



FAYETTE COUNTY BOARD OF EDUCATION

LaFayette Educational Center
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www.fcboe.org

Dear Parent or Guardian:

Date: August 7, 2017

School Health Services is proud to be part of the team effort that supports student success in our county. As your school nurse works with you this year, we need your assistance and cooperation in preparing for the possibility that your student might need to take a medication, become ill, or have an injury during school hours. ***This parent letter, Immunization Information, the School Medication Policy, School Medication Authorization and Health Care Plans are available on the Fayette County Board of Education web site at www.fcboe.org under Departments, “School Health Services”.***

STUDENT EMERGENCY/SAFETY INFORMATION

Please make corrections, sign and return your student's Emergency Safety Card. This information must be updated annually to enable us to contact you in case of an emergency. **If any phone numbers or contact information changes, please notify the school or make changes on Infinite Campus's Parent Portal.**

SCHOOL MEDICATION ADMINISTRATION

The Fayette County School's Medication Policy is available on the website e-Board under Policies and will be followed for all medications given at school.

●The parent or legal guardian must complete and sign the ***School Medication Authorization*** for ALL medications given at school. **For prescription, homeopathic or supplement medications, a duly-licensed, Georgia physician must also complete and sign the *School Medication Authorization or Health Care Plan* available on the website or from your school nurse.**

●A parent/legal guardian or other designated adult must bring all medication, accompanied by the ***School Medication Authorization or Health Care Plan***, to the school clinic unless special permission given by the principal or school nurse.

●All over-the-counter, prescription, homeopathic and supplement medications must be in their original containers with unexpired dates and labeled in English. Prescription medications must be clearly labeled with the physician's name, medication's name, strength, dosage, date, time for administration, and dispensing pharmacy. **Parent/Guardian must provide over-the-counter medications to the clinic.**

●If your student has a serious condition (i.e. asthma, diabetes, or severe allergy), permission may be granted to carry the medication (such as inhaler, glucose tablet, epinephrine injector, or internal Insulin pump) on his or her person from the **student's physician and parent/guardian on a completed and signed *School Medication Authorization or Health Care Plan*.**

●Alcohol, aloe vera gel, antibiotic ointment, anti-itch lotion (i.e. Calamine lotion, Hydrocortisone cream), antiseptic wash, oral Benzocaine (i.e. Anbesol), Calcium Carbonate (i.e. Tums), lotion, peroxide, petroleum jelly (i.e. Vaseline), Saline eye drops, topical wound dressing (i.e. QR or Styptic Pencil), and throat lozenges/cough drops/chews are routinely used in the school clinic unless instructed differently by the parent/guardian.

STUDENT ILLNESS/INJURY

The main reasons for keeping your student home from school are he/she is too sick to participate comfortably at school or might spread a contagious disease to other students. If your student has been **diagnosed with a contagious disease**, **please contact the clinic** so other student's parents and school staff may be alerted of the symptoms.

Reasons Your Child will be Sent Home from School

- 1. Fever >100.4 degrees F or 38.0 degrees Celsius***
Student should stay home until there is NO FEVER for 24 hours WITHOUT MEDICATION. Call your doctor if the fever is with pain, rash, weakness, vomiting or diarrhea.
(*Based on CDC Recommendations)
- 2. Vomiting or Diarrhea**
Student should stay home with ONE event of vomiting or watery diarrhea. Call your doctor if vomiting or diarrhea continues or with fever, rash, or weakness.
- 3. Drainage from a wound, rash, eyes or nose**
Student should stay home with drainage from a wound, rash, or eyes. Call your doctor for treatment.
- 4. Head Lice or Scabies**
Student should stay home until after treatment is complete and no lice or nits. Contact the health department or your doctor for treatment. The student must be cleared by the Clinic to return to school.
- 5. Unexplained Rash**
Student should stay home with an unexplained rash. Call your doctor for treatment.

Your student may not return to school until they have been fever-free and symptom-free for ONE FULL school day (i.e. If your child goes home sick anytime during the school day on Monday, your child can not return to school until Wednesday.). When there is doubt in your mind about sending your student to school, consult your doctor. **Your school nurse or principal may ask for a "Release to Return to School" from your doctor before returning to school.** Please make sure that your student's school knows how to reach you during the day.

CERTIFICATES

All students entering or attending Grades Pre-KG through 12th grade in the Fayette County School System are required to have a complete Georgia Certificate of Immunization (Form 3231) and issued by a licensed Georgia physician, Advanced Practice Registered Nurse, Physician Assistant or qualified employee of a local health department or the State Immunization Office in accordance with Georgia State Law , O.C.G.A. 20-2-771 and Regulations, Chapter 290-5-4. All students must be immunized against disease as specified by the Georgia Department of Human Resources, or have medical or religious exemption on file at the school. Effective July 1, 2014, ALL 7th grade students and NEW entrants into Georgia schools grade 8th through 12th grade, are required to have one dose of Meningococcal (meningitis) conjugate vaccine and Tdap (tetanus, diphtheria, pertussis) booster. Immunization information and flyers for Pre-Kindergarten and Kindergarten and 7th Grade students are available on the website. All students enrolled in a Georgia Public School for the first time are required to file a completed Certificate of Vision, Hearing, Dental and Nutrition Screening (Form 3300) in accordance with Georgia Regulations, Chapter 290-5-31.

HEALTH CARE PLANS

If your student has a severe allergy, asthma, cardiac condition, diabetes, seizures or other health condition which may require medication or special care during school hours, we recommend you and your healthcare provider complete and sign a **Health Care Plan** available on the website or from your school nurse. **Any student returning to school after surgery or a hospitalization or Intermediate Care or Emergency Room Visit is required to present from their healthcare provider a "Release to Return to School" and instructions for care (such as Discharge Instructions) including but not limited to, PE modifications, the use of crutches or a wheelchair and/or other medical devices provided by the parents.**

Working together, we can promote the health and well-being of your student and ensure they obtain the maximum educational benefit while at school. Please contact your School Clinic if you have any questions or concerns.

Sincerely,
Debbie King, RN, BSN
School Health Services Coordinator
770-460-3990 Ext. 182