



About Elmwood Park District 401 Health Services

School Health Services believes student education and growth are related to their physical, mental, and emotional well-being. Having access to nursing care positively impacts student attendance. A registered nurse at school every day allows for prompt and professional responses to health concerns and medical issues. Healthcare provided in the school health office supports students and allows them to return to their classrooms resulting in increased access to education. District 401 School Health Services team includes at least one registered nurse or certified school nurses (CSN) in every school.

The nurse is available to work in collaboration with your child's primary healthcare provider.

In the event of illness or accidents, the nurse provides emergency care.

Responsibilities of the nurse include first aid and illness care, the maintenance of student health records, the development of healthcare plans, and screenings for student vision and hearing needs. Parents/guardians are encouraged to bring questions about immunizations, health exams, medication, or student health needs to the nurse.

Health services provided at school include the following:

- Allergy & Asthma Awareness
- Care of Illness & Injury
- Communicable Disease Management
- Health & Wellness
 - Wellness Policy
 - Snacks Within the School Day
 - Nutrition & Fitness Initiatives
 - Individualized Health Planning
 - Health Information Survey
- Vision & Hearing Screenings
- Medication Administration & Policy
- Required Health Exams and Immunization Recording

The Health Services staff believes family is an essential part of good health. Your input is welcome and valued. Please stop by to voice concerns, ask questions, share thoughts, and exchange health information.

Health Forms and Documents Needed

- [Asthma Action Plan](#)
- [Dental Exam Forms](#)
- [Diabetes Medical Forms](#)
- [Eye Exam Forms](#)
- [Flu Guide for Families](#)
- [Food Allergies](#)
- [Health Exam Forms](#)
- [Medication and Health Care Form](#)
- [School Entrance Health Letter](#)

Accidents

Minor accidents which occur during the school day are treated by the classroom teacher or registered nurse. It is the responsibility of the parents to contact a doctor or take the child to the doctor's office or hospital. In the event of serious illness or injury, the paramedics will be called immediately and the parents will be notified. Parents are responsible for payment of medical, ambulance, and/or hospital fees. If a parent cannot be reached, the school will call the emergency number provided on the enrollment form. If a parent or designated emergency contact is not available and the injury requires immediate aid, the child will be taken to the nearest hospital by paramedics. Either the school nurse, principal, or assistant principal will accompany the child while school staff continue to try locating a parent.

Communicable Disease Management

Control of communicable diseases is managed within the district in accordance with public health organization guidelines and directives. Students who exhibit symptoms of communicable diseases are excluded from school until a physician indicates they can safely return. Health Services staff alert families of reported communicable diseases within the schools as recommended by the health department. Communicable disease occurrence reporting to the health department is conducted in accordance with county and state mandates.

The following chart lists common illnesses, symptoms and recommended time out of school:

Disease	Symptoms	Isolation Procedures
<p>COVID-19</p>	<p>Fever (100.4°F or greater), new onset of moderate to severe headache, shortness of breath, new cough, sore throat, vomiting, diarrhea, new loss of sense of taste or smell, fatigue from unknown cause, muscle or body aches from unknown cause not attributed to allergies or a pre-existing condition.</p>	<p>Those who test positive will continue to isolate for five days following the onset of CDC listed COVID symptoms or from their test date (if symptom-free).</p> <p>They are able to return to school on day 6, fully and consistently masking for an additional 5 days, or isolate at home for a full 10 (ten) days. 24 hours with no fever and symptoms improved.</p>
<p>Chicken Pox</p>	<p>Rash (successive crops of red dots that turn into fluid-filled blisters and then dry up to form scabs) and fever.</p>	<p>Not less than five days after appearance of the eruption.</p>
<p>Mumps</p>	<p>Fever, nausea, pain, and swelling of glands along the neck and jaw.</p>	<p>Nine days.</p>
<p>German Measles</p>	<p>Rash (small pinkish-red blotches beginning behind ears and on face), slight swelling of neck glands, and upper respiratory infection.</p>	<p>Until all symptoms and rash are gone.</p>
<p>Measles</p>	<p>Starts as a cold with fever, watery eyes and nose, sneezing, and slight cough. Rash on the face follows, then rash spreads to the body.</p>	<p>From the onset of symptoms until four days after symptoms and abnormal mucus secretions have stopped.</p>
<p>Strep Infections/Scarlet Fever</p>	<p>Fever, sore throat, and enlarged glands in neck. The scarlet fever rash (pinpoint dots) appears 1-3 days after onset of sore throat and strawberry tongue.</p>	<p>Until completion of 24 hours of antibiotic treatment.</p>
<p>Pink eye (Conjunctivitis)</p>	<p>Redness of the white part of the eye, itching and burning of the lids, and discharge.</p>	<p>Until completion of 24 hours of antibiotic treatment.</p>

Impetigo	Skin infection which appears as honey-colored blisters, frequently on the face around the mouth.	Until completion of 24 hours of antibiotic treatment.
Staph infection	Skin infection with redness, warmth, swelling, pus, and tenderness at site; a boil or appearing like a spider bite.	Until the wound is no longer draining or can be covered.
Pinworm	Perianal itching.	Until completion of 24 hours of antibiotic treatment.
Head lice and nits infestation	Itching at the nape of the neck and around the ears.	Until completion of medicated shampoo treatment and no live lice are found on the head.

A Flu Guide for Parents

During this active flu season, the district is working closely with the public health department for guidance and recommendations on preventing the spread of flu within our schools. Please make sure families get the flu guide for parents. [See attached in this link](#)

Respiratory syncytial virus (RSV)

Respiratory syncytial virus (known as RSV) is a common and highly infectious virus. Most children will get RSV at least once before they turn two. RSV infection is a common cause of bronchiolitis (inflammation of the small to medium sized airways of the lung). Symptoms of RSV bronchiolitis may last for up to 10 days. Most children will feel sickest three to six days after the first signs of illness.

Signs and symptoms

The main signs and symptoms of RSV include:

- runny nose
- cough
- fever
- sore throat

headache

Children's symptoms often worsen in the first two to three days of sickness. They may also experience wheezing, difficulty breathing and dehydration.

What causes RSV?

RSV is a virus. The virus can cause inflammation and mucus to build up quickly in children's airways which can make it hard to breathe and cause lung infections, such as bronchiolitis and pneumonia.

How is RSV diagnosed?

A doctor can diagnose bronchiolitis by examining your child. Tests like a nasal swab may be done to confirm if the bronchiolitis is caused by RSV, but this is not usually required, particularly when there are high rates of RSV in the community. Please notify your school nurse if your child tests positive.

Treatment

Most cases of RSV are mild and can be treated at home with rest. Very young children, children with pre-existing lung diseases or children with severe bronchiolitis may need to go to hospital to get help with their breathing or feeding.

Care at home

Give your child small amounts of their usual fluids to drink regularly – this may help to relieve the build-up of mucous (congestion) and prevent dehydration.

Work with your health care provider to determine the proper over the counter medication if your child is uncomfortable with a fever (in doses recommended on the bottle).

Keep your child at home until their symptoms have stopped.

Wash hands regularly – RSV can easily spread from person to person, regular hand-washing for 20 seconds with soap and water is the best way to stop it spreading to others.

When should I see a doctor?

Call 911 immediately if the child: appears very unwell and lethargic, is having severe difficulty breathing, is making a 'grunting' noise, has blue-coloured lips or skin.

See your local doctor or visit your nearest hospital emergency department if you are concerned about your child's breathing or feeding.

Meningococcal Disease

Meningococcal diseases, frequently referred to as meningitis, are often severe and can be deadly. They include infections of the lining of the brain and spinal cord (meningitis) and bloodstream infections (bacteremia or septicemia). Adolescents and young adults are at increased risk of these serious diseases.

It is important to be aware that the symptoms of meningococcal disease can resemble the flu and may progress quickly to high fever, headache, stiff neck, confusion, nausea, vomiting, exhaustion, and a purplish rash. Students with these symptoms should be examined as soon as possible by a healthcare professional.

To prevent the serious complications of a meningitis infection, Illinois state law requires 11-year old students receive the meningococcal conjugate vaccine.

As with all communicable disease occurrences, the district works closely with the public health departments to ensure the safety of our community.

[CDC information on meningococcal disease](#)

Concussions & Head Injuries

Students who experience a forceful impact believed to have caused a concussion, who are exhibiting signs, symptoms, or behaviors consistent with a concussion, will be removed from:

- athletic practices,
- competition,
- physical education class,
- recess,
- other physical activities during the school day, or
- in school-sponsored after-school activities.

The student may resume these activities after successful completion of the return-to-play protocol, in addition to a medical release from the licensed physician who has treated the student. Students exhibiting signs, symptoms, or behaviors consistent with a concussion after injury during activities will be immediately removed from these activities. The district's return-to-learn protocol guides school staff on accommodations needed, including cognitive rest, for students recovering from a concussion.

CPR and AED Training Video

Per Public Act 098-0305, the Illinois High School Association (IHSA) has posted a training video on their website on hands-only cardiopulmonary resuscitation (CPR) and automated external defibrillators (AED). School District 401 encourages parents and staff to view it. Click on the image below or visit: <http://www.ihsa.org/Resources/SportsMedicine/CPRTraining.aspx> to view the video.

Food Allergies and Anaphylaxis Emergency Care Plan

If your child has life-threatening anaphylactic allergies (including food allergies), please notify your school nurse, and print the Food Allergy and Anaphylaxis Emergency Care Plan form (below) for completion by your physician, and submit to your school's health nurse. The nurse maintains a list of students who have anaphylactic allergies to share with staff on a need-to-know basis and can assist you with the necessary documents needed for school.

Medication Policy, Administration, and Activity Restrictions

Medication Policy

All medication (including over-the-counter medications) requiring administration at school must: Be brought to school by the parents and turned into the school office, along with the [Medication and Health Care Treatment Authorization Form](#). This form must be completed prior to medication being given. Medications may not be sent to school with students. All medication must be delivered by a parent, guardian, or other authorized adult to school. The medication must be in the original container and have an appropriate label.

The [Medication and Health Care Treatment Authorization Form](#) must be renewed annually if needed in the next school year.

Any changes in a medication, dose, or time will require a written order from the licensed prescriber.

The medication must be picked up by a parent/guardian at the end of the year or when the medication is discontinued. Medication that is not picked up will be discarded.

Medication Administration

The administration of medication to a student at school is discouraged unless it is absolutely necessary to allow the student's academic participation.

All medication will be stored in a secure location in the health office, with the exception of emergency medications and epinephrine. Students may carry rescue medications within the school properties if additional consent forms are provided and additional training and supervision under the school nurse are provided.

Medication at school is administered by the school's registered nurse, a school administrator, or an authorized staff member, in accordance with the Illinois State Board of Education's recommended guidelines.

Note: The school district, school, and its employees and agents are exempt from liability or professional discipline, except for willful and wanton conduct, as a result of any injury arising from the administration of medication, including asthma medication, epinephrine auto injector (whether or not undesignated), or an opioid antagonist regardless of whether authorization was given by the student's parent/guardian or by the student's physician, physician assistant, or advanced practice registered nurse. Parents/guardians will be notified after the administration of asthma medication, an epinephrine injector (whether or not designated), an opioid antagonist, or glucagon.

The school district, school, and its employees and agents are exempt from liability or professional discipline, except for willful and wanton conduct, as a result of an injury arising from a student's self-administration of any medication pursuant to a student's authorized self-administration of medication plan (i.e., IEP, section 504 plan, Individual Health Care Action Plan, asthma action plan, or Illinois Food Allergy Emergency Action Plan and Treatment Authorization Form).

Physical, Immunization, Dental, and Eye Exams

For the purpose of safeguarding the health of children, District 401 enforces Illinois student health requirements. These requirements consist of physical (health), dental, and eye exams and immunizations specific to grade and age. Please make sure that the top portion of the back page of the [Certificate of Child Health Examination](#) is completely filled out by the parent/guardian.

Pre-Kindergarten/ECDEC:

- Physical (Health) Exam form with current immunizations

Kindergarten:

- Physical (Health) Exam form with current immunizations
- Eye Exam form
- Dental Exam form

Second Grade:

- Dental Exam form

Sixth Grade:

- Physical (Health) Exam form with current immunizations
- Dental Exam form

TRANSFER students (from another school in Illinois):

- School health requirements for grade level, as stated above

NEW students (from out of Illinois or country):

- Physical (Health) Exam form with current immunizations
- Eye Exam form

Interscholastic Sports:

- In addition, annual health examinations are required for interscholastic sports participation. Physical (Health) exams are required, before trying out, for participation in an interscholastic sport. The exam form, completed and signed by a doctor, must be dated within 13 months prior to the start of practice or tryouts, and on file in the school nurse's office. Physical forms ([Certificate of Child Health Examination forms](#)) are available in the school office and online

Physical (Health) Exams

PHYSICAL (HEALTH) EXAMS are required for students entering **preschool, kindergarten, sixth grade, and those who are new to the school**. The [Certificate of Child Health Examination](#) form is available online and in the school office.

Vision and Hearing Screenings

Screenings for vision and hearing are provided in accordance with the Illinois Department of Health and District 401 guidelines. Parents/guardians and staff members who suspect a problem with a student's vision or hearing are encouraged to call the nurse and request a screening. Students who do not pass the school screenings are referred for medical follow up.



Parents or legal guardians who object to screenings for their child on religious grounds may contact the school nurse for additional information.

Note: Vision screening is not a substitute for a complete eye and vision evaluation by an eye doctor. A child is not required to undergo the vision screening if an optometrist or ophthalmologist has completed and signed a report form indicating that an examination has been administered within the previous 12 months.