

WELLNESS AND HEALTH SERVICES
PHYSICAL EXAMINATIONS

FFAA
(LOCAL)

CERTIFICATION OF
EXAMINATION FOR TB

All students entering District schools for the first time who have immigrated from countries outside the United States, with the exception of Canada, Australia, New Zealand, and Western Europe, shall provide or have on file a certification of screening for tuberculosis. This examination shall be made by, or under the direction of, a physician (M.D./D.O.) licensed to practice in the U.S., and must be made not more than 120 days prior to entering District schools. The test must show no disease, or, if the student has TB, documentation of treatment and a statement of admissibility from a United States health care provider must be provided.

UIL PARTICIPATION

A student desiring to participate in the UIL athletic program shall submit annually a statement from a health care provider authorized under UIL rules indicating that the student has been examined and is physically able to participate in the athletic program.

ADDITIONAL
SCREENING

The District may provide additional screening as District and community resources permit.

REFERRALS

Parents of students identified through any screening programs as needing treatment or further examination shall be advised of the need and referred to appropriate health agencies.

SICK KIDS AND SCHOOL ... TO SEND OR NOT TO SEND? THAT IS THE QUESTION!



Please keep this handy for future reference

Dear Parent/Guardian,

It's hard sometimes to decide whether to send your child to school when he or she doesn't feel well. It is very seldom a convenient situation when your child is sick. Often, you have to consider work schedules, childcare arrangements, transportation and other family matters in that decision, and of course, you want what is best for your child's health.

We feel very strongly at Denton ISD that good attendance is extremely important to your child's success at school! They must be here to learn. There are also important health reasons for keeping your child home from school, so here are some important guidelines to consider when you hear those words, *"I feel sick; I don't want to go to school today."* These guidelines are the standards of practice for the DISD health services department, and were approved by the school board as policy (FFAC Local). They were developed from Texas laws requiring exclusion for contagious diseases that could be spread at school. These guidelines must be enforced for the comfort and safety of all our students.

Children who have the following symptoms should stay home and not come to school until these symptoms have been gone for at least 24 hours without the help of medication, or until your doctor sends a note that states the condition is not contagious and it is OK for your child to come back to school.

- **FEVER** - check your child's temperature with a thermometer, and if a fever over 100 degrees is present, don't send him or her to school, even for just a little while in the morning for "perfect attendance." It doesn't help your child's health to give medicine for fever and send them on to school...that only reduces the fever for a short time, and doesn't take care of the illness that is causing the fever. Coming to school sick (and possibly contagious) not only exposes other children to the illness, but also delays your child's healing time. Once the medicine wears off and the fever returns, your child must be picked up anyway, and valuable healing time has been lost. **Children must be fever-free for 24 hours, without the use of medicine, before returning to school.**
- **VOMITING/DIARRHEA** - until we know that these are not signs of a contagious illness, such as a stomach virus, your child should be kept home. Consider how uncomfortable these two things are, even to an adult who has better control, and how distressed and embarrassed your child will be at school having to go to the restroom often (even worse, not being able to make it to the restroom on time), or feeling sick while sitting at his/her desk. If the vomiting or diarrhea happen more than once that day, or if they are associated with fever, you must keep your child home. Even if these things happen only one time before school starts, and your child feels better immediately afterwards, it is still wise to watch for a few hours to see if it happens again before sending him or her on to class. If your child is spending all his or her time at school feeling sick, then not much learning is taking place!

- **SKIN RASHES** - if the rash has any fluid or pus coming from it, the child must remain out of school until the rash has been treated and a note from the doctor states it is ok to return to school, or until the rash is gone, dried, or scabbed over with no new spots appearing. **Anytime a rash is associated with fever, the child may not come to school until that fever is gone for 24 hours without medication.** Sometimes a rash is a sign of a contagious disease such as chickenpox. Sometimes, rashes are not contagious, but are uncomfortable and itchy from contact with something the child is allergic to. In that case, although school is certainly a good option, please consider comfort measures such as an antihistamine, **following the district policy for medication administration at school** and discussing possible treatment with your doctor and/or the school nurse.
- **RED EYES, ESPECIALLY IF THERE IS ALSO DRAINAGE OR CRUSTING AROUND THE EYE** -this can often mean your child has *conjunctivitis*, also known as **pink-eye**. Not all pink-eye is contagious. Sometimes it is just allergies or other irritations that are causing the red color, but until we know for sure, which means we must have a note from the doctor stating the condition is not contagious, or until the redness and drainage are completely gone, your child must remain out of school.
- **PEDICULOSIS (HEAD LICE) OR SCABIES** - these small insects cause skin conditions that are uncomfortable and itchy, and could become infected. State laws require that students with these conditions be excluded from school. Check with the school nurse to get information on treatment and when your child may return to school if those conditions are present.

If your child has other symptoms such as **headaches, cramps, sore throat, cough and/or thick mucous** that don't require them to be out of school but that will make them uncomfortable during school, please discuss the use of over-the-counter (OTC) or prescription medications with your doctor, **and remember you must follow the district requirements for giving medicine at school.** Call the school nurse if you are not sure about those requirements.

Kids who are truly sick will heal better and faster when they have proper rest at home, with lots of fluid for hydration and healthy nutrition. Your school nurse is available for assistance at the number below during school hours if you have questions, or you may call the director of health services at 369-0685. We will always do our best to help you make a good decision based on our experience and knowledge as registered nurses, after considering the potential for spreading infections at school and what is in all the children's best interests.

We have common goals with you- the health, safety, and school success of your child!
Thanks!

Exclusion from School

A student may return to school after being excluded for communicable disease by submitting a physician's note stating that the student does not currently have signs or symptoms of a communicable disease or that the disease is not communicable in a childcare or school setting (25 Texas Administrative Code §97.7(d)) or by readmission criteria as established by the commissioner of health (see below). The criteria for exclusion and re-admission for communicable conditions are listed below and can also be found in 25 Texas Administrative Code §97.7(b):

1. **Amebiasis**—exclude until treatment is initiated
2. **Campylobacteriosis**—exclude until diarrhea and fever subside
3. **Chickenpox**—exclude until after seven days from onset of rash, except in the case of immunocompromised individuals who should not return until all blisters have crusted over (may be longer than seven days)
4. **Common cold**—exclude until fever subsides

THE TEXAS GUIDE TO SCHOOL HEALTH PROGRAMS

469

5. **Conjunctivitis, bacterial and/or viral**—exclude until written permission and/or permit is issued by a physician or local health authority
6. **Fever**—exclude until fever subsides
7. **Fifth disease (erythema infectiosum)**—exclude until fever subsides
8. **Gastroenteritis, viral**—exclude until diarrhea subsides
9. **Giardiasis**—exclude until diarrhea subsides
10. **Head lice (pediculosis)**—exclude until one medicated shampoo or lotion treatment has been given
11. **Hepatitis, viral, Type A**—exclude until one week after onset of illness
12. **Impetigo**—exclude until treatment has begun
13. **Infectious mononucleosis**—exclude until physician decides or fever subsides
14. **Influenza**—exclude until fever subsides
15. **Measles (rubeola)**—exclude until four days after rash onset. In the case of an outbreak, unimmunized children should also be excluded for at least two weeks after last rash onset occurs.
16. **Meningitis, bacterial**—exclude until written permission and/or permit is issued by a physician or local health authority
17. **Meningitis, viral**—exclude until fever subsides
18. **Mumps**—exclude until nine days after the onset of swelling
19. **Pertussis (whooping cough)**—exclude until completion of five days of antibiotic therapy
20. **Ringworm of the scalp**—exclude until treatment has begun
21. **Rubella (German measles)**—exclude until seven days after rash onset. In the case of an outbreak, unimmunized children should be excluded for at least three weeks after last rash onset occurs.
22. **Salmonellosis**—exclude until diarrhea and fever subside
23. **Scabies**—exclude until treatment has begun
24. **Shigellosis**—exclude until diarrhea and fever subside
25. **Streptococcal sore throat and scarlet fever**—exclude until 24 hours from time antibiotic treatment was begun and fever subsided
26. **Tuberculosis, pulmonary**—exclude until antibiotic treatment has begun and a physician's certificate or health permit obtained