

### A. Immunization

Children must receive immunizations for diphtheria, polio, measles, mumps, rubella, hepatitis B, Haemophilus Influenzae Type b (Hib), pertussis, tetanus, pneumococcal disease (for children born on or after January 2008) and varicella prior to entering or being admitted to school.

Parents must provide acceptable proof indicating required receipt of all vaccines in accordance with law and regulations. A child may be excluded from the immunization requirements based on a physician determined health reason or condition. This medical exemption must be signed by a physician licensed to practice in New York State. A child may also be excluded from the immunization requirements because the child's parent/guardian holds a genuine and sincere religious belief which is contrary to the practice of immunization.

A child will not be admitted to school or allowed to attend school for more than 14 days without an appropriate immunization certificate or acceptable evidence of immunization. This period may be extended to 30 days on a case-by-case basis by the building principal if the child is transferring from another state or country and can show a good faith effort to get the necessary certification or other evidence of immunization.

When a student transfers out of the district, the parent/guardian may request an immunization record showing the student's current immunization status which will be signed by the school nursing personnel or the school physician. A transcript or photocopy of the immunization portion of the cumulative health record will be provided to the new educational institution upon request.

In the event that a parent is unable to provide an immunization record, the school nurse, or other authorized school district official, will access the New York State Immunization Information System (NYSIIS) to determine if the child has met immunization requirements. If the system indicates that the child has received the required vaccinations, the information will be entered as part of the student's record, the source and date noted, and the documentation requirement will have been met.

### B. Administering Medications to Students in School

The administration of prescribed medication to a student during school hours is permitted only when the medication is necessary to allow the student to attend school or failure to administer the medication would seriously affect the student's health.

Parent(s) or guardian(s) must present the following information:

1. a note from the family doctor containing the following information: student's name, the date and name of the medicine, dosage and time to be administered, and list of possible side effects; and
2.
  - a) a note from the parent(s) or guardian(s) giving the school nurse, teacher, principal or other school staff permission to administer the medication; or
  - b) a medication request form, which includes the family doctor and parent signatures, must be filed with the school nurse.

The school nurse shall develop procedures for the administration of medication, which require that:

1. All medications will be administered by a licensed person unless the child is self-directed;
2. Medications shall be securely stored in the office and kept in their original labeled container, which specifies the type of medication, the amount to be given and the times of administration; the school nurse shall maintain a record of the name of the student to whom medication may be administered, the prescribing physician, the dosage and timing of medication, and a notation of each instance of administration; and
3. All medications shall be brought to school by the parent(s) or guardian(s) and shall be picked up by the parent(s) or guardian(s) at the end of the school year or the end of the period of medication, whichever is earlier. If not picked up within three days of the period of medication, the medication shall be discarded.

A parent(s) or guardian(s) must bring the medication to school in the original container. The administering staff member should clearly label the medication with the time to be given and dosage.

#### *Administering Medication on Field Trips and at After-School Activities*

Taking medication on field trips and at after-school activities is permitted if a student is self-directed in administering their own medication. On field trips or at other after-school activities, teachers or other school staff may carry the medication so that the self-directed student can take it at the proper time.

If a student is going on a field trip but is not self-directed (i.e., fully aware and capable of understanding the need and assuming responsibility for taking medicine), then the following steps should be pursued in this order:

- a) the parent or guardian may be asked to attend the activity and administer the medication or procedure;

- b) the parent can personally request another adult who is not employed by the school to voluntarily administer the medication on the field trip and inform the school district in writing of such request.
- c) the student's health care provider can be consulted and may order the medication time to be adjusted or the dose eliminated.
- d) If no other alternative can be found, the district must provide a licensed professional to administer the medication or procedure.

#### *Administering Epi-Pen in Emergency Situations*

The administration of epinephrine by epi-pen has become an accepted and extremely beneficial practice in protecting individuals subject to serious allergic reactions (e.g., individual has an anaphylactic reaction to a wasp sting or the ingestion of peanut butter).

Pursuant to Commissioner's regulations, registered professional nurses may carry and administer agents used in nonpatient specific emergency treatment of anaphylaxis.

In addition, pursuant to SED guidelines, school nurses may provide training to unlicensed school staff in administering epi-pens, prescribed by a licensed prescriber, to a child who has been diagnosed with the potential for a severe reaction, in the event of the onset of a serious allergic reaction when a nurse is not available.

#### C. Student Medical Exams

In accordance with Sections 903 and 904 of the State Education Law, each student shall have a physical exam given by the school doctor or family physician (including a physician, physician assistant or nurse practitioner) upon initial entrance to school and at grades Pre-Kindergarten or Kindergarten, two, four, seven, ten, and for sports, working permits, for referrals by/for the Committee on Special Education (CSE) and as deemed necessary by school officials to determine a child's educational program. Findings are to be kept on record at the school on a form that can be obtained from the school nurse. In addition, the school will request a dental health certificate according to the same schedule.

A student may be excluded from the medical examination requirements because the child's parent/guardian holds a genuine and sincere religious belief which is contrary to medical examinations. The request for exemption must be in writing to the principal or his/her designee.

In the event that the student's medical history reveals that they have a known life-threatening allergy, the school nurse, in conjunction with the family, student, child's teacher, and other appropriate staff, will develop and implement an individual health care plan which will guide prevention and response.

The district will work with students in the self-management of their life-threatening allergy, or other chronic health conditions, by:

1. Adequately training staff involved in the care of the child.
2. Assuring the availability of the necessary equipment and/or medications.
3. Providing appropriately licensed and trained persons on school premises, as required by law.
4. Providing ongoing staff and student education.

#### D. Illness in School

If a student becomes ill in school:

1. The nurse will determine if the student should receive further medical attention, should remain in the health office or return to class.
2. The nurse will call the parent, guardian or adult as designated by parent/guardian if he/she feels the student should go home. A parent/guardian is expected to pick up the student from school.
3. If the parent or guardian cannot provide transportation, the nurse will contact the transportation department to make arrangements for the child to be transported by bus to the home.
4. If there is to be a change in bus routing in order to carry the student to his/her home, that decision will be made by the administrator and the transportation supervisor.
5. If the route is to be changed, the transportation supervisor shall inform the bus driver.
6. If no parent, guardian or adult as designated by the parent/guardian picks up the student at school, or if no parent/guardian or adult as designated by the parent/guardian will be home, the student will remain in the nurse's office until such time as a parent, guardian or adult as designated by the parent/guardian becomes available to assume responsibility for the child.

#### E. Emergency Information Form

All students shall have on file a medical emergency record which shall state the name and telephone numbers of the following:

1. the student's parent(s) or guardian(s) at home and work;
2. emergency contact;
3. alternate emergency destination;
4. any allergies or serious health conditions.

#### F. Student Return to School After Illness/Injury

In general, students should be symptom-free before returning to school and resuming normal activities. In some instances, students may be asked to provide a note from their doctor before they return to school or participate in the full range of school activities. The final decision to permit participation rests with the school physician. The Superintendent/designee, in consultation with the physician, nurse and other appropriate staff, will develop protocols to address a student's return to activities when there has been a serious illness or injury.

#### G. Physical Examination Regulations

##### 1. Primary Health Care Provider

Ideally, the child's primary health care provider should perform the physical examination, with the exception of interscholastic athletic physical examinations which must be performed by the school physician. Knowledge of the child's family and home, previous illnesses, immunization status, and background factors assist in evaluating the total health status of the child. The primary health care provider is also in a position to institute, without delay, any therapeutic measures.

The Johnson City Central School District encourages parents to have their children examined regularly and encourages the parents to share the reports of the findings and recommendations with the school district. However, because this is not always possible, school health services will provide those physical examinations required by Education Law and the Regulations of the Commissioner of Ed.

## 2. Physical Examination

- a) The school physician shall conduct all physical examinations requested by the school district.
- b) If a report of a child's examination is submitted from a primary health care provider, "it must be signed by a duly licensed physician who is authorized to practice medicine in New York State" or by a mid-level practitioner (nurse practitioner or physician's assistant) working in collaboration with the physician. The report shall describe the condition of the pupil when the examination was made and shall not be performed more than 90 days prior to presentation of such certificate to the school and state whether such pupil is in a fit condition of bodily health to permit his or her attendance. Further, if the report is not submitted for a child whose examination is mandated, the school nurse shall notify the parents in writing that, if the report is not furnished within 15 days from the date of the notice, the child will be examined by the school physician. (Education Law, Sections 903-904).
- c) Prior to the physical examination procedure the examiner should review the child's health record, noting:
  1. Health history
  2. Previously noted defects
  3. Growth chart
  4. Vision and hearing screenings
  5. Results of scoliosis screenings
  6. Medical and dental reports
  7. Other pertinent health information
- d) The physical examination shall include an assessment of:
  1. General appearance - body habitus - development proportion; physical distress level, alertness, attention span, posture, general nutrition, muscle tone, coordination, involuntary movements, mobility, speech and behavior patterns
  2. Hair and scalp - texture, quantity, distribution, pattern of loss, nits, lesions
  3. Skin - color, temperature, texture, pigmentation, thickness, hygiene, eruptions, lesions, scars, nails

4. Lymph glands - size, shape, mobility, consistency, tenderness
  5. Head - size, configuration, symmetry
  6. Eyes - external structures, alignment, extraocular movements, pupils, conjunctiva, sclera, cornea
  7. Ears - external structures, ear canal, tympanic membrane
  8. Nose - septum, mucosa, turbinate, shape, discharge
  9. Mouth - lips, oral cavity-mucosa, teeth, tongue, frenulum, gingiva, tonsils, palate, pharynx
  10. Neck - thyroid, trachea, range of motion
  11. Cardiovascular - heart pulsations for rate, rhythm quality of heart sounds, extra/abnormal sounds (ie., murmurs, gallops)
  12. Chest - size, shape, symmetry of thorax, breasts
  13. Lungs - rhythm and quality of respirations, breath sounds
  14. Abdomen - organomegaly, masses, tenderness
  15. Genitalia  
Male: penis, scrotum, testes, developmental stage (Tanner Scale), presence or absence of hernia  
Female: developmental stage (Tanner Scale) pubic hair
  16. Musculoskeletal - muscle mass, tone and strength, general body size and symmetry, spine, posture, station and gait, extremities, joints, range of motion
  17. Neurologic - mental status, speech/language, balance/coordination, motor, sensory, reflexes as needed
- e) Employment of Minors (Work Permits)
1. Physical examination must have been performed within 12 months prior to the issuance of a physical fitness certificate.
  2. The school mandated grade-level examination, interscholastic sports examination, or any other complete physical examination is acceptable.
  3. The school district must provide the physical examination if the applicant so requests.

4. The Certificate of Physical Fitness must be presented to the school employee who certifies working papers. (Exception) A physical fitness certificate is not required for issuance of a Newspaper Carrier Permit if the applicant is qualified to participate in the school's physical education program. If the applicant is not qualified to so participate, a physician's permission is required.

f) Special Education

Children who are referred to the Committee on Special Education (CSE) or the Committee on Preschool Special Education (CPSE) must have a physical examination as part of their individual evaluation in accordance with the provisions of Section 904 of the Education Law.

g) Special Consideration

Each child must be separately and carefully examined with due regard for privacy and comfort.