

## STUDENT HEALTH SERVICES

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**2009-2010 School Year**

### **Dear Parent/Legal Guardian:**

As the school staff works with you this year, we need your assistance and cooperation in preparing for the possibility that your student might need to take medication, need assistance with a medical condition or procedure, become ill, or have an accident during school hours. Hopefully this letter will explain some of our policies and procedures.

### **EMERGENCY INFORMATION / HEALTH CONDITIONS / CHRONIC ILLNESSES**

Emergency contact and health information should be updated annually by the parent or legal guardian within 5 days of the beginning of the new school year (as well as upon entering a Fulton County School) by completing and returning the Emergency Contact Information Form (EMG01) to the school. Schools may ask for additional updates at the beginning of the second semester and on other occasions. You can request additional Emergency Contact Information forms from the school in the event the student's information or condition changes. The school should be informed of any student who has a health or medical condition, chronic illness, or requires assistance for any medical procedure, treatment and/or problem, or takes daily medication(s).

Current accurate health and telephone information enables the school to contact you in case of emergency, accident or illness, and will help us to ensure the health and well being of the student. If any information changes during the school year, please contact the school immediately. It is the parent or legal guardian's responsibility to keep the student's health and contact information (telephone numbers, address, etc.) updated.

**In case of a serious accident or illness at school, your child will be transported by ambulance to an emergency medical facility. The parent/legal guardian is responsible for all expenses.**

## **PRESCRIPTION AND NON-PRESCRIPTION MEDICATIONS**

When possible, medication should be taken at home. However, if medication must be taken at school, on a field trip or during a “before or after” school chaperoned activity, the following policies and procedures apply:

1. **Medication Administration Form** – *The parent/legal guardian must complete an authorization and instruction form* entitled “**AUTHORIZATION TO GIVE MEDICATION AT SCHOOL**”. For prescription medication, a physician must also sign the form. Non-prescription (over the counter) medication only requires the signature of the parent/legal guardian. A copy of this form is attached. You may also print off copies of the form from Student Health Services website: [www.fultonschools.org/dept/healthservices](http://www.fultonschools.org/dept/healthservices). The school can not give medications without the accompanying form. The same form is used for prescription and non-prescription medications. All medication authorization forms are good for **one school year**. A faxed copy of the form from your doctor’s office is acceptable after the parent/legal guardian’s signature. **Please use a separate form for each medication.**
  2. The medication and authorization form **must** be taken to the school clinic/office by the parent/legal guardian. However, if this is not possible, the student should be instructed to take the medication and authorization form directly to the school office/clinic upon arrival to school. **Please instruct your student that under NO circumstances should medication be shown or shared with another student! It is essential for the parent/legal guardian to bring controlled substance medications to the school personally.** Medications that are considered controlled substances by the State of Georgia (this includes medications for ADD/ADHD and pain) should be appropriately stored in the school clinic.  
**Note: In High Schools the medication form must also be used when supervision, storage, or administration by the school is required. We encourage all medications to be kept in the clinic unless it is an approved emergency medication and the student has permission to carry the medication on his/her person during school hours (See paragraph below on “Authorization for Students to Carry Approved Emergency Medication”).**
  3. Only medication in its ORIGINAL container from the store or pharmacy is accepted. Non-Prescription medications in small-sized bottles are preferred due to limited storage space. Both prescription and non-prescription medication sent to the school must have current labeling on the bottle. Medication in bottles that have expired labeling **will not** be given to the student. **The medication in the bottle must MATCH the label, MATCH the student, MATCH the Authorization Form and have a CURRENT prescription label on the bottle.** A new prescription bottle with correct labeling is required for any dosage change. **The school cannot alter dosages without a new authorization form from you and/or your doctor/healthcare provider.**
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4. At the designated time, the student will go to the clinic to take the medication. Assistance/supervision by the school clinic personnel will be given in accordance with the instructions on the authorization form. The parent/legal guardian should notify the school when assistance is needed for the student taking medication in order to maintain an appropriate medication schedule. **Medication is a parental responsibility; therefore, Fulton County School employees will not assume any liability for supervising or administering medication, and the school system retains the privilege of refusing to supervise/assist in administering medication, except where otherwise required by law.**

5. Unused medication should be retrieved from the school/office within one week after medication is discontinued and at the end of the school year. Otherwise, the school will dispose of that medication. Medication left at the end of the school year will be discarded.

#### **AUTHORIZATION FOR STUDENTS TO CARRY A PRESCRIPTION, INHALER, EPIPEN, INSULIN OR OTHER APPROVED EMERGENCY MEDICATION**

If you have a student who has asthma or other health-related conditions that require self administration of medicine or emergency type(s) of medication, or a student who needs to carry medication on his/her person, you must complete an Authorization for Students to Carry a Prescription, Inhaler, Epipen, Insulin, or Other Approved Medication Form. You may obtain a form from your child's school. This form requires a physician, the parent/guardian, and student's signature. **You are strongly encouraged to keep a "back-up" supply of any emergency medication such as an inhaler, epipen, diabetic medication, etc. in the school clinic. For further instructions, please call your school clinic.**

#### **STUDENT ILLNESS/INJURY**

Students who are sick, contagious and/or have a fever greater than 100.4 **MUST NOT** be sent to school. In order to return to school, a student should be fever free for at least 24 hours and not require medications to reduce fever. In addition, in some cases, the student may not return unless cleared by a physician and a note must be provided to the school.

**When a student becomes ill at school, runs a fever, has a potential contagious illness or has a more serious health problem while at school, the parent/guardian will be notified to pick-up their child immediately. The parent/guardian MUST ARRANGE for the student to be taken home.** A note from a doctor may be requested by the school before your child can return to school.

On the Student Enrollment and/or Emergency Contact Form, please list friends/relatives as emergency contacts for your student when you cannot be reached. Please list your best contact information such as a cell phone number - if applicable. This information is especially important if your student travels a distance to and from the home area to school.

#### **STUDENT ACCIDENT INSURANCE**

Student Accident Insurance can be purchased through Fulton County Schools. For more information, contact the Risk Management Department at 404-305-2180.

#### **IMMUNIZATIONS**

Beginning with the 2007-08 School Year, new immunization changes/requirements for Georgia students went into effect. The changes primarily affect Pre-K, Kindergarten, Rising Sixth Graders and all New Students (new entrants). Please contact your healthcare provider or local health department if you have questions. A detailed description of the policies and changes can be found at <http://www.cdc.gov> and click on the "I" for Immunizations. It can also be found on Fulton County's website at [www.fultonschools.org](http://www.fultonschools.org), click on the "Policies" icon, then click on the "District" icon, scroll down to "Students", click on JGCB and that takes you

directly to the Immunization policy. Georgia requires students to be immunized against measles, mumps, polio, rubella, whooping cough, tetanus, diphtheria, hepatitis B, haemophilus influenza, and varicella. **The parent/guardian is responsible for securing and maintaining a copy of the state mandated 3231 Immunization Form.** Students who are not compliant with Georgia's immunization requirements will be excluded from school until the appropriate or updated certificate is submitted.

By working together, we can strive to ensure the health and well being of every student so that he/she can benefit from the education program. Should you have any questions or need additional information, please contact your Cluster or Special Needs Nurse or the Office of Student Health Services at 404-305-2177.

**Thank you.**

***Lynne P. Meadows, RN, MS***  
**Coordinator, Student Health Services**  
**Fulton County Schools**

**NOTE: Revised 04/09**