



SCHOOL WELLNESS NEWSLETTER



August 2025

INFORMATION FROM WYOMING CITY SCHOOLS' HEALTH SERVICES

BACK TO SCHOOL INFORMATION AND REMINDERS

Welcome back, Wyoming families! A new school year brings fresh faces, fresh supplies, and a fresh start for our Health Services team. We're busy preparing our clinics by restocking shelves, reviewing immunization records, and updating healthcare plans for both new and returning students. Our goal is to be ready to provide our students with the best care possible. You can help us hit the ground running by reviewing the health requirements and policies below and sending in any needed forms right away. Together, we can make this a safe, healthy, and successful year for every student!

MEDICATION FORMS



The school must have a [Medication Authorization Form](#) on file before medication can be administered to students. The form must be completed and signed by the prescribing clinician and the student's parent/guardian. Forms are valid for one school year and must be renewed annually. No medications, prescription and over-the-counter, may be administered without an authorization form.

If your student would like to self-carry emergency medications, such as an epinephrine injector and asthma inhaler, be sure to complete the Self-Carry portion on the form. In addition, if your child has a life-threatening food allergy, the school must have a health care provider's [Severe Food Allergy Statement](#) on file confirming the diagnosis. This form also needs to be updated annually.

VACCINATIONS



The State of Ohio has mandated certain vaccinations as a requirement for school attendance. Vaccination requirements for all K-12 students are listed on the [ODH Website](#). If your child is not up to date on their vaccinations, please schedule a well child visit and submit an updated vaccination record to your child's school as soon as possible.

REMINDER: 7th graders must have one Tdap and one meningococcal vaccination. 12th graders must have a 2nd dose of the meningococcal vaccine (unless the first dose was given after the 16th birthday).

HEAD LICE



As our students start the new school year, it's a great time to give your child's hair a quick check for head lice.

Head lice are a common nuisance, especially after summer break when kids have had lots of playdates, sleepovers, and camps. They spread through direct head-to-head contact. The sooner they're spotted, the easier they are to treat, and early detection helps prevent them from spreading to others.

Taking just a few minutes this week to check your child's hair (especially behind the ears and at the nape of the neck) can help keep our schools itch-free!

INDIVIDUALIZED HEALTH CARE PLAN



Parents of children who have a potentially life-threatening health condition will be contacted about completing an **Individualized Healthcare Plan (IHP)**. Health conditions that typically require an IHP include asthma, diabetes, severe allergies, and seizure disorders. An IHP is an important document for the school to have as it provides us with your child's unique medical information, identifies their health care needs during the school day, the medical services to meet those needs, and the steps to take in case of a health emergency.

IHP forms are conveniently located on [Final Forms](#) in the *Past & Ongoing Health Conditions* section which is located under *Health History and Medical Profile*. Once you complete the plan, please upload it the Medical Action Plan folder. You can also reach out to your child's school for a form.

HEADS UP ON HEAD LICE



The health and safety of our children are always our foremost concern. So let's take a moment to tackle a topic that comes up from time to time – head lice. Let's get the facts straight and arm ourselves with some useful information:

What Are Head Lice?

[Head lice](#) are tiny insects that make a temporary home on our scalps. They're common among kids, and while they might be a nuisance, they're not dangerous and don't spread diseases.



How Do They Spread?

Lice crawl from one person's head to another's, often through direct head-to-head contact. It's not about personal hygiene, but rather close interactions, like huddling during play. It is very rare to contract lice from inanimate object, such as furniture, carpets, and stuffed animals.



Clearing Up Misconceptions

Contrary to popular belief, lice don't jump or fly – they crawl. They can't survive for long away from a human scalp either. So, worries about them leaping from one person to another are just myths!

Prevention Tips

While we can't completely eliminate the risk, we can take steps to reduce it:

- Avoid Head-to-Head Contact
- Tie Back Hair—Keeping hair tied up can make it less accessible to lice.
- Personal Items—Encourage kids not to share combs, brushes, hats, or hair accessories.



What If Lice Show Up?

If your child does get lice, don't panic! Special shampoos and fine-toothed combs can evict these unwanted guests. Check with your child's pediatrician before starting any [headlice treatment](#). Cleaning hair care items and bedding is recommended. Only items that have been in contact with the person's head within 2 days before treatment need to be cleaned, as lice survival off the scalp after 48 hours is highly unlikely.



Check, Check, and Recheck

Regular head checks at home can catch lice early, making them easier to treat. It's a good practice, especially after your child has been in close contact with others.



If you have questions or concerns, don't hesitate to reach out to our school health professionals.

Additional information about head lice/pediculosis can be found through the following links:

- American Academy of Pediatrics Clinical Reports: [Head Lice](#)
- Centers for Disease Control and Prevention:
 - ♦ [About Head Lice](#)
 - ♦ [How to Examine for Head Lice](#)
- National Association of School Nurses: [Head Lice Management in Schools](#)
- Ohio Department of Health Brochure: [What Should I Do If My Child Gets Head Lice?](#)

WHEN IS SICK **TOO SICK** FOR SCHOOL



SICK DAY

VS.



Temp of 100.4 F or higher



Fever free for 24 hours without the use of medication

Diarrhea in the last 24 hours



Diarrhea free for 24 hours

Vomits 2 or more times in 24 hours



Vomit free for 24 hours

Diagnosed with contagious illness, such as strep throat, pink eye, pertussis



Return per clinician's orders. If prescribed antibiotics, wait 24 hours after 1st dose before returning

Live lice found in hair



Treat with effective pediculicide. May return after treatment if no live lice remain

RESPIRATORY ILLNESSES (E.G., COVID-19, RSV, INFLUENZA)

- ☑ Stay home when sick
- ☑ Consider testing and/or seeing PCP
- ☑ May return when fever free for 24 hours without the use of medication and symptoms have improved.

Once normal activities are resumed, enhanced precautions for the next 5 days are encouraged:

- ☑ Wearing a well-fitting mask (when able)
- ☑ Keeping a distance from others
- ☑ Improving ventilation and circulation (when possible)
- ☑ Hand hygiene and respiratory hygiene

