

Dear Parent,

Greetings from the office of the School Nurse! As we look forward to another school year, I would like to introduce myself; I am Lorraine Townsley, the school nurse at Mac-A-Cheek Learning Center. My first concern is your child's health and well-being. I am available for approximately six hours each school day. If you have health concerns about your child or feel that he/she has a medical problem that will affect his/her ability to learn in the classroom please contact me at any time.

In your packet of information you will find the following medical form that is required for all students:

Emergency Medical Form

It is important to fill out this form completely so your child can be better served by the school and treated appropriately in the case of a medical emergency. I appreciate your help in better serving your child.

I wanted to take this opportunity to remind you of the school's position on

Medication Administration:

Whenever possible, medication should be administered at home. Mac-A-Cheek Learning Center acknowledges that it may be unavoidable for students to take medication during school hours. In order for prescription and non-prescription medications to be administered by the school nurse, an authorization must be on file in the school's health office. The parent and doctor must sign this authorization. All prescription medications must be in an appropriately labeled pharmacy container and non-prescription medications must be in the original container, which clearly identifies the medication. Medication will be kept in a locked cabinet in the health office. You can obtain the appropriate form to have your child receive medication at school by sending a note to their teacher or by calling me at the phone number below.

Illness:

To help you determine if your ill child should come to school or not, I've placed a guideline on the back of this note, "**When is my child sick enough to stay home from school?**" Hopefully it helps you make those tough decisions regarding your child's health.

If you have any questions, please contact me at the school, Monday through Friday, between 9:00am-2:00pm, at 937-404-1263.

Mac-A-Cheek Learning Center

1130 W. Sandusky Ave., Bellefontaine, OH 43311
 Phone - 937-404-1263 Fax - 937-292-7035

EMERGENCY MEDICAL FORM

(Ohio Revised Code 3313.712)

COMPLETE BOTH SIDES OF FORM

Student's Name	Date of Birth
Student's Address	City Zip
Responsible Adult Student Lives with (please Circle)	
Mother & Father Mother Only Father Only Mother & Step-Father Father & Step-Mother Foster Parent Other: _____	

PLEASE INDICATE PARENT(S), PERSON(S) OR GOVERNMENT AGENCY HAVING LEGAL OR PERMANENT CUSTODY OF THIS STUDENT STUDENT'S GUARDIAN WILL BE CONTACTED FIRST. (PLEASE PROVIDE INFORMATION FOR BOTH PARENTS FOR THIS STUDENT) (FOR STUDENTS IN FOSTER CARE PLEASE LIST THE AGENCY WHO HAS LEGAL CUSTODY AND FOSTER PARENTS)

Name(s)	Relationship to Student
Home Address	City Zip
Home Phone	Work Phone Cell Phone Email

Name(s)	Relationship to Student
Home Address	City Zip
Home Phone	Work Phone Cell Phone Email

Emergency Contacts - In the event we are unable to contact the student's guardian please list the first and last name of other persons who have authority to make decisions in an emergency situation involving this student. List in the order you desire contact attempts to be made based on availability. List the relationship of each contact to the student. (aunt, grandparent, friend, etc.). These contacts will also have permission to pick your child up from school.

Relationship to Student	Name	Home Phone	Work Phone	Cell Phone

COMPLETE ONLY ONE OF THE FOLLOWING: SECTION I - Consent for Treatment or SECTION II - Refusal to Consent for Treatment

SECTION I - Consent for Treatment

I hereby give consent for the following medical care providers and local hospital to be called:

Physician:	Office Phone:
Dentist:	Office Phone:
Medical Specialist:	Office Phone:
Hospital:	Emergency Room Phone:

And in the event reasonable attempts to contact me have been unsuccessful, I hereby give my consent for (1) the administration of any treatment deemed necessary by the preferred practitioner indicated or the event the designated preferred practitioner is not available by another licensed physician or dentist and (2) The transfer of the child listed to any hospital reasonably accessible. This authorization does not cover major surgery unless the medical opinions of two licensed physicians or dentists concurring in the necessity for such surgery are obtained prior to the performance of such surgery.

Parent/Guardian Signature : _____

Date: _____

SECTION II - Refusal to Consent for Treatment

I do not give my consent for emergency treatment of my child. In the event of illness or injury requiring emergency treatment, I wish the school authorities to take the following action(s):

Parent/Guardian Signature : _____

Date: _____



Tips for Parents from the School Health Office

Many parents ask,

“When is my child sick enough to stay home from school?”

This is not always an easy question to answer! We hope that these tips can help!

A child who is sick will not be able to perform well in school and is likely to spread the illness to other children and staff. We suggest making a plan for childcare ahead of time so you will not be caught without a comforting place for your child to stay if he/she is ill.

Our school policy states that you should not send your child to school if he/she has:

- Fever over 100 ° in the last 24 hours
- Vomiting in the last 24 hours
- Diarrhea in the last 24 hours
- Chills
- Sore throat
- Strep Throat (must have been taking an antibiotic for at least 24 hours before returning to school)
- Has a very runny nose or bad cough, especially if it has kept the child awake at night
- Head lice – until your child has been treated according to the nurse or doctor’s instructions

If your child becomes ill at school and the teacher or school nurse feel the child is too sick to benefit from school or is contagious to other children, you will be called to come and take him/her home from school. It is essential that your child’s teacher have a phone number where you can be contacted during the day and an emergency number in the event you cannot be reached. Please be sure that arrangements can be made to transport your child home from school and that childcare is available in case of illness. If your daytime or emergency phone number changes during the year, please notify your child’s teacher immediately.

Please call the school’s Health Office if you have any questions or concerns.

Lorraine Townsley, School Nurse