

<p align="center"><b>DANBURY PUBLIC SCHOOLS</b> Danbury, Connecticut</p>	<p align="center"><b>REGULATIONS</b></p>	
<p align="center"><i><b>HEALTH SERVICES</b></i></p>	<p>Reviewed: 2/13/08</p>	<p>Policy No. 7-106  Page</p>
<p><b>I. <u>IMMUNIZATIONS</u></b></p> <p>A. Immunizations are regulated by State of Connecticut Department of Health, CT-General Statutes 10-204a</p> <p>B. A student must provide evidence of immunization requirements being satisfactory met prior to enrollment in a public or non-public school.</p> <p>1. <b><u>Measles</u></b> – an individual shall be considered adequately immunized if that individual:</p> <p>a. is enrolled in preschool and is less than four (4) years of age and was immunized by use of live attenuated measles vaccine on or after that individual’s first birthday <b>or</b></p> <p>b. is or has been enrolled in kindergarten on or after August 2000 and was immunized against measles by use of two (2) doses of a live attenuated measles vaccine given at least thirty (30) days apart, the first on or after that individual’s first birthday <b>or</b></p> <p>c. is or has been enrolled in seventh grade after September 1992 and had two (2) doses of a live attenuated measles vaccine, the first on or after that individual’s first birthday <b>or</b></p> <p>d. has had protection against measles confirmed in writing by a physician, physician assistant or advanced practice registered nurse based on specific blood testing by a certified laboratory.</p> <p>2. <b><u>Rubella</u></b> – An individual shall be considered adequately immunized if that individual:</p> <p>a. was immunized at one (1) year or older with a rubella vaccine <b>or</b></p> <p>b. has had protection against rubella confirmed in writing by specific blood testing conducted by a certified laboratory</p> <p>3. <b><u>Mumps</u></b> – An individual shall be considered adequately immunized if that individual:</p> <p>a. was immunized at one (1) year of age or older with live mumps vaccine <b>or</b></p> <p>b. has protection against mumps confirmed in writing by a physician based on specific blood testing by a certified laboratory</p> <p>4. <b><u>Diphtheria, Tetanus, Pertussis (DTP)</u></b> – an individual shall be considered adequately immunized if that individual:</p> <p>a. is eighteen to seventy-one (18-71) months of age and was immunized with a minimum of four (4) doses of diphtheria, tetanus, and pertussis toxoid, three (3) doses given at a minimum of</p>		

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<p>four (4) week intervals followed by a fourth DTP dose at least six (6) months after the third <b>or</b></p> <p>b. is forty eight (48) to seventy-one (48-71) months of age and enrolled in grade kindergarten and above, at least one (1) dose of DTP vaccine must have been given on or after the fourth birthday <b>or</b></p> <p>c. is seventy-two (72) months of age or older and was immunized with a minimum of two (2) doses of tetanus, diphtheria toxoid (td) at a minimum of four (4) week intervals, followed by a third dose of tetanus, diphtheria toxoid at least six (6) months after the second dose and on or after the fourth birthday</p> <p>5. <b><u>Poliomyelitis</u></b> – an individual shall be considered adequately immunized if that individual:</p> <p>a. is eighteen (18) months of age or older and has had a minimum of (3) doses of either trivalent oral polio vaccine (TOPV) or inactivated polio vaccine (IPV), two (2) doses of polio vaccine given at least four (4) weeks apart and a third dose given at least two (2) months after the previous dose <b>or</b></p> <p>b. is enrolled in grade kindergarten through twelve (12) and at least forty-eight (48) months of age, at least one (1) dose of polio vaccine must have been given on or after the fourth birthday</p> <p>6. <b><u>Hepatitis B (HBV)</u></b> – an individual shall be considered adequately immunized if that individual:</p> <p>a. was born January 1, 1994 or later and was immunized with three (3) doses of Hepatitis B vaccine, as follows two (2) doses given at least four (4) weeks apart followed by a third dose at least (4) months after the second <b>or</b></p> <p>b. was born before January 1, 1994, and enrolled in seventh ( ) grade in August 2000 or later and was immunized with at least one (1) dose of Hepatitis B vaccine at the time of seventh ( ) grade entry <b>or</b></p> <p>c. was born before January 1, 1994 and enrolled in eighth ( ) grade in August 2001 or later was immunized with at least three (3) doses of Hepatitis B vaccine, two (2) doses given at least four weeks apart followed by a third dose at least four (4) months after the second <b>or</b></p> <p>d. has had protection against Hepatitis B confirmed in writing by specific blood testing conducted by a certified laboratory</p> <p>7. <b><u>Varicella</u></b> - an individual shall be considered adequately protected against varicella if that individual:</p>		

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<p>a. was born January 1, 1997 or later and was immunized with one (1) dose of varicella vaccine on or after that individual's first birthday and before that individual's thirteenth birthday or two (2) doses of varicella vaccine given at least four weeks apart if the first dose was given on or after the individual's thirteenth birthday</p> <p align="center"><b>or</b></p> <p>b. was born before January 1, 1997 and is enrolled in seventh ( ) grade in August 2000 or later and was immunized with one (1) dose of varicella vaccine on or after that individual's first birthday and before that individual's thirteenth birthday or two(2) doses of varicella vaccine given at least four weeks apart if the first dose was given on or after the individual's thirteenth birthday</p> <p align="center"><b>or</b></p> <p>c. has a written statement signed and dated by a physician, physician assistant or advanced practice registered nurse indicating that the individual has already had varicella based on family and/or medical history</p> <p align="center"><b>or</b></p> <p>d. has had protection against varicella confirmed in writing by specific blood testing conducted by a certified laboratory</p> <p>8. <b><u>Hemophilus influenzae Type b (Hib)</u></b> - an individual shall be considered adequately immunized if that individual:</p> <p>a. was immunized before age five (5) years with a single dose of Hib vaccine given at age twelve (12) months or older</p> <p align="center"><b>or</b></p> <p>b. is currently age five (5) years or older</p> <p align="center"><b>or</b></p> <p>c. had a natural laboratory confirmed infection with hemophilus influenzae type b at age twenty-four (24) months or older confirmed in writing by a physician.</p> <p>9. <b><u>Religious exemption.</u></b> Any individual whose parents or guardian presents a statement that such immunization is contrary to the religious beliefs of such child is exempted from immunization requirements.</p> <p>10. In those instances at school entry where a school-aged child is not adequately immunized school attendance shall be permitted only if that child:</p> <p>a. has received a dose of each required vaccine for which that child is behind in the month prior to first attendance; and</p> <p>b. continues on the approved schedule until adequately immunized.</p>		

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**II. HEALTH ASSESSMENTS**

- A. During the registration of all students new to the Danbury Public Schools, parents or guardians will be advised that the Connecticut General Statutes and Danbury Board of Education policy requires a health assessment prior to attending school.
  - 1. Health assessment requirements are satisfactorily met if:
    - a. a parent or guardian provides proof that a health assessment has been done within a 12 month period prior to attending school, fulfilling all mandated procedures.
    - b. A parent or guardian presents evidence that the student has been enrolled in another school within the United States and has fulfilled all the mandated health assessment requirements.
  
- B. In addition to the initial enrollment, the Danbury Board of Education requires each pupil enrolled in public schools to have a health assessment in grades Kindergarten, sixth and ninth.
  - 1. In March and again in June, prior to the summer recess, letters will be sent to all parents and guardians of students in grade five and grade eight advising them that:
    - a. a health assessment is required by law and Board Policy for all students entering grade 6 and grade 9.
    - b. health assessments should be completed and forms returned to the school nurse no later than the start of the and grade year.
    - c. if a student has had a health assessment done within a 12 month period prior to the opening of school, said assessment will be acceptable if all mandated procedures are fulfilled.
    - d. if they meet specified financial criteria and are unable to access a health assessment through a community health resource, they would be eligible for a free health assessment for their child, performed by the school physician/or his/her designee.
    - e. parents or guardians who are financially eligible for a free health assessment performed by the school physician/or his/her designee will be required to sign a permission form for the assessment, and also given a reasonable opportunity to be present for said examination.

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<p>f. parents or guardians who do not meet the financial criteria, or do not elect to have a free health assessment, must obtain it from their private medical provider prior to the deadline at no expense to the Danbury Board of Education.</p> <p>C. Failure of students to satisfy the 6th or 9th grade health assessment requirements within that school year shall result in a recommendation for exclusion.</p> <p>1. Parents or guardians of students being considered for exclusion from school due to failure to meet health assessment requirements shall be notified in writing by the school principal that they must comply with the law within a 20 school day period and that failure to complete required health assessment components within this period shall result in a written recommendation to the Superintendent for exclusion of the child from school. This recommendation for exclusion may be upheld in writing in a letter to the parent by the Superintendent of Schools. Parents of such students may request an administrative hearing of a health- assessment-related exclusion recommendation within five days of the notice of intent to exclude. An administrative hearing by the Board of Education shall be conducted and a decision rendered within 10 school days after receipt of request.</p> <p>2. Readmission to school will be dependent on parents or guardians providing satisfactory evidence to the school principal, through school health personnel, that the health assessment requirements have been met, or in response to the Board of Educations administrative hearing decision. Notification will be made by the Principal of the school to the Superintendent of Schools regarding the readmission of any student following a health assessment related exclusion.</p> <p>D. If an abnormal medical finding is identified during a free school health assessment, a written notification will be sent by the Superintendent of Schools to the parent or guardian with a brief written description of finding. School health personnel will make a reasonable effort to determine if necessary treatment has been obtained, and if not, advise parent or guardian on how such treatment may be obtained.</p> <p>E. The results of the health assessment and any necessary follow-up will be recorded on forms distributed by the State Board of Education and signed by a physician, APRN or P.A.</p> <p>F. Health assessment requirements include the following mandated procedures:</p> <table border="0" data-bbox="358 1633 1239 1818"> <tr> <td>1. Hemoglobin or Hematocrit</td> <td>6. Gross Dental</td> </tr> <tr> <td>2. Height &amp; Weight Screening</td> <td>7. TB Risk Assessment</td> </tr> <tr> <td>3. Blood Pressure</td> <td>8. Postural Screening</td> </tr> <tr> <td>4. Vision Screening</td> <td>9. Immunization</td> </tr> <tr> <td>5. Audiometric Screening</td> <td>(update &amp; record dates)</td> </tr> <tr> <td></td> <td>10. Chronic Disease Assessment</td> </tr> </table>			1. Hemoglobin or Hematocrit	6. Gross Dental	2. Height & Weight Screening	7. TB Risk Assessment	3. Blood Pressure	8. Postural Screening	4. Vision Screening	9. Immunization	5. Audiometric Screening	(update & record dates)		10. Chronic Disease Assessment
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<p>G. If the findings of a health assessment indicates a possible need for the modification of a student's educational program, appropriate personnel will be notified.</p> <p><b>III. <u>VISION SCREENING</u></b></p> <p>A. Vision screening shall be done for all students in Kindergarten, grade 1-6 inclusive, and grade 9.</p> <ol style="list-style-type: none"> <li>1. Vision screening will be done by school health personnel, in a well lighted area on a Snellen chart or equivalent screening devise.</li> <li>2. A pupil who fails to read with either eye one more than half of the symbols on the 20/30 line in Kindergarten through grade 3, or fails to read one more than half of the symbols on the 20/20 line in grades 4 and above, or in any grade is found to have a one line discrepancy between the two eyes shall be found to have a defect in vision or disease of the eye(s).</li> <li>3. If a student is found to have a defect of vision when tested on equipment other than the Snellen chart, they shall be retested on the Snellen chart to confirm possible visual defect.</li> <li>4. The Superintendent of Schools shall give written notice to the parent or guardian of each pupil who is believed to have a defect in vision or disease of the eye(s) with a brief statement describing such defect or disease.</li> <li>5. School health personnel shall make reasonable effort to determine whether the parent or guardian has obtained the necessary testing and/or treatment for the pupil; if not, they shall advise the parent or guardian to how such testing and/or treatment may be obtained.</li> <li>6. Results of all testing and treatment shall be recorded on the student's cumulative health record after being reviewed by school health personnel.</li> <li>7. If findings of screenings indicate a possible need to modify a pupil's educational program, appropriate personnel will be notified.</li> </ol> <p><b>IV. <u>AUDIOMETRIC SCREENING</u></b></p> <ol style="list-style-type: none"> <li>A. Audiometric Screening shall be done on all students enrolled in Kindergarten, and in grade one, two, three, five and eight. Audiometric screening shall also be included as part of the health assessment in grades six and nine.</li> <li>B. Audiometric screening will be done by school health personnel, in an acoustic environment sufficiently quiet for a student with normal hearing sensitivity to hear test stimuli at the screening levels.</li> <li>C. Audiometers used shall provide calibrated puretone stimuli at each of the following frequencies for each ear:</li> </ol>		

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<p>a. 1,000 and 2,000 at 20dB b. 4,000 at 25 dB</p> <p>D. Audiometers must meet current American National Standards Institute specifications and shall be assessed at least annually for adequate calibration. Each audiometer shall have a statement showing dates and results of last calibration.</p> <p>E. A pupil who fails to respond to one or more of the three required screening frequencies in either ear shall be suspected of having impaired or defect of hearing pursuant to section 10-214 of the Connecticut General Statutes.</p> <p>F. A pupil who fails to respond to one or more of the three required screening frequencies in either ear will be re-screened in one month by appropriate health personnel.</p> <p>G. A pupil who fails to respond to one or more of the three required frequencies in either ear, on the second screening will be referred to the speech and hearing therapist for re-screening.</p> <p>H. After collaboration with the speech therapist and school health personnel, if the student is still found to be failing in one or more of the three required frequencies in either ear, a written notice from the Superintendent of Schools shall be sent to the parent or guardian with a brief statement describing such failure.</p> <p>I. The school nurse will make reasonable effort to determine whether the parent or guardian has obtained the necessary testing or treatment for the pupil, and if not, advise the parent or guardian on how such treatment or testing may be obtained.</p> <p>J. Results of all testing and or treatment shall be recorded on the student's cumulative health record after being reviewed by school health personnel.</p> <p>K. If the findings of screenings indicate a possible need to modify a pupil's educational program, appropriate personnel shall be notified.</p> <p><b>V. <u>POSTURAL SCREENING</u></b></p> <p>A. Postural screening shall be done on all pupils in grades five through nine. Postural screening shall be accepted as part of the physical assessment in grades six and nine if physical assessment is done within the current school year.</p> <p>B. Postural screenings will be done by the school health personnel in collaboration with physical education teachers trained in such screening methods.</p> <p>C. Prior to the screening information will be sent to all parents and guardians to acquaint them with said screenings.</p>		

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<p>D. The entire back, including the waistline and hip line shall be observed without covering.</p> <p>E. Observation for scoliosis shall consist of:</p> <ul style="list-style-type: none"> <li>a. rib or flank fullness upon forward bend</li> <li>b. shoulder height discrepancy</li> <li>c. should blade prominence</li> <li>d. waist line or hip asymmetry</li> <li>e. obvious curve or crease in the back</li> </ul> <p>F. A pupil observed to have rib or flank fullness upon the forward bend or any three of the other key signs shall be found to have a postural problem pursuant to section 10-214 of the Connecticut General Statutes.</p> <p>G. If a pupil is suspected of having a postural problem written notification from the Superintendent will be sent to the parent or guardian with a brief description of such suspected defect.</p> <p>H. The school nurse will make reasonable effort to determine whether the parent or guardian has obtained the necessary re-evaluation or treatment for the pupil, and if not, advise the parent or guardian on how such re-evaluation or treatment may be obtained.</p> <p>I. Results of all screenings and or treatment shall be recorded on the student's cumulative health record after being reviewed by school health personnel.</p> <p>J. If the finding of screenings indicates a possible need for the modification of a student's educational program appropriate personnel will be notified.</p> <p><b>VI. <u>HEALTH RECORDS</u></b></p> <p>A. Information contained in a pupils cumulative health assessment record will be shared only with appropriate school personnel, and then only if it is pertinent to the safety and/or educational development of the pupil.</p> <p>B. If a pupil permanently leaves the jurisdiction of the Danbury Board of Education, to relocate within the State of Connecticut the original health assessment record will be sent to an administrative officer or his/her designee of the school district to which such pupil moves. A true copy of the health assessment record shall be maintained within the Danbury School District.</p> <p>C. If a pupil leaves the jurisdiction of the Danbury Board of Education to relocate outside the State of Connecticut, a true copy of the health assessment record will be sent to an administrative officer or his/her designee of the school district to which such pupil moves. The original record shall be maintained within the Danbury School System.</p> <p>D. All Cumulative Health records (original or copy) will be retained for a minimum of 6 years after the student leaves the school district. Immunization records must be kept for 50 years.</p>		

