

Health Information

2023-24

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## Head/Eye Injuries

If your child has a head or eye injury, parent/guardian will be notified. Head injuries may be serious without obvious signs of injury. Injuries occurring from accidents, sports or falls can be serious. Activation of EMS occurs and your child may be transported to a hospital by ambulance based on protocol.

## Specialized Health Services

If your child requires Specialized Health Services at school such as, but not limited to, a nebulizer treatment, Epi-pen injection, blood glucose monitoring, gastrostomy tube feeding or bladder catheterization, a licensed health care provider’s order is required. Parents must contact the Health Assistant. No procedure will be performed by school personnel without the licensed health care provider’s orders. Only those specialized procedures that are necessary during school hours will be accommodated.

## Medication at School

Many children take medication during school hours. For your child’s safety, all students requiring medication will have medications administered and stored in the health office. A Medication Administration form may be obtained from the health office. This release must be turned in before the medication can be given to your child. Prescription and over-the-counter (OTC) medication must be prescribed by a licensed health care provider. Prescribed medication must be in the pharmacy container, labeled with the child’s name, medication, prescribing practitioner, and directions for use. Over- the-counter medication must be in the original manufacturer’s container.

All medications must be brought to school and picked up by an adult, counted with the health assistant and signed in/out. Medications cannot be dropped off at the front office.

Students in grades K-12 may self-medicate with prescribed medication for asthma or severe allergic reactions per NRS 392.425. A Request to Authorize Student Self-Administration of Prescribed Medication for Asthma/Anaphylaxis must be completed by the parent/guardian and returned to the health office. Students who self-medicate are NOT monitored by the health office personnel or school nurse but are educated to come to the health office upon administering medication.

## Action Plans

If your student requires specialized treatment or emergency medications, an action plan must be submitted to the health office on a yearly basis. Action plans are doctor’s orders and instructions for the health office to follow to prioritize your student’s safety. Please reach out to the Health Assistant for a copy of an Allergy/Anaphylaxis, Asthma, Seizure, Diabetes Medical Management Action Plans. These must be filled out by a licensed healthcare provider and be up to date for the current school year.

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## Food Allergies

Severe food allergies can be life-threatening. Notify your Health Assistant immediately if your child has a known severe food allergy. If your child has an epi-pen or other required medication, licensed health care provider orders are required. Call your Health Assistant to determine the school policy for classroom snacks and lunchroom procedures.

## Screening

Nevada state law requires school new-to-district students and those in certain grades to be screened for vision, hearing and scoliosis concerns throughout the school year. Your child’s height and weight may also be measured. These screenings do not substitute for a professional exam. Problems detected in screening will be referred to the parent/guardian for follow-up.

## Immunizations

Nevada State Law (NRS 392.435) states that for a student to enroll in school, the parent/guardian is responsible to provide a certificate stating that the child has been immunized and is compliant with the schedules established by the Nevada State Health Division. Religious exemptions are valid for the duration of the student’s enrollment in school, but must be renewed upon aging into new vaccine requirements (7th grade).

Your student will be unable to enroll or attend school until proper documentation of the required vaccines is received.

For further information or clinic locations, call the SNHD at 702-759-0850 or refer to [http://www. southernnevadahealthdistrict.org/](http://www.)

**Diphtheria, Pertussis, Tetanus (DPT):** 4 or 5 doses

**Polio:** 3 or 4 doses

**Note:** A dose of DPT and polio must be given on or after the 4th birthday. Depending on when your child started the series, he/she may need a 5th DPT and/or 4th polio.

**Measles, Mumps, Rubella (MMR):** 2 doses

**Hepatitis A:** 2 doses

**Hepatitis B:** 3 doses

**Varicella (Chickenpox):** 2 shot or documentation with disease date required to confirm diagnosis

## Emergency at School

If a medical emergency occurs

* Activation of EMS (911) will be called immediately
* Parent/guardian will be notified and is responsible for obtaining medical care
* Student will be transported per EMS protocol - typically at the approval of parent/guardian
* The expense of the ambulance transport and subsequent medical care is the responsibility of the parent/guardian

## Health & Safety Accommodations (PE excuse, Use of Assistive Devices)

If your child is unable to participate in PE or recess, is using crutches or is unable to walk without help, please notify the School Nurse. In order to assist the student who requires health/safety accommodations in the school setting, a licensed health care provider statement may be required. Legacy Traditional does not provide assistive devices for students.

## Health Problems

At the time of enrollment, and anytime during the school year when a student’s health status changes, the parent/guardian is asked to inform the health office staff. Health problems including, but not limited to the following, need to be brought to the attention of the health assistant:

* ADD/ADHD
* Allergies (including allergies to medications and environmental agents)
* Arthritis
* Asthma
* Blood disorders
* Cancer
* Diabetes
* Genetic disorders
* Hearing loss
* Heart conditions
* Orthopedic conditions
* Psychological diagnoses
* Seizures
* Vision impairment
* Other disorders requiring medication

## Is My Child Too Sick for School?

If any of these symptoms are present, your child should be kept home and monitored

* Elevated temperature (100 degrees or greater)
* Vomiting and/or diarrhea
* Persistent headache
* Red or sore throat
* Unexplained rash
* Wheezing
* Earache
* Untreated head lice

If the symptoms continue longer than 24 hours, you may need to take your child to a licensed healthcare provider. Student must be fever-free for 24 hours without the use of fever reducing medications (i.e., Tylenol, Advil)

##

## Sick Policy

Students must be fever-free and in good health to attend school. Criteria and guidelines will be followed to ensure that students who are sick are excluded from in-person attendance at school. Students will be assessed by health services personnel at the school and will be required to be picked up under the following conditions:

* Fever of 100.4 and above
* Vomiting
* Diarrhea

For all aforementioned conditions, the student may not return to school until he/she has been symptom-free for at least 24 hours without the use of medications to manage symptoms.

## Stock Medications

The health office carries stock tylenol, hydrocortisone cream, and triple antibiotic ointment. Tylenol may be given to students after receiving parental consent for each medication administration. Stock medications may only be given up to three consecutive days before requiring doctor’s orders. Tylenol will not be administered to students with head injuries as it may mask potential symptoms of a concussion.

## Emergency Stock Medications

The health office will carry stock epinephrine for anaphylactic reactions and stock naloxone for suspected opioid overdoses. NRS 386.870, allows your child’s school to stock, maintain, and administer auto-injectable epinephrine to treat individuals who experience anaphylaxis while at school. Students who have been identified as being at risk for an allergic reaction should have their own auto-injector of epinephrine at school. In the event of a student developing anaphylaxis symptoms, trained staff will administer epinephrine, alert EMS and notify parents.

NRS 453C.105 allows your child’s school to stock, maintain, and administer an opioid antagonist for the treatment of an opioid-related drug overdose. Naloxone is a medication that, when administered, reverses the fatal effects of opioids (e.g., heroin) on the body and restores breathing. Legacy Traditional Schools will be stocked with a twin-pack of Narcan which is a form of naloxone in a nasal spray to be used in the event of an emergency. Naloxone affects only opioids and has no effect on an individual who has not taken the drugs. Nevada law authorizes trained, designated staff members to administer Naloxone. In the unlikely event that Naloxone is administered to your child, 911 and you will be called immediately.

## Infectious Diseases

According to LTS policy students with known or suspected contagious illnesses are to be excluded from school. In most cases, a student may return to school 24 hours after medical treatment is started.

## Ringworm

Ringworm is a skin and scalp disease caused by several different types of fungi and is highly contagious if untreated. The student can return to school 24 hours after treatment has begun. Ringworm of the scalp requires treatment verification from a licensed healthcare provider.

## Head Lice

Lice are small insects which live in the hair and lay tiny white eggs called nits. The eggs or nits are usually found very close to the scalp, at the back of the neck and behind the ears. Itching is the most common symptom of head lice. Head lice do not jump, fly or carry disease. They can be spread by sharing hats, combs, brushes, and having head to head contact. Lice can be treated with an over-the-counter lice shampoo. Follow directions carefully. Removal of nits is important to prevent the spread of lice. Call the School Nurse for more information. Children may return to school after verification of treatment and visual inspection showing no evidence of live lice. Your child’s head will be checked by health office personnel before returning to class

## Pink Eye/Conjunctivitis

Pink eye may be caused by a virus or a bacterial infection. It causes redness of the eye, with itching, burning and sometimes a discharge (mucus). Pink eye is highly contagious and MUST be treated by a licensed health care provider. The student can return to school 24 hours after treatment has begun or medical clearance has been obtained by a licensed healthcare provider. Verification of treatment may be required.

## Hand Foot & Mouth Disease (Coxsackievirus)

This is usually a mild disease with fever and sore throat. Small sores are seen in the mouth. A small blister-like rash may be present on the hands and feet. The illness appears 3 to 6 days after exposure to the virus. Children with this illness must remain home and not be at school. Return to school is when the sores in the mouth are no longer present and the fever is gone for at least 24 hours without the use of a fever-reducing medication such as Tylenol.

## Strep Throat

This is a disease with a sudden onset of a sore throat, fever, rash, nausea, headache, body aches, fatigue, spots on the tonsils and back of the throat. Please see your healthcare provider for treatment. Your child may return to school after 48 hours of antibiotic therapy and your child has been fever free without a fever reducing medication for 24 hours.

## Influenza (Flu)

The flu is caused by a virus. A person with the flu may have the following symptoms: fever, persistent cough, sore throat, tiredness, headache, runny/ stuffy nose, body aches. Vomiting and diarrhea can also occur. The student can return to school when symptoms have resolved and the child is fever-free for 24 hours as noted above. Medical clearance may be requested from a licensed healthcare provider.