HEALTHY STUDENT PROGRAM APPLICATION FORM 2020 - 2021

Dear Parent:

Your child is eligible for enrollment in the **Healthy Student Program**, available only at ***selected schools*** *(only administered by clinic assistant or school nurse)* in the District where there are extended nursing services. **Healthy Student Program** services are offered at no direct cost to you and all students are eligible, regardless of insurance.

The main purpose of the **Healthy Student Program** is to **improve school attendance** and to **reduce health problems** that occur during the school day. A student may be withdrawn from the **Healthy Student Program** at any time by the parent or the school health services staff with written notice.

The Healthy Student program is the commitment of the Pasco County School District, and is intended as an effort to help students remain in school, ready to learn. Servicesavailable to students enrolled in the **Healthy Student Program** may include:

* **Management of acute illness or injury and the administration of limited medications,** following physician guidelines and protocols (i.e. ibuprofen, Tylenol, Motrin, Robitussin, Tums, and antifungal ointment, Benadryl, hydrocortisone, etc.).
* **Observation and follow up re: communicable diseases (**i.e. pink eye, ringworm, etc.).
* **A health professional will communicate with you** about your child’s particular health findings that may require an evaluation, follow up or referral.
* **Physical Examinations** (ARNP services) for school entry, sports, etc. may be available at limited school sites.
* **Lab screenings** (hematocrit/hemoglobin, anemia, blood glucose, urinalysis, and pregnancy testing) may be available at limited school sites.

Please inform the school nurse of any newly diagnosed health conditions for your child or changes in health status during the school year.

**The primary goal of school health services is to support academic success by maintaining the physical and mental well being of your child.**

**TO ENROLL YOUR CHILD IN THE HEALTHY STUDENT PROGRAM:**

* Please complete the application for Healthy Student Program Membership
* Be sure to complete “Student Medical History” section
* Parent signature is required below the “Enrollment Statement”
* Return completed form to the school clinic assistant or school nurse

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| *All medical information remains confidential between you and the health services provider. Records are stored and maintained within the Health Office and are shared with no one as per HIPAA compliance. The Medical Director of the Pasco County Health Department provides oversight for this program.* |

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