Rachel Howard, RN, BSN, MSN District Health Coordinator Catalina Foothills School District



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# Welcome To Catalina Foothills School District

#### **CFSD Health Services**

Welcome to our new and returning CFSD students and families! As you may already know, we take pride in our district and are committed to the health and safety of our students. Here are a few reminders for the upcoming school year:

- Please notify your school Registered Nurse or Health Assistant if your student has any
  medical history, chronic health condition or allergies (e.g., food, latex, etc.) that may affect
  them while at school. We may need to make an appointment to establish appropriate
  individualized health plans.
- **MEDICATIONS**: We carry acetaminophen (Tylenol), ibuprofen (Advil), and antacid (TUMS). We also have cough drops available for high school students only. When you use our online system to register your child you will have the option to check the boxes for the above medications so that they may or may not be given during the school year, if needed.
  - For any over-the-counter medications other than those listed above, you will need a completed *Medication Administration Consent* form signed by the child's medical provider and parent. This allows the medication to be administered by staff on campus. Any over-the-counter medications or supplements that will be administered at school must be kept in the original containers. Ziplocs and pill boxes are not acceptable.
  - For prescribed medications that will need to remain in the Health Office please be sure
    they are in the medication bottle with a current pharmacy label attached with the correct
    dosing. You will have the option to enter prescribed medications while registering online.
    For any that are added at a later date we will need a *Medication Administration Consent*form signed by the <u>parent/guardian</u>.

## • HEALTH FORMS need to be updated YEARLY:

- o *Health Information and Emergency Contact information.* This should be updated annually to notify health staff of any changes in conditions and current health and emergency contact information.
- Medication Administration Consent form. Complete this form for any over-thecounter medication or new prescription medication that will need to be kept in the school Health Office and administered on campus.
- o *FARE form.* We require this form for any student with a severe allergy that may cause anaphylaxis and would require the administration of an Epinephrine Pen.
- Permission to Carry Medications for Self-Administration Consent. This allows students
  to carry rescue inhalers, epi-pens, or diabetic supplies. These are the ONLY
  medications a student can carry on campus and self-administer. Please provide an
  original copy of the doctor's order or pharmacy attached label.
- o \*Other forms are available on our district website under health services, or ask your school nurse or health assistant for a copy. Examples include Asthma Action Plan, Seizure Action Plan, Diabetes Action Plan, etc.

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#### • IMMUNIZATIONS:

- Proof of required immunizations must be provided in order to attend school. You
  will be able to enter these during online registration. If we find a discrepancy in
  immunizations we may ask for a hard copy. The list of immunizations that the state
  of Arizona requires can be found <u>HERE</u>.
- Exemptions are available for specific circumstances. The Arizona Department of Health Services recommends that all students attending school should receive required vaccinations to decrease the outbreak of preventable diseases.
- Records must be from a clinic or medical provider's office and include the name of the vaccine, date given, and name of clinic and/or medical provider. We also will accept a completed Arizona School Immunization Record (ASIR).

## • ILLNESS AND/OR INJURY:

- Please contact your school health office regarding questions related to illness and attending school.
- Does your child require assistance or health equipment during the school day?
   Please notify your Health Office so our team can assist with these accommodations.

# • HEARING/VISION SCREENING:

- Certified Health Office staff will conduct hearing screening within 45 calendars days from the start of school. Screening rules are updated annually by the Arizona Department of Health Services (ADHS). Parents/legal guardians may opt out of hearing screening but we require signed documentation to do so. Please contact your school health office for the declination form.
- We conduct hearing and vision screening together at the same day and time. Not all grades will receive screening, you can check with the health office if you would like more information.

We are looking forward to a safe and successful year!

Sincerely,

Catalina Foothills School District

Health Services Team