**CLINIC RELATED FBISD HANDBOOK EXCERPTS**

**ACCIDENT INSURANCE**

Soon after the school year begins, parents will have the opportunity to purchase low-cost accident insurance

that would help meet medical expenses in the event of injury to their child.

**BIRTHDAY TREATS**

In accordance with the Food and Nutrition Division, of the Texas Department of Agriculture, the Texas Public School Nutrition Policy provides for the following:

Elementary schools will allow birthday treats. i.e. cupcakes and cookies, to be brought in and served on a student’s birthday for the student’s class only after the children have had an opportunity to consume a nutritious meal. Approval from the campus principal must be obtained prior to bringing birthday treats. Any treats brought to the campus for student consumption are recommended to be store-bought, not prepared at home. Treats will be served for a short period of time (5-10) minutes so as not to cause excessive interruption to instruction.

**DRESS AND GROOMING**

Fort Bend ISD takes pride in the appearance of our students. The District’s dress code and grooming standards have been established to teach grooming and hygiene, to prevent disruption, and to minimize safety hazards at

school and school-related functions. All students shall wear clothing that is neat, appropriate, and modest to the age of the student. Each campus, not unlike a work place, promotes a productive, business-like atmosphere conducive to learning. Students should be familiar with these standards, as the dictates of popular fashion may be inconsistent with these guidelines.

**EMERGENCY MEDICAL TREATMENT AND INFORMATION**

If a student has a medical emergency at school or a school-related activity when the parent cannot be reached, the school may have to rely on previously provided written parental consent to obtain emergency medical treatment, and information about allergies to medications, foods, insect bites, etc. Therefore, parents are asked each year to complete or update the medical information and emergency details form.

Parents should keep emergency care information up-to-date (name of doctor, emergency phone numbers, allergies, etc.). Please contact the school nurse to update any information that the nurse or the teacher needs to know.

**FOOD ALLERGIES**

The District requests to be notified when a student has been diagnosed with a food allergy, especially those allergies that could result in dangerous or possibly life-threatening reactions either by inhalation, ingestion, or skin contact with the particular food. It is important to disclose the food to which the student is allergic, as well as the nature of the allergic reaction, in order to serve his or her needs. Please contact the school nurse or campus principal if your child has a known food allergy or as soon as possible after any diagnosis of a food allergy.

The District has developed and annually reviews a food allergy management plan, which addresses employee training, dealing with common food allergens, and specific strategies for dealing with students diagnosed with severe food allergies. When the District receives information that a student has a food allergy that puts the student at risk for anaphylaxis, individual care plans will be developed to assist the student in safely accessing the school environment. In some cases, the student may be evaluated to determine if the student has a disability that should be accommodated under a Section 504 plan. The District encourages parents and students to be respectful of allergies students have when bringing lunches, other snacks or treats to school, and know that food allergy plans may require limitations, where permitted by law. The District’s food allergy management plan can be accessed through your campus nurse. [Also see policy FFAF].

**HEAD LICE**

Head lice, although not an illness or a disease, is very common among children and is spread very easily through head-to-head contact during play, sports, or nap time and when children share things like brushes, combs, hats, and headphones. If careful observation indicates that a student has head lice, the school nurse will contact the student’s parent to determine whether the child will need to be picked up from school and to discuss a plan for treatment with an FDA-approved medicated shampoo or cream rinse that may be purchased from any drug or grocery store. After the student has undergone one treatment, the parent should check in with the school nurse to discuss the treatment used. The nurse can also offer additional recommendations, including subsequent treatments and how best to eliminate lice and prevent their return.

More information on head lice can be obtained from the TDSHS Website at [http://www.dshs.state.tx.us/schoolhealth/lice.shtm.](http://www.dshs.state.tx.us/schoolhealth/lice.shtm)

 **ILLNESS**

When your child is ill, please contact the school to let us know he or she won’t be attending that day. It is important to remember that schools are required to exclude students with certain illnesses from school for periods of time as identified in state rules. For example, if your child has a fever over 100 degrees, he or she must stay out of school until fever free for 24 hours without fever-reducing medications. In addition, students with diarrheal illnesses must stay home until they are diarrhea free without diarrhea-suppressing medications for at least 24 hours. A full list of conditions for which the school must exclude children can be obtained from the school nurse.

If a student becomes ill during the school day, he or she must receive permission from the teacher before reporting to the school nurse. If the school nurse or other District personnel determines that the student should go home, the nurse will contact the student’s parent and document the parent’s wishes regarding release from school. Unless directed by the parent to release the student unaccompanied, the parent or other authorized adult must follow the sign-out procedures as listed above. If a student is allowed to leave campus by himself or herself, as permitted by the student’s parent, or if the student is age 18 or is an emancipated minor, the nurse will document the time of day the student was released. Under no circumstances will a child in elementary or middle school be released unaccompanied by a parent or adult authorized by the parent.

The District is also required to report certain contagious (communicable) diseases or illnesses to the Texas Department of State Health Services (TDSHS) or our local/regional health authority.

The school nurse can provide information from TDSHS on these notifiable conditions. Contact the school nurse

if you have questions or if you are concerned about whether or not your child should stay home.

**IMMUNIZATION**

A student must be fully immunized against certain diseases or must present a certificate or statement that, for medical reasons or reasons of conscience, including a religious belief, the student will not be immunized. For exemptions based on reasons of conscience, only official forms issued by the Texas Department of State Health Services (TDSHS), Immunization Branch, can be honored by the District. This form may be obtained by writing the TDSHS Immunization Branch (MC 1946), P.O. Box 149347, Austin, Texas 78714-9347; or online at [https://webds.dshs.state.tx.us/immco/default.aspx.](https://webds.dshs.state.tx.us/immco/default.aspx) The form must be notarized and submitted to the principal or school nurse within 90 days of notarization. If the parent is seeking an exemption for more than one student in the family, a separate form must be provided for each student.

The immunizations required are: diphtheria, tetanus, and pertussis; measles, mumps, and rubella; polio; hepatitis A; hepatitis B; varicella (chicken pox); and meningococcal. The school nurse can provide information on age-appropriate doses or on an acceptable physician-validated history of illness required by the TDSHS. Proof of immunization may be established by personal records from a licensed physician or public health clinic with a signature or rubber-stamp validation.

If a student should not be immunized for medical reasons, the student or parent must present a certificate signed by a U.S. licensed physician stating that, in the doctor’s opinion, the immunization required poses a significant risk to the health and well-being of the student or a member of the student’s family or household. This certificate must be renewed yearly unless the physician specifies a life-long condition.

As noted at **Bacterial Meningitis**, entering college students must also, with limited exception, furnish evidence of having received a bacterial meningitis vaccination within the five years prior to enrolling in and attending classes at an institution of higher education. A student wanting to enroll in a dual credit course taken off campus may be subject to this requirement. [For further information, see policy FFAB (LEGAL) and the TDSHS

Website:[**http://www.dshs.state.tx.us/immunize/school/default.shtm**](http://www.dshs.state.tx.us/immunize/school/default.shtm).]

**MEDICINE AT SCHOOL**

The District will not purchase medication to give to a student. District employees will not give a student prescription medication, nonprescription medication, herbal substances, anabolic steroids, or dietary supplements, with the following exceptions:

Only authorized employees, in accordance with policy FFAC, may administer:

* Prescription medication, in the original, properly labeled container, delivered to the clinic by the parent, along with a written request.
* Prescription medication from a properly labeled unit dosage container filled by a registered nurse or another qualified District employee from the original, properly labeled container.
* Nonprescription medication, in the original, properly labeled container, delivered to the clinic by the parent along with a written request.
* Herbal or dietary supplements delivered to the clinic by the parent only if required by the student’s individualized education program (IEP) or Section 504 plan for a student with disabilities.

A student with asthma or severe allergic reaction (anaphylaxis) may be permitted to possess and use prescribed asthma or anaphylaxis medication at school or school-related events only if he or she has written authorization from his or her parent and a physician or other licensed health-care provider. The student must also demonstrate to his or her physician or health-care provider and to the school nurse the ability to use the prescribed medication, including any device required to administer the medication.

If the student has been prescribed asthma or anaphylaxis medication for use during the school day, the student

 and parents should discuss this with the school nurse or principal.

In accordance with a student’s individual health plan for management of diabetes, a student with diabetes will be permitted to possess and use monitoring and treatment supplies and equipment while at school or at a school-related activity. See the school nurse or principal for information. [See policy FFAF (LEGAL).]

**PSYCHOTROPIC DRUGS**

A psychotropic drug is a substance used in the diagnosis, treatment, or prevention of a disease or as a component of a medication. It is intended to have an altering effect on perception, emotion, or behavior and is commonly described as a mood- or behavior-altering substance.

Teachers and other District employees may discuss a student’s academic progress or behavior with the student’s parents or another employee as appropriate; however, they are not permitted to recommend use of psychotropic drugs. A District employee who is a registered nurse, an advanced nurse practitioner, a physician, or a certified or credentialed mental health professional can recommend that a student be evaluated

by an appropriate medical practitioner, if appropriate. [For further information, see policy FFAC.]

**PHYSICAL ACTIVITY FOR STUDENTS IN ELEMENTARY AND MIDDLE SCHOOL**

In accordance with policies at [EHAB, EHAC, EHBG,and FFA], the District will ensure that students in full-day prekindergarten through grade five engage in moderate or vigorous physical activity for at least 30 minutes

per day or 135 minutes per week.