

SCOTT COUNTY SCHOOLS CLINIC GUIDELINES

1. **Sore Throats:** Are a very common complaint. They are not emergent and should not be sent to the clinic during class, unless other symptoms are present as well. (ie: temp, vomiting, rash, strep odor) They may be assessed by the clinic nurse/aide at break. If reddened or sinus drainage is observed, fluids may be encouraged and a note may be sent home. If blisters or swollen tonsils are observed, a parent will be contacted. Cough drops will no longer be provided by the clinic.
2. In **emergency situations**, Benadryl may be given prior to consent, and parent/guardian will be contacted immediately.
3. **Tylenol & Motrin** will only be given to students with signed consent forms. Five doses/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 2:30pm. **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. It can become a very time consuming evaluation for the student, clinic nurse/aide, and teacher. If child states vomiting, there must be verification from school staff. If no witness, and the student has been in clinic for 20 minutes without fever, vomiting, or diarrhea, they may return 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. Some clinics keep Tums on hand, and are given at the nurse's discretion with parental consent. **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.**
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 bandaid may be given 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. If it is diagnosed as pink eye, they may return to school after 24 hrs of treatment with appropriate medicated eye drops.
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 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 $\geq 100^\circ$ the student will be sent home. They may return the next day if no fever, unless it is during flu season then they must be fever-free for 24hrs without the use of fever-reducing medication.
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.

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 allergic reaction is suspected and student is at risk for respiratory difficulty, your child may receive Benadryl and be sent home or to a medical facility immediately. If not life threatening, they may receive Benadryl 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. Questions to ask students before sending them to the clinic during class: hungry? allergies? sensitive to smells? Eye strain? These are not emergent and can wait until class breaks. 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 has "just started" encourage waiting, it may dissipate soon and medicine not be needed.
17. **Eye glass** repairs can be time consuming and are preferably sent to the office for repairs.
18. **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.
19. **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)
20. **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.
21. Nurse/Aides will not be responsible for pulling **baby teeth**. Do not send those students to the clinic.
22. If a student has a **piercing** that is infected (red, drainage, foul odor) they will be sent home.
23. The school nurses try to send out baggies with band aids, ointments, etc at the beginning of school. Please utilize these for they can save a lot of 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.
24. 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 make arrangements 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 until the 3:20 dismissal bell.
25. If your child is **diabetic** and requires supervision/guidance by a nurse or trained school personnel, you must supply the school with the necessary diabetic supplies such as meter, strips, insulin, syringes, all pump supplies, snacks, glucose tabs, glucagon (if ordered by physician), etc. 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.