



## SHERMAN ISD HEALTH SERVICES

Please review the following information concerning the many health issues that arise during the course of a normal school year. By reviewing it, many of your questions about exclusion from school due to illness will be answered. The school nurse may exclude your child from school based on symptoms and/or advise you to contact their doctor.

In case of student illness or accident, every effort will be made to contact the parent or guardian. Authorized school personnel shall provide the student with emergency care until the parents arrive or authorize further action. When the situation warrants, Emergency Medical Services will be notified.

### **STUDENT ILLNESS**

- **FEVER** – Your child may attend school when fever free for 24 hours without the use of fever reducing medication. Your child's temperature must be below 100.4 degrees to attend school. Consult your doctor for the best anti-fever medication for your child and if the fever is associated with other symptoms.
- **VOMITING, DIARRHEA** – The student should be kept home until the vomiting or diarrhea subsides for at least 24 hours without medications. Consult your doctor if fever, vomiting or diarrhea persists or your child has poor oral intake and appears dehydrated (dry mouth, no tears, sunken eyes, urinates less than four times in 24 hours).
- **EARACHE** – Consult your child's doctor during office hours.
- **TOOTHACHE** – Call your child's dentist.
- **HEADACHE** – Consult your child's doctor should the headaches become severe or persist.
- **COLD, SORE THROAT, COUGH** – Children average six to eight colds per year. If cold and cough symptoms are associated with a fever or they do not readily improve, call your doctor. Your child may attend school if there is no fever. A sore throat, in conjunction with a fever and swollen glands, may indicate strep throat. Call your child's doctor during office hours to have your child evaluated. If your child is diagnosed with strep throat they must be on antibiotics for 24 hours before they are no longer contagious and may return to school.
- **RED EYES** – When the white part of the eye appears red and produces a yellow or green crusty discharge call your child's doctor. Your child may have conjunctivitis which is commonly known as pinkeye. This is a contagious infection and your child may need an eye ointment. They may attend school after 24 hours of treatment.

- **RASH** – A rash is usually a sign of a viral illness. It also may be a reaction to a medication or chemical (plan, detergents). If your child has an unusual rash or it is associated with a fever, contact your doctor. Keep your child home from school until you have discussed the rash with your doctor.

## **HEAD LICE**

Head lice continues to be a problem in our community. Lice are highly communicable and difficult to prevent, but if every parent will take the responsibility to check the entire family often, these parasites can be controlled. This is not always a simple problem to deal with, but the following information should help you to identify head lice. Treatment information can be obtained from your school nurse, health department or physician. What do you look for? Head lice are elongated insects about the size of a sesame seed. They are usually light brown but can vary in color. Diagnosis is more often made on the basis of finding nits (eggs). Nits are tiny yellowish-white oval specks attached to the hair shaft. They may be found throughout the hair but are most often seen at the nape of the neck, behind the ears and frequently on the top of the head. It helps to use a magnifying glass and natural light when looking them. Your child will not be allowed to remain at school if live lice are found. Upon returning to school your child must check in through the nurse's office for re-admittance. If lice are found upon the seven (7) day recheck, your child will not be allowed to remain at school until they are lice and nit free.

## **MEDICATIONS**

Medication that is to be taken one to three times per day will not be given at school, unless your child is going to after school care or your physician orders it to be given at school. The parent must sign the

“Request for Administration of Medication at School” form before the medication can be given to the student. The medication must come to school in the original container with the pharmacy label. Over the counter medicine can only be administered for 5 days and then a doctor's note will be required for continued administration. Sample Medications must be accompanied by a Doctor's written order. Medication must be age Appropriate.

## **IMMUNIZATIONS –Please provide copy to School Nurse**

Texas law requires schools to have immunization dates on file as follows:

1. Diphtheria, Pertussis and Tetanus (DPT) series and booster – Five doses of any combination DTaP/DTP unless 4th dose was given on or after 4th birthday.  
**Students 7 years or older:** Three doses of any combination DTP/DTaP/DT/Td vaccine (pertussis vaccine is not required.)
2. Tdap required for those entering 7th grade if more than 5 years since last tetanus. Students in 8th -12th are required to have a booster dose of Tdap if it has been 10 years since their previous dose of a tetanus-containing vaccine. Td is acceptable in lieu of Tdap if a Contraindication to pertussis exists.

3. Polio series and booster- Four doses unless the 3rd dose was on or after 4th birthday.
4. Measles, Mumps, Rubella (MMR) –K-12th Two doses of a MMR vaccine with the first dose on or after the first birthday required; Students vaccinated prior to 2009 with 2 doses of measles and one dose of each of rubella and mumps satisfy this requirement.
5. Hib – Complete series or one dose given at or after 15 months of age. If your child has already turned 5 they cannot receive any more of this series.
6. Hepatitis A – Two doses with 1st dose received on or after 1st birthday for students enrolled in HeadStart, Pre-K and K thru 10th Grade.
7. Hepatitis B – Three doses are required. Aged 11-15 years 2 doses allowed if adult  
Hepatitis B Vaccine given (Recombivax) Must be clearly documented
8. Varicella (Chicken Pox) – Grades K-12th: The first dose must be received on or after the 1st birthday. Two doses total are required. Serologic proof of immunity or documentation of previous illness may substitute for vaccination. Previous illness may be documented by a written statement from a physician, school nurse or the child's parent or guardian containing the month, date and year of illness (chicken pox).
9. Pneumococcal/Prevnar/PCV7 – Number of required doses is age dependent. Not required after age 5.
10. Meningococcal – 7th-12th Grade: 1 dose is required on or after 11th Birthday. If received at 10 years of age, this will satisfy the requirement.

Serologic proof of infection or immunity for MMR, HepB, HepA, and Varicella is acceptable in place of Vaccination

*Where you go to get immunizations is your choice. We have listed some options for you.*

**Sherman Health Department**  
 515 North Walnut  
 Monday & Wednesday  
 1:00 – 4:30 PM  
 #903-893-0131

**Denison Health Department**  
 205 N. Houston  
 Tuesday  
 1:00 – 4:30 PM  
 # 903-465-2878

### **OTHER POINTS**

Children are sometimes kept home from school for reasons other than illness. Unnecessary absence from school may have a bad effect on a student's attitude, work habits and progress. Use your own good common sense and remember sick children belong at home and well children belong in school. Please notify the school when your child will be absent.

Please notify your school nurse of any health concerns you have or if you need assistance with medical coverage and community resources.