

Communicable Disease

Exclusion from School for Health Reasons

To protect all students as well as our faculty and staff from communicable diseases, students infected with certain diseases are not allowed to attend school while they are contagious. We ask that you follow these policies. The student may return to school after they are symptom and fever-free for 24 hours, have been diagnosed and treated by their health care professional, and submit a signed doctor's note stating that the student is not contagious.

The guidelines below have been developed for the exclusion of students who have communicable or contagious diseases. These regulations are in compliance with the requirements of the Texas Department of State Health Services, http://txrules.elaws.us/rule/title25_chapter97_sec.97.7 health.

- **REMEMBER-**
- **Parent/Doctor's note MUST be turned in to the School Office within 72 hours from the first date of absence to be excused. (Weekend days do not count).**
- **A note turned in to the school office after 72 hours is considered an unexcused absence.**

1. A student with any of the following symptoms will be excluded from school until the student is free of symptoms, has been satisfactorily treated, or submits a signed physician's statement that the student is not contagious.

- Temperature of 100 degrees or more. Keep the child at home until fever-free for 24 hours without use of fever-reducing medications such as the use of Tylenol, Advil, or any other analgesic.
- Pain and/or swelling at the angle of the jaw.
- Undetermined rash over any part of the body.
- Undiagnosed scaly patches on the body or scalp.
- Nausea, vomiting or diarrhea. Students must be symptom-free for 24 hours without medication before re-entry.
- Red, draining eyes.
- Intense itching with signs and symptoms of secondary infection.
- Open, draining lesions.
- Jaundice

2. The Superintendent or his/her designee, will notify parents that the student must be excluded for medical reasons.

3. It is the responsibility of the parent or guardian to transport the student from school to home.

4. For readmission, some diseases may require a statement from the student's physician affirming that the student is not contagious.

- A full list of conditions for which the school must exclude children can be obtained from the school office.
- If a student becomes ill during the school day, and the administrative assistant determines that the child should go home, the school office will contact the parent.
- The District is required to report certain contagious (communicable) diseases or illnesses to the Department of State Health Services (DSHS) or our local/regional health authority.
- The administrative assistant can provide information from DSHS on these notifiable conditions. The administrative assistant is available to answer any questions for parents who are concerned about whether or not their child should stay home.

For more information:

Health Services / Communicable Diseases / Exclusions from School

- [Texas Administrative Code, Title 25 Health Services, Chapter 97 - Communicable Diseases](#)
- [Texas DSHS Notifiable Conditions](#)

Texas Administrative Code

Rules for the exclusion of sick children from school and childcare are outlined in the Texas Administrative Code, specifically (Click Here) [Rule 97.7](#) for schools.

- **FEVER(100 or higher)**—keep the child at home until fever-free for 24 hours without the use of fever-reducing medications such as the use of Tylenol, Advil, or any other analgesic.
- **VOMITING/DIARRHEA**—The student may return to school when symptom-free and fever-free for 24 hours without the use of medication.
- **CHICKENPOX**—The student may return to school seven days after the onset of the rash and/or when all blisters are crusted over. [Rule 97.7](#) **NOTIFY THE SCHOOL OFFICE SO THAT ANY PREGNANT FACULTY OR STAFF MAY BE NOTIFIED OF EXPOSURE.**
- **STREP THROAT/SCARLET FEVER**—Students may return to school after antibiotic treatment has begun and they are fever-free for 24 hours without the use of fever-reducing medication. Diagnosis per doctor is requested.
- **INFLUENZA**—vaccine is available and highly recommended for children with certain chronic diseases. Students may return to school after fever-free without the use of fever-reducing medication for 24 hours.

- **FIFTH'S DISEASE**—Students should see a health care provider to rule out measles and rubella. If fever is present, may return to school when fever-free for 24 hours without the use of fever-reducing medication.
- **CONJUNCTIVITIS (Pink Eye)**—may return to school with a note from their health care provider and after treatment has been started.
- **IMPETIGO**—may return to school with a note from their health care provider and after antibiotic treatment has been started. Keep lesions covered.
- **RINGWORM SCABIES**—may return to school after 24 hours of treatment. Proof of treatment is required and will be checked by the school personnel when the student returns to school. At home, launder all clothing and linens; check family members and treat if necessary.

Notes for prevention:

- Cover mouth and nose with arm and/or elbow when sneezing and coughing.
- Teach the importance of hand washing, especially before meals, after using the restroom and after blowing their nose, sneezing, or coughing.
- If your child has any complaints of illness, please take their temperature before sending them to school and follow the fever guidelines listed above.
- If there is not a fever present, please send a note or notify the school nurse so that your child may be checked during the day as needed and medicated before sending to school with an appropriate over-the-counter medication for the complaints voiced by your child.
- If medication needs to be given at school, please send the medication with a medication dispense form completed and signed.
- If your child is diagnosed with a contagious disease, please have the healthcare provider's office give you a note stating the disease and when to return to school.
- **Please contact the school office if you have any questions or medical concerns about your child.**

Chicken Pox / Varicella

Most cases of chicken pox these days are very mild in children who have been vaccinated against varicella. It is best to consult your physician if you suspect chicken pox.

School Exclusion Policy

Children with suspected or confirmed chickenpox (varicella) will be kept out of school or childcare until the lesions are dry (scabbed) or if lesions are not vesicular (blister-like), until 24 hours have passed with no new lesions. Rules for exclusion of sick children from school and childcare are outlined in the Texas Administrative Code, specifically [Rule 97.7](#) for schools. The student must also be fever free for at least 24 hours without fever reducing medications. This process generally takes about 5 days. Your physician may require a longer period of isolation. A doctor's note is recommended. **NOTIFY THE SCHOOL OFFICE SO THAT ANY PREGNANT FACULTY OR STAFF MAY BE NOTIFIED OF EXPOSURE.**

<https://www.cdc.gov/chickenpox/index.html>

Parent Fact Sheet / Chickenpox and the Vaccine (Shot) to Prevent <https://www.cdc.gov/vaccines/parents/diseases/child/varicella-basics-color.pdf>

Managing the Flu Season Together

- Flu season is typically from October thru mid-May. Preparation is the key. Management is a team effort between parents, students, health care professionals, Walnut Bend ISD and Cooke County Health Department. Each plays a vital role in managing the flu season responsibly.

Walnut Bend ISD Helps by:

- Teaching and encouraging proper hand washing technique.
- Teaching effective coughing and sneeze technique such as cough in your sleeve.
- Posting signs around the campus as a visual reminder.
- Encouraging all staff to remain home when ill.

Parents help by:

- Having their families vaccinated against the flu.
- Encouraging proper hand, sneeze and cough techniques be used at home.
- Consulting their health care providers when flu-like illness symptoms begin. Flu like symptoms include: fever, cough, sore throat, body aches, fatigue and nasal congestion.
- Keeping their children home when ill.

Students help by:

- Washing their hands for twenty seconds with soap and water before and after eating, after sneezing or coughing into their hands, after using the restroom, after playing outdoors, and any other time their hands are dirty.
- Using Kleenex to sneeze and coughing into their sleeves.
- Not sharing food and drink.
- Encouraging others to do the same.

Cooke County Health Department can help when:

- Increased incidences of diagnosed flu or absences related to flu like illness are noted in a particular school.
- Helping plan and making suggestions for managing increased incidences in a particular area.

More information can be found on the following government sites:

- <http://www.cdc.gov/flu/index.htm>

- <http://www.dshs.state.tx.us/idcu/disease/influenza/>
- [Cooke County Texas Department of Health Services](#)

Methicillin-Resistant *Staphylococcus Aureus* “MRSA”

Staphylococcus aureus “Staph” is a bacteria commonly found on the skin or in the nose of healthy people. In the United States,, Staph bacteria are the most common cause of skin infections, causing pimples, boils and abscesses. Rarely, Staph can cause more serious infections leading to pneumonia or blood infections.

Some Staph bacteria have become resistant to common antibiotics, such as penicillin. These more potent bacteria are called “Methicillin-resistant.” In the past, these bacteria were found almost exclusively in hospitals. Recently, “MRSA” is being seen more and more in community settings, and is called community-associated MRSA, or CA-MRSA.

CA-MRSA usually develops as a skin infection such as a boil or abscess. Often, people describe the initial lesion as a “spider bite.” The involved area is swollen and red, painful and pus may be present. The lesion will often get worse until proper treatment is begun.

MRSA is usually spread through direct skin-to-skin contact between an infected person and another individual, often on contaminated hands. Factors related to transmitting staph from one person to another include:

Poor hygiene, especially lack of hand washing

- Poor hygiene, especially lack of hand washing
- Close physical contact and crowded conditions
- Sharing personal products
- Contaminated laundry
- Shaving
- Lancing (puncturing/picking/piercing) boils with fingernails or tweezers
- Activities that result in burns, cuts or abrasions or require sharing of equipment
- Intravenous drug use, unsanitary tattoos, and body piercing
- Inadequate access to proper medical care
- For more Information visit the web site below:
www.mrsaTexas.org

Meningitis Awareness

Texas Administrative Code, specifically [Rule 97.7](#) for schools

(All Grade Levels) State law requires the District to provide information about bacterial meningitis.

What is meningitis?

- Meningitis is an inflammation of the covering of the brain and spinal cord. It can be caused by viruses, parasites, fungi, and bacteria. Viral meningitis is common, and most people recover fully. Parasitic and fungal meningitis are very rare. Bacterial meningitis is very serious and may involve complicated medical, surgical, pharmaceutical, and life support management.

What are the symptoms?

- Someone with meningitis will become very ill. The illness may develop over one or two days, but it can also rapidly progress in a matter of hours. Not everyone with meningitis will have the same symptoms.
- Children (over 2 years old) and adults with bacterial meningitis commonly have a severe headache, high fever, and neck stiffness. Other symptoms might include nausea, vomiting, discomfort looking into bright lights, confusion, and sleepiness. In both children and adults, there may be a rash of tiny, red-purple spots. These can occur anywhere on the body.
- The diagnosis of bacterial meningitis is based on a combination of symptoms and laboratory results.

How serious is bacterial meningitis?

- If it is diagnosed early and treated promptly, the majority of people make a complete recovery. In some cases, it can be fatal, or a person may be left with a permanent disability.

How is bacterial meningitis spread?

- Fortunately, none of the bacteria that cause meningitis are as contagious as diseases like the common cold or the flu, and they are not spread by casual contact or by simply breathing the air where a person with meningitis has been. They are spread when people exchange respiratory or throat secretions (such as by kissing, coughing, or sneezing). The germ does not cause meningitis in most people. Instead, most people become carriers of the germ for days, weeks, or even months. The bacteria rarely overcome the body's immune system and cause meningitis or another serious illness.

How can bacterial meningitis be prevented?

- Maintaining healthy habits, like getting plenty of rest, can help prevent infection. Using good health practices such as covering your mouth and nose when coughing and sneezing and washing your hands frequently with soap and water can also help stop the spread of the bacteria. It's a good idea not to share food, drinks, utensils, toothbrushes, or cigarettes. Limit the number of persons you kiss. There are vaccines available to offer protection from some of the bacteria that can cause bacterial meningitis. The vaccines are safe and effective (85–90 percent). They can cause mild side effects, such as redness and pain at the injection site lasting up to two days. Immunity develops within seven to ten days after the vaccine is given and lasts for up to five years.

What should you do if you think you or a friend might have bacterial meningitis?

- You should seek prompt medical attention.

Where can you get more information?

- Your school office, family doctor, and the staff at your local or regional health department office are excellent sources for information on all communicable diseases. You may also call your local health department or Regional Department of State Health Services office to ask about a meningococcal vaccine. Additional information may also be found at the websites for the Centers for Disease Control and Prevention (CDC), particularly the CDC's information on bacterial meningitis, and the Texas Department of State Health Services.
- **Note:** Entering college students must show, with limited exception, evidence of receiving a bacterial meningitis vaccination within the five-year period prior to enrolling in and taking courses at an institution of higher education. Please see the school nurse for more information, as this may affect a student who wishes to enroll in a dual credit course taken off campus.
- [See Immunization for more information.]
- Information regarding bacterial meningitis is available online from the CDC . The CDC recommends the meningococcal vaccine for all 11 and 12 year olds.

Information from the CDC

This is current information on the increased risk of meningitis for children who receive cochlear implants

Pertussis - AKA Whooping Cough

- [Pertussis Fact Sheet English](#)
- [Pertussis Fact Sheet Spanish](#)
- <http://www.cdc.gov/vaccines/vpd-vac/pertussis/fs-parents.html>

Tuberculosis Awareness

[CDC - Tuberculosis Fact Sheet](#)

Clean Hands - A Critical Issue

- Protect yourself and your children from infection. Use the hand hygiene guidelines below, developed by the Centers for Disease Control and Prevention (CDC) to prevent or reduce the rate of infection. These simple guidelines can be easily adapted to the school environment and carried through in the home environment.
 - [The single most important thing we can do](#)
 - [Coughing and Sneezing Etiquette from the Centers for Disease Control and Prevention](#)
 - [Hand Washing and Nail Hygiene from the Centers for Disease Control and Prevention](#)

Hand hygiene for yourself and your children should occur:

- Upon arrival at school
- Immediately before and after eating
- After using the toilet
- After contacting any body fluids, including wet or soiled diapers, runny noses, spit, or vomit
- After handling pets, pet cages, or other pet objects
- Whenever hands are visibly dirty or after cleaning
- After removing gloves used for any purpose
- Before giving or applying medication or ointment
- Before going home

Recommended Hand Hygiene Techniques:

- Handwashing - Wet hands with water first, apply soap, and rub hands together for at least 15 seconds. Rinse and dry with disposable towel. Use towel to turn off the faucet.
- Alcohol-based hand rubs/gels - Application is the key. Apply to palm of one hand. Rub hands together covering all surfaces until dry. The volume used is based on the manufacturer. Let it dry!