SCOTT COUNTY SCHOOLS CLINIC GUIDELINES 2021/2022

During this time of pandemic, we have to look at each symptom with a new awareness. A student's history is very important when making decisions about dismissal. After reviewing traditional clinic guidelines, we must reevaluate each symptom that is also COVID-19 related. We must use extreme caution, when students present with these symptoms for everyone's safety. We receive our COVID-19 guidance, from the VDH, VDOE, and the American Association of Pediatrics, Virginia.

- 1. Sore Throats: Are a very common complaint. This is however a symptom of COVID-19 and if accompanied by another symptom of COVID-19 it would warrant dismissal home.
- 2. In suspected allergic emergency situations, Benadryl, or epinephrine, may be given prior to consent, and parent/guardian will be contacted immediately, unless documented sensitivity to Benadryl, or epinephrine is noted.
- **3. Tylenol & Motrin** will only be given to students with signed consent forms. Five doses, in any combination of medications, per child will be allowed every school year. If no consent form is signed, a parent may be contacted by phone and give oral consent. **But phone consent will be allowed ONLY 1 time**. Written consent must be obtained thereafter. Neither medication will be given after 1pm.
 - **Elementary Schools:** If your child receives Tylenol/Motrin during school, you will be notified either by a note sent home with your child or a phone call.
- 4. Stomach aches: This is a very frequent complaint, often exaggerated, and difficult to medically evaluate. If the child has unwitnessed vomiting, the student will rest in clinic for 20 minutes. Asymptomatic students will be returned to class. Upon initial complaint to teacher, the student should be given opportunity to use bathroom or eat a snack. If a child has a medical condition that causes frequent stomach problems, it should be reported to the school nurse/aide or principal so that a Plan of Care can be written and special arrangements can be made. If your child is sent home with vomiting or diarrhea, they may not return to school until they have been symptom free for 24 hours. Stomachache accompanied with another COVID-19 symptom would warrant dismissal home.
- **5. Dry chapped lips** are not a medical necessity and do not need to be seen in the clinic unless sores or bleeding are evident, then they will be allowed only 1 trip to the clinic for Vaseline or lip balm. Parents are encouraged to provide chap stick especially in the winter season.
- **6. Splinters** will be removed if visible and accessible with tweezers. They will not be "dug" out. A bandage may be applied and a note sent home to parents alerting them of the splinter.
- 7. If **pink eye** is suspected, child will be sent home and referred to a doctor for evaluation & treatment. This is also a symptom of COVID-19.
- **8**. Students with **draining wounds** that cannot be covered with appropriate bandages will not be allowed at school. All **staph infections** will be sent home until proper treatment has been started **and** student is released by medical doctor to come back to school.
- **9. Head Lice**: If live lice are visible, student will be sent home. They may be excused one day from school for treatment. Upon return to school, a parent/guardian must accompany child to clinic and have the nurse/aide check head for lice. If no lice are found, child may stay at school. If lice are still present, they will be sent back home. They will be checked every 3-5 days for new nits & lice. See "Head Lice" protocol for more information.
- **10**. Fever of >=100° the student will be sent home. They may return 24 hours after being fever free without the use of fever reducing medications.
- 11. All head traumas will be reported to parent/guardian immediately. Student will be sent home if needed.
- **12. Ringworm**: Students will be sent home if ringworm is present. They may return to school after appropriate medical treatment is started. 2 applications are preferred.
- **13**. **Chicken pox**: All students with open/draining lesions will be excluded from school. They may not return until **ALL** lesions are crusted & healing. This illness will be reported to the local health department.
- **14. Scabies**: If scabies is suspected, your child may be sent home and referred to a medical professional for diagnosis. They may not return to school until treated and released by doctor.
- **15. Rashes**: If child has an itchy rash with no other symptoms, the nurse may apply an anti-itch or 1% hydrocortisone cream, with parent's permission and remain at school if parent chooses. Rashes of unknown origin will be reported to parent and treated accordingly.

- **16. Headaches**: If student complains of a headache, and no other symptoms, they may be asked to remain in class until break. Exceptions to this would be diagnosis of migraines or other medical condition that includes frequent headaches. This is also a very frequent complaint and hard to evaluate. Parents, please talk with your school nurse if there is a history or medical problem so that special adjustments can be made. **If a headache is accompanied with another COVID-19 symptom it warrants dismissal home**.
- 17. Ear aches can be a common complaint, especially among the elementary age. Unless it is a chronic pain or drainage is apparent, the child may be kept in class until break. The school nurse/aide can check for inflammation and drainage, but cannot diagnose an ear infection, therefore the child may be referred to a physician for further evaluation. Most children with earaches without temperature can stay at school, some do very well with Tylenol or Motrin.
- **18. Prescription medications** will be given during school hours only if doctor orders and parental permission are received. We do not encourage medication be given at school if it can be given at home, especially morning medicines. You may request a morning medicine be given at school and provide doctor orders, but each request will be considered depending on the circumstances for which they are being requested. ("forgetfulness" and "refusal by child" **will not** be acceptable circumstances)
- **19. Over-the-counter medicines** such as cough syrup, antihistamines, decongestants, etc. may be given at school if absolutely necessary and as long as the **parent** brings the medicine in the original container, labeled with student's name, to the school nurse/aid with instructions (dose & time). They will be administered for a maximum of 5 days, after 5 days, the child will be referred to his/her physician for further evaluation. We do not encourage giving medicine at school when doses can be given at home or if it will make student drowsy or impaired.
- 20. Nurse/Aides will not be responsible for pulling baby teeth. Do not send those students to the clinic.
- 21. If a student has a piercing that is infected (red, drainage, foul odor) they will be sent home, until they receive medical care.
- **22.** The school nurses will send out baggies with band aids, ointments, etc. at the beginning of school. Please utilize these to save trips to the clinic. Have the student wash the cut/laceration in the bathroom then return to the classroom for Band-Aid. If the wound is deep and needs evaluated by the nurse, then you may send them to the clinic.
- 23. Parents, it is very important that the school clinic have current accessible phone numbers in case there is an emergency, or your child is sick and must be picked up from school immediately. If phone numbers change, please make sure the school has the current number by either calling or sending a note with your child. We have to have an emergency contact at all times. If you are unavailable during school hours to pick your child up, you need to plan with another family member or friend that will be available. Due to the high volume of students seen in many of the clinics daily, we cannot keep sick students in the clinic after the dismissal bell.
- **24.** If your child is **diabetic** and requires supervision/guidance by nurse or trained school personnel, **PARENTS** must supply the school with the necessary diabetic supplies and snacks, needed for treatment. Physician orders **MUST** be provided to the school nurse/aid. Any changes in diabetic management must be made by the physician (**not parent**) before the school will adhere to the new orders. If we are unable to maintain an appropriate blood glucose level on your child, we will contact you or the physician for guidance, or pick up of your child. **Diabetes Care Plan, must be signed to allow treatment from school nurse.**
- **25**. Please note, 1) administration of an emergent medication, i.e., Glucagon, Diastat, Epinephrine, or Naloxone, 2) sudden onset of dizziness/drowsiness with unknown origin, 3) severe head injury, 4)severe asthma symptoms, not resolving with treatment,5) severe trauma, 6)chest pain, 7)new onset set of seizure activity, 8) or any concerning condition not responding to First Aid or treatment, will result in 911 being activated with a transport to a local Emergency Room.