

STAUNTON COMMUNITY UNIT SCHOOL DISTRICT NO. 6

801 North Deneen St. · Staunton, IL 62088
(618) 635-2962 · Fax (618) 635-2994 · www.stauntonschools.org

Staunton Community Unit School District #6 Expects Everyone's Best
**LEAD *CHALLENGE *ACHIEVE*

Medication Policy and Procedures:

When absolutely necessary, students may require medication during school hours. Staunton CUSD#6 has policies and procedures in place to allow for this to happen safely. If your child needs to take medication at school, please contact the school nurse at (618) 635 – 2962 x 253. There are medication order forms that must be completed and turned in. In accordance to School Board policy 7:720, **Physician orders are required for all medicine administered at school, including over-the-counter(OTC) medicines such as Tylenol and Ibuprofen.** Parents/guardians are responsible for obtaining the physician's order and returning it and the medication to school.

- The medicine must be brought to school in the original bottle/container(OTC) or with a pharmacy label (for prescription medications). Students should not transport their own medication, for safety reasons a parent/guardian should perform this task.
- All medication(s) are to be stored in a locked cabinet. A refrigerator is available if required.
- At the end of the year or medication regime, it is the parent/guardian's responsibility for removing the unused medication from the school. If the parent/guardian does not pick up the medication, the school nurse will dispose of the medication.
- New medication forms must be filled out each year.
- Students are not allowed to carry any medication on them at any time. The only exceptions to this are inhalers, epi-pens, and diabetes supplies/medications. There are special forms for students to carry these medications. These forms are available from the school nurse. A physician's signature is not required for students carrying and administering their own asthma inhalers, although an Asthma Action Plan should be on file. For all students with a diagnosis of asthma, a new Asthma Action Plan should be completed by the physician and turned in to the school nurse yearly.
- Schools are required to follow Illinois licensing laws as well as Illinois School Code when administering medicine for the safety of your child and others.
- See Staunton CUSD #6 handbook (page 35) for additional policy information under Administering Medicines to Students (School Board Policy 7:270)
 - According to School Board policy 7:270, Students should not take medication during school hours or during school-related activities unless it is necessary for a student's health and well-being. When a student's licensed health care provider and parent(s)/guardians(s) believe that it is necessary for the student to take a medication during school hours or school-related activities, the parent/guardian must request that the school dispense the medication to the child and otherwise follow the District's procedures on dispensing medication. No School District employee shall administer to any student, or supervise a student's self-administration of, any prescription or non-prescription medication until a completed and signed "School Medication Authorization Form" is submitted by the student's parent(s)/guardian(s).

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dcox@stauntonschools.org

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BRETT T. ALLEN
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REQUEST FOR THE ADMINISTRATION OF MEDICINE

STUDENT'S NAME: _____ Date of Birth: _____

School: _____ Grade / Teacher: _____

PART I – LICENSED PRESCRIBER'S AUTHORIZATION

1. Name / type of medication: _____
2. Dosage / amount to be given: _____
3. Route of administration: _____
4. Frequency and time of administration: _____
5. Duration (week, month, indefinite, etc.): _____
6. Diagnosis a) _____
b) _____
7. Intended effect, and anticipated reaction to medication:
a) _____
b) _____
8. Other medication child receives: _____
9. Other requirements: _____

Licensed Prescriber's Signature (required) Date Signed

(Print) Licensed Prescriber's Name

PART II – PARENT'S REQUEST / APPROVAL

I, _____, hereby request and grant permission for Staunton CUSD#6 school nurse or trained personnel to administer above stated medication to my child. (Medication will be stored in locked medication cabinet.)

I understand that an individual other than a school nurse may perform this administration, and I specifically consent to this. I further waive any claims against Staunton CUSD#6, members of the Board of Education, its employees, and / or agents arising out of the administration of said medication and agree to hold harmless and indemnify the School District, the members of the Board of Education, its employees, and / or agents, from and against any and all liability, claims, demands, damages, or causes of action or injuries, costs, and expenses, including attorney fees, resulting from or arising out of the administration, or self-administration of medication to my child.

I may be reached at the following phone # in the event of a reaction to the medication or an emergency:

Parent/Guardian (s) Signature _____ Phone # _____ Date _____

School Nurse Signature _____ Date Received _____

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NINTH GRADE MEDICAL REQUIREMENTS

Welcome to high school! In order for your child(ren) to be compliant with The Illinois Department of Public Health's (IDPH) Immunization requirements he/she will require the following:

- Physical Exam completed on State Physical(DHS) form not IHSA(sports) form
- Diabetes screening (questionnaire on back of physical form to be completed by physician)

Your child may have had the following vaccinations already however updated immunization records need to be sent for confirmation:

- Tdap vaccination (New law in 2011- For Students entering 6-12th grades: One dose of Tdap)
- Varicella (Chickenpox - 2 doses - new law 2014)

The ninth grade school physical may be used as a sports physical during the sixth grade school year. Please duplicate your child's physical for coaches and return the original physical to the school nurse. It is also advisable to make a copy of the physical and keep it for your records.

STUDENTS WHO ARE NON-COMPLIANT WILL BE EXCLUDED ON OCTOBER 15TH

- Questions? Please contact the school nurse at 618.635.3831 x 253
- Completed documents may be faxed to 618.635.4637
- Please remember to notify the nurse of any significant health problems your child may have. We aim to keep our students safe and taken care of.
- If your child requires medication during the school hours, a medication authorization form with a physician's signature will be required before it can be administered at school.

Thank you,

Alisa Hughes BSN, RN

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SENIOR HEALTH REQUIREMENT

Welcome to senior year! According to the Centers of Disease Control and Public Act 90-060, a law is in effect that requires students entering 6th and 12th grade of any public, private, or parochial school, to receive an immunization containing meningococcal conjugate vaccine(MCV4). This does not require your child to have a new physical (unless they are playing sports). The immunization requirement consists of one dose of vaccine for 6th grade entrance and two doses for 12th grade entrance, unless the first dose was administered to a child who was 16 years of age or older, in which case only one dose would be required at 12th grade entrance.

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**Minimum Immunization Requirements Entering a Child Care Facility or School in Illinois, Fall-2017
Footnotes for Further Guidance**

Vaccine Requirement ¹	Child Care Facility, Preschool, Early Childhood, Pre-Kindergarten Programs	Kindergarten through 12th Grade		Minimum Intervals Allowed Between Doses and Other Options for Proof of Immunity ²
		First Entry into School (Kindergarten or First Grade)	Other Grades	
DTP/DTaP/ or Tdap, Td (Diphtheria, Tetanus, Pertussis)	Three doses of DTP or DTaP by 1 year of age. One additional booster dose by 2nd birthday	Four or more doses of DTP/DTaP with the last dose qualifying as a booster and received on or after the 4th birthday	Three or more doses of DTP/DTaP or Td; with the last dose qualifying as a booster if received on or after the 4th birthday For Students entering 6th thru 12th grades: One dose of Tdap	Minimum interval between series doses: 4 weeks (28 days) Between series and booster: 6 months No proof of immunity allowed
Polio	Two doses by 1 year of age. One additional dose by 2nd birthday	Four or more doses of the same type of Polio vaccine with the last dose qualifying as a booster and received on or after the 4th birthday. (progressive requirement)	Three or more doses of Polio with the last dose qualifying as a booster and received on or after the 4th birthday. If the series is given in any combination of polio vaccine types, four or more doses are required with the last being a booster on or after the 4th birthday.	Minimum interval between series doses: 4 weeks (28 days) For Grade K: 6 month interval between three dose series and booster; booster must be on or after 4th birthday No proof of immunity allowed
Measles	One dose on or after the 1st birthday	Two doses of Measles Vaccine, the first dose must have been received on or after the 1st birthday and the second dose no less than 4 weeks (28 days) later.		Laboratory evidence of measles immunity or Certified physician verification* of measles disease by date of illness *Cases diagnosed after 7/1/2002 must include lab evidence of infection.
Rubella	One dose on or after the 1st birthday	Two doses of Rubella Vaccine, the first dose must have been received on or after the 1st birthday and the second dose no less than 4 weeks (28 days) later.		Laboratory evidence of rubella immunity, History of disease is not acceptable proof of immunity to rubella.
Mumps	One dose on or after the 1st birthday	Two doses of Mumps Vaccine, the 1st dose must have been received on or after the first birthday and the second dose no less than 4 weeks (28 days) later.		Laboratory evidence of mumps immunity or Certified physician verification of mumps disease by date of illness.
Haemophilus influenzae type b	Refer to ACIP Hib series schedule for Children 24-59 mos. Children without series must have one dose after 15 mos. of age	Not required after the 5th birthday (60 months of age)		Refer to ACIP Hib series schedule No proof of immunity allowed

1. Students attending ungraded school programs must comply in accordance with grade equivalent.

2. Within ACIP recommendations, vaccine doses given up to four days before minimum interval or age can be counted as valid. However, this does not apply to intervals between live vaccines. Live vaccines shall not be given fewer than 28 days after receipt of a prior live vaccine.



Minimum Immunization Requirements Entering a Child Care Facility or School in Illinois, Fall-2017
Footnotes for Further Guidance

Vaccine Requirement ¹	Child Care Facility, Preschool, Early Childhood, Pre-Kindergarten Programs	Kindergarten through 12th Grade		Minimum Intervals Allowed Between Doses and Other Options for Proof of Immunity
		First Entry into School (Kindergarten or 1st Grade)	Other Grades	
Pneumococcal Conjugate Vaccine (PCV 13)	Refer to ACIP PCV series schedule for Children 24-59 mos. Children without series must have one dose after 24 months of age.	Not required after the 5th birthday (60 months of age)		Refer to ACIP PCV series schedule No proof of immunity allowed
Hepatitis B	Three doses for all children Third dose must have been administered on or after 6 months of age (168 days)	No Requirements	For Students entering grades 6 thru 12: Three doses hepatitis B vaccine administered at recommended intervals. Two doses Adult Recombivax-HB vaccine for ages 11 to 15.	Minimum intervals between doses: First & Second - at least 4 weeks (28 days) Second & Third - at least 2 months (56 days) First & Third - at least 4 months (112 days) Adult Recombivax-HB two doses separated by 4 months (112 days)
Varicella (progressive requirement)	One dose on or after 1st birthday	Two doses of Varicella; The first dose must have been received on or after the 1st birthday and the second dose no less than 4 weeks (28 days) later.	One dose of Varicella on or after the 1st birthday for Students entering grades 4 & 5 Two doses of Varicella for Students entering grades 2, 3, 6, 7, 8, 9, 10, 11 & 12. Applies to Students entering grades 6, 7, 8, & 12 beginning 2017-2018 school year	Minimum intervals for administration: The first dose must have been received on after the 1st birthday and the second dose no less than 4 weeks (28 days) later. Statement from physician or health care provider verifying disease history OR Laboratory evidence of varicella immunity
Meningococcal Conjugate Vaccine (progressive requirement)	No Requirements	No Requirements	One dose of Meningococcal Conjugate vaccine for entry to grade 6, 7, & 8 Two doses of Meningococcal Conjugate vaccine at entry to 12th grade	Minimum intervals for administration: The first dose received on or after the 11th birthday; second dose on or after the 16th birthday. An interval of least eight weeks after the first dose. Only one dose is required if the first dose was received at 16 years of age or older. No proof of immunity allowed.

Source: Child and Student Health Examination and Immunization Code/Part 665
 Prepared by Illinois Department of Public Health, Immunization Section April, 2017