WEST WING SCHOOL

2026-2027

Parents/ Guardians: Important Health Office Information You Need to Know

Location: Administration Bldg. Rm 222. Located next to the main office.

Hours: 8:30-3:30

- Please put the **Health Office (HO)** number (**623-376-9010**) in your contacts. When you see that incoming number, answer your phone, check your voice mailbox, so it's **NOT** full, and I am able to leave a message in the event you do not answer your phone.
- **Emergency Contacts**: It's imperative that phone numbers you provide are current, and that you have at least 3-emergency contact numbers of persons over 18 yr. of age who can pick up your child in the event that you are unable.
- **Emergency Health Forms**: It is vital for your child's safety that all information is accurate and detailed. Include health conditions such as allergies, asthma, chronic health conditions and medications.

SICK OR INJURED CHILD:

- Students too ill MUST be picked up; they CANNOT remain at school in the HO.
- Students can only be picked up by a person listed on the Emergency Contact list and must have a picture I.D.

RETURNING TO SCHOOL AFTER AN ILLNESS:

Children must be **fever free for 24-hours WITHOUT the use of fever reducers**. Do NOT send your child to school sick. **Do NOT medicate with a fever reducer** before sending them to school in the morning. The medication will wear off and I will be calling you.

Do NOT send your child to school if they are having

1. **Diarrhea,**
2. **Vomiting**, prior to school.
3. **Unidentified rashes**
4. **Strep Throat** (need to be on **antibiotics 24-hours prior to returning)**
5. **MRSA** (must be on **antibiotics 24-hrs**. and area must be **covered** with a Band-Aid)

MEDICATIONS AT SCHOOL: ***Never give your child the medication to bring to school, YOU must bring the medication to the HO.***

- **Medications, Prescription or Over the Counter (OTC),** can be given at school.

  PRESCRIPTIONS: *Must be in their original container with an accurate prescription label that identifies the child, name of the medication, the dosage and the doctor's name.*

  DO NOT send meds in a PLASTIC BAG. **Proper medication administration forms must be filled out and brought to the health office by the parent or legal guardian. NEVER send medication to school with your child. You will find the necessary doctor order form by going to the West Wing School web page and clicking on the HO site.**

  OTC: Such as Acetaminophen or Ibuprofen do not need a doctor's order, but the parent or legal guardian will need to sign a Medication Administration form, when they bring the medication to the HO.

  INHALERS: If a child is deemed responsible to carry their own inhaler, you will find the "self-carry" form on the web page under HO that can be signed by both the parent and the school nurse. **Parents or legal guardians MUST bring this form to the HO.** The barrel of the inhaler **MUST** be wrapped with a prescription label identifying the student. Also, all inhalers **MUST HAVE A SPACER**.

IMMUNIZATIONS:

- **Arizona state law requires that all children have their vaccinations up-to-date.**
- **State of Arizona law requires that students will have to have their 11/12yr. immunizations when they turn 12yr. Preference is to have them done at their 11yr well check. Just remember they CANNOT be done before your child turns 11yr's.**
- **As soon as you have the date, to get these updated vaccines, PLEASE email me that date. Then, you will not be inundated with repeated phone calls and letters from me, and it helps to make this daunting job a little easier.**
- **THE NO SCHOOL DATE: Once your child has turned 12yr. and you have not communicated your immunization intentions to me your child's NO SCHOOL DATE will be set for 2 weeks following their 12th birthday.**

VISION & HEARING SCREENING DATES: August 10, 11,12

- **This is ONLY a screening**
- **to identify if there could possibly be a problem. The parent or guardian will be notified if the child does not pass one of the screenings. Then, it is up to the parent to follow through and have the child professionally tested.**

WHO WILL BE SCREENED?

- ***All Special Education and New to District Students***
- ***PK and Developmental PK***
- ***K - Vision & Hearing***
- ***1st - Vision & Hearing***
- ***3rd - Vision & Hearing***
- ***5th. Vision & Hearing***
- ***7th - Vision & Hearing***

SO MUCH INFORMATION!! If you have any further questions or concerns please feel free to contact my office or email me. Looking forward to a healthy and happy 26-27 School Year!

Nurse Jan
Office: 623-376-5010 Email: Jan.Rey@dvusd.org