rubeola):** Two doses of measles vaccine are required on or after the first birthday; second dose by age 5 or entry into Kindergarten.

**Mumps:** One dose after the first birthday.

**Rubella:** One dose after the first birthday.

**Haemophilus Influenza Type B (HIB):** One dose between 18 months and 4 years of age.

**Hepatitis B:** Three doses of hepatitis B vaccine are required for all students K-12.

**Hepatitis A:** Two doses for children attending pre-kindergarten, Head Start, or other childhood programs.

**Pneumococcal** – One dose for children attending pre-kindergarten, Head Start, or other childhood programs

**Varicella (chickenpox):** K-12 will be required to have received 1 dose of varicella vaccine or to present documentation of prior (varicella) chickenpox illness. Two doses if vaccine given at 13 years of age or older.

Documentation forms will be provided through the school nurses office.

All new immunization histories of measles and mumps illnesses must be confirmed by a serologic test (blood test). Physician confirmation of prior measles or mumps illness will no longer be acceptable in place of vaccination.

Additional recommendations include a TB test for pre-kindergartners, kindergartners and new students to the school district.

### **When must immunizations be completed?**

All immunizations must be completed by the first date of attendance. If this is not possible, a child may be provisionally enrolled and allowed to attend school, provided at least one dose in each series of immunizations has been received. **THE REMAINING IMMUNIZATIONS MUST BE COMPLETED AS SOON AS MEDICALLY POSSIBLE IN ORDER FOR THE CHILD TO REMAIN IN SCHOOL.**

**Exclusions from compliance:** Exclusion from compliance of Texas immunization law are allowable on an individual basis for medical contraindications and religious conflicts.

1. **Medical contraindications:** An affidavit signed by parent/legal guardian must be on file in the superintendent's office with a certificate signed by the child's physician stating that immunization of the child would be injurious to the health and well-being of the child. Unless a lifelong condition is specified, the affidavit and certificate are valid for only one year from the date signed by the physician and must be renewed every year for the exclusion to remain in effect.

2. **Religious conflicts:** An affidavit signed by the parent/legal guardian must be on file in the superintendent's office stating that the immunization conflicts with the tenets and practices of a recognized religious organization of which the child is a member. **This exemption does not apply in times of emergency or outbreak declared by the Commissioner of Health or local health authority.**

### **What about students who transfer into Henderson ISD?**

According to Texas School Immunization Law, any student transferring from one school to another must present a validated document verifying completion of required immunizations upon enrollment. However, a student may be enrolled on a provisional basis for no more than 30 calendar days while awaiting the transfer of the immunization records. If proper immunization records have not been received by HISD by the end of 30 calendar days, the child will be withdrawn from school until valid documentation of immunizations is on file. Parents/legal guardians are responsible for verifying receipt of such records by HISD prior to the deadline date. If immunization records do not arrive or are incomplete, parents/legal guardians will be responsible for having the child vaccinated or the child will not be allowed to remain in school. Parents/legal guardians will be notified by mail when measles and diphtheria/tetanus boosters and required immunizations of provisionally enrolled students are due. These notifications are mailed in advance of due date so parents/legal guardians may have immunizations completed and proof presented to school prior to due date. **STUDENTS WILL NOT BE**

## **ALLOWED TO REMAIN IN SCHOOL UNLESS IMMUNIZATIONS ARE COMPLETE.**

### **What if my child needs medication at school?**

Henderson ISD does not provide medication for administration to students. If your child's physician prescribes that a prescription or non-prescription medication be administered at school, the following requirements must be met by the parent/legal guardian:

1. **Prescription Medications:** Parent/legal guardian must bring the medication to the school. The medication must be in the **original container and labeled by the pharmacist**. The label must include:
  - a. Student's name
  - b. Physician's name
  - c. Name of drug/medication
  - d. Amount of drug to be given and frequency of administration.
  - e. Date prescription filled

**A Henderson ISD Medication Permission Form must be completed and signed by the parent/legal guardian prior to administration of medication by school personnel.**

### **What about non-prescription medication?**

All non-prescription medication must be in the original container with the label intact. An HISD Medication Permission Form must be completed and signed prior to administration of non-prescription medication by school personnel.

### **Who will administer the medication?**

A School Nurse is not housed on each campus. Your child's principal will designate other school personnel to administer your child's medication. Except for specific asthma inhalers and diabetic medications, children are not allowed to have medications in their possession while at school.

### **What about emergencies?**

Each year, parents/legal guardians must complete an Emergency Medical Card that provides emergency information and authorizes school officials to obtain emergency medical treatment for the child in case of illness or injury. Included on this card are the names of parents/guardians and daytime phone numbers, name and phone number of person to contact if the parent is unavailable and the name of the child's physician. Medical conditions such as allergies to food, insect bites, medications, etc. and chronic illness such as heart disease, seizures, diabetes, asthma, etc. should be noted on the card. The Emergency Medical Card is kept on file on the child's campus and should be updated as parents/legal guardians phone numbers, jobs, etc. change.

### **What other health services are provided?**

School nurses in HISD provide vision and hearing screenings on all four year olds, kindergartners and students in grades 1,3,5 and 7 as well as all new students to the

district. Screenings are also performed at the request of school personnel, students and parents. If a child fails the initial screening for vision or hearing, he or she is rescreened after a two week waiting period. If the child fails the second screening, parents/legal guardians will receive a referral letter requesting that the child be seen by a physician. A report of the physician's exam is to be returned to the School Nurse's Office for entry into the child's medical records.

### **What if I need financial assistance?**

Parents/legal guardians who need financial assistance for eye exams or glasses should contact the School Nurses Office for referral to the Lions Club representative for assistance.

### **Are students checked for scoliosis?**

Yes. Scoliosis (curvature of the spine) can appear during the years of a child's rapid growth, between the ages of 10 and 16. School nurses provide scoliosis screening on all students in grades 5 and 8. School nurses examine the student's backs and note any unusual observation. If a questionable finding is noted on initial screening, the student will be rescreened. If the second screening reveals abnormal findings, a referral letter will be sent to the parent/legal guardian requesting that the child be examined by a doctor of their choice. A report of the doctor's exam should be returned to the School Nurses Office for entry in the student's health record.

## **Common (and uncommon) Illnesses: What to Do**

### **HEALTHY CHILDREN LEARN BETTER!**

Because the health and welfare of all school children must be considered, keep your child home if he or she is sick!

Here is a list of some illnesses and what to do about them:

- **Fever** – an oral temperature of 100 or more. Keep child home until 24 hours after fever subsides.
- **Vomiting without fever** – keep child home until vomiting subsides.
- **Vomiting with fever** – contact physician. Keep child home until 24 hours after fever/vomiting subsides or may return with note from physician.
- **Diarrhea without fever**-keep child home until diarrhea subsides.
- **Diarrhea with fever** – contact physician. Keep child home until 24 hours after fever/diarrhea subsides or may return with note from physician.
- **Rash with fever** – see physician. May return with note from physician.
- **Sudden high fever, severe headache, vomiting** – see physician immediately. May return with note from physician.
- **Strep throat, scarlet fever, scarletina** – see physician. Keep child home until 24 hours after fever subsides and treatment begun.

- **Chicken pox** – contact physician. Keep child home for 7 to 14 days after rash appears and majority of scabs have fallen off.

**CHILDREN SHOULD NOT BE GIVEN ASPIRIN FOR ANY SUSPECTED OR CONFIRMED VIRAL DISEASE WITHOUT CONSULTING A PHYSICIAN.**

- **Conjunctivitis (pink eye)** – red eyes with discharge or crusting around eyes. Keep child home until after treatment begun or may return with note from physician.
- **Impetigo** – sores or blisters on skin that open up and become covered with yellowish crust. See physician. Keep home until after treatment begun. Keep covered.
- **Ringworm of scalp** – see physician. Keep home until treatment begun or return with note from physician.
- **Ringworm of skin** – see physician. Keep covered. May return after treatment begun.
- **Scabies** – small red, raised bumps or blisters on skin with severe itching. See physician. May return to school after treatment begun.
- **Fifth Disease** – redness of face (slapped cheek look) and body. Contact physician to rule out measles or rubella. May return to school after fever subsides.
- **Hepatitis A, B, C, D, or E** – Fever, tiredness, headache, fatigue, jaundice, dark urine, light colored stools, loss of appetite, nausea, stomachache, vomiting. Contact physician. Vaccine available for some types of hepatitis. May return to school with a note from physician.
- **Meningitis, bacterial and viral; Meningococcal infections-** sudden onset of high fever and headache, usually with nausea and vomiting; stiff neck, and frequently a reddish or purplish rash on the skin or mucous membranes. See a physician. May return to school with note from physician.
- **Head Lice (pediculosis)** – Itching and scratching of scalp. Pin-point-sized white eggs(nits) that will not flick off hair shaft. Small bugs crawling on scalp especially at base of neck and above ears. Head lice do not jump, they crawl. May return to school after treatment with lice shampoo or lotion and after all nits are removed. Follow all instructions on letter sent home with child.

**Remember – remove all nits before returning child to school.**

## **Healthy Hints**

We want all children to come to school healthy and stay that way! To help parents keep children well, we have put together some healthy hints:

- Clean hands are healthy hands! Encourage your child to always wash hands before eating and after going to the bathroom.
- Encourage children to use kleenex with those runny noses. Keep hands clean!
- Cough into a kleenex also. Germs coughed onto hands or into the air spread illnesses.
- Don't share brushes, combs, hats or other headgear. Head lice can happen to anyone!
- Teach your child to keep his or her hands from other children's hair and not to allow other children to handle your child's hair.
- Don't forget dental health! Brush teeth before coming to school.
- **ASTHMA:** If your child uses an inhaler for asthma symptoms, please see that an inhaler is available at school with instructions from the child's physician for use of the inhaler.

**Notify the school immediately of any change in your child's health status.**

### **School Health Advisory Council (SHAC)**

#### **TEC 28.004**

The School Health Advisory Council met on February 22,2007 .