

I. ILLNESSES.

Your child should be kept home from school, or will be sent home from school, if he/she has any of the following symptoms:

- (1) Temperature of 100 degrees or more;
- (2) Vomiting or diarrhea;
- (3) Persistent cough or thick nasal drainage; or
- (4) Conjunctivitis (pink eye).

Your child will be sent home from school if he/she appears ill even when the above symptoms are not evident.

II. COMMUNICABLE/INFECTIOUS DISEASES.

The School should be notified as soon as possible if your child has been diagnosed as having:

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| (1) encephalitis | (9) tuberculosis | 17) pediculosis (lice) |
| (2) food poisoning | (10) chickenpox | (18) pneumonia |
| (3) hepatitis | (11) diarrheal disease | (19) ringworm |
| (4) measles (9 day) | (12) Fifth disease | (20) scarlet fever |
| (5) meningitis | (13) impetigo | (21) strep throat |
| (6) pertussis (whooping cough) | (14) influenza | (22) mites, scabies or fleas |
| (7) rubella (German measles) | (15) mononucleosis | (23) conjunctivitis |
| (8) tetanus | (16) mumps | (24) coxsackie (hand foot & mouth) |
| | | (25) pinworms |

All schools in Allegheny County are required to report to the Allegheny County Health Department any incidences of any of the diseases listed in numbers 1 through 21 above. The School will notify you of incidences of the above communicable/infectious diseases.

III. INJURIES/ILLNESSES OCCURRING AT SCHOOL.

A. Minor Injuries/Illnesses.

In the event that a child sustains a minor injury (e.g., a skinned knee, bloody nose, etc.), or complains of a minor illness (e.g., nausea, sore throat, etc.) the School will note the child's condition and /or the circumstances surrounding the injury or illness on the attached form titled "Injury/Illness Report". One copy of the form will be retained by the School and another copy will be sent home with the child. In addition, first aid (such as, ice, rest, antibacterial ointments, etc.) will be administered to your child, if needed.

B. Serious Injuries/Illnesses.

In the event that neither parent can be contacted in the case of serious injury or illness, (i.e., an injury or illness which requires immediate medical treatment), the School will secure **emergency** medical treatment for your child. Each child's parent must complete the attached form, titled "Emergency Medical Authorization Form".

IV. MEDICATION POLICY.

Except as provided below, all prescription and non-prescription medicines must be administered at home, or by the parents or guardian at school, if the medicine must be administered during school hours.

In the event that a child has a known medical condition which may require that medicine be given to the child on an emergency basis (e.g., anaphylactic shock due to an allergic reaction, asthma attack, diabetic-related complications, etc.) the following procedures must be followed:

- (1) The parent or guardian shall assume full responsibility for any medication sent to school.
- (2) The medication is to be in its original pharmacy container.
- (3) The medication must be accompanied with detailed written instructions indicating when the condition merits the administration of the medicine, the dosage to be given, how the medicine to be given, any side effects of the medicine, and the storage requirements of the medicine. Such instructions must be signed by the physician prescribing the medicine and must include the physician's address and telephone number. In addition, the instructions must be communicated orally in a meeting with the parents or guardian and all Staff who may have contact with the child.
- (4) The parent or guardian must provide the School with a current list of all other medications the child is taking.
- (5) As soon as it becomes evident that the child will require the medicine, emergency medical personnel will be called.
- (6) The parents or guardian must execute the attached hold harmless agreement which provides that the School, the Unitarian Universalist Church, their agents or representatives shall not be legally liable for the consequences (such as, aggravating the disorder or causing other disorders) of exercising its judgment in whether or not to administer the medication.
- (7) It is the sole responsibility of the parent or guardian to ensure that the medicine is current and has not expired, to communicate any changes in the physician instruction sheet to the School, and to submit a revised and updated instruction sheet to the School.

HEALTH FORM AND VACCINATION POLICY

Bellwood Preschool requires that all students fill out and return the student health form no later than September 15th of the current school year. All vaccinations are required to be up to date and that portion of the health form is required to have a physician's signature. If your child is not vaccinated prior to the start of school please contact the Director of Bellwood. Failure to return the student health form may result in the child being prohibited from returning to school until the health form is returned. If a child is allergic to any food or substance, requires medication or has any communicable disease the parents are required to notify the Director of Bellwood prior to the start of that school year.

Please call the school at 412.366.3812 if your child will be absent for more than one day.