

## Classroom Health Care Plan

**Name:** Student  
**Parent:** xx  
**Grade:** \_\_\_\_\_  
**Home Phone:**  
**Emergency/Cell**  
**Allergies:**  
**Medications:**

**Effective Date:** \_\_\_\_\_  
**School:** School  
**Teacher:** \_\_\_\_\_  
**Bus:** \_\_ yes  no  
**School Nurse**

- **Prednisone - Steroid**
- **Tacrolimus (FK506) - anti-rejection medication used for nephrotic syndrome patients who are resistant to steroids only)**
- **Cell Cept – Immunosuppressant used in transplant / cancer treatments**
- **Lansaprazole – antacid for treatment of ulcers**
- **Ranitidine – second antacid for treatment of ulcers**
- **Furosemide – Diuretic for treatment of edema**

Nephrotic syndrome is a nonspecific disorder in which the [kidneys](#) are damaged, causing them to leak large amounts of [protein](#) from the [blood](#) into the [urine](#). This is usually triggered after an illness. Kidney biopsy results from August 2013 indicate minimal change disease. This is a chronic disease for which there is no cure; however, it is possible to outgrow the condition later in life.

Kidneys affected by nephrotic syndrome have small pores in the [podocytes](#), large enough to permit [proteinuria](#) (and subsequently [hypoalbuminemia](#), because some of the protein called [albumin](#) has gone from the blood to the urine). The most common sign is [excess fluid](#) in the body due to the serum hypoalbuminemia which means the protein albumin levels in the blood are low because the protein=albumin is being lost and excreted through the urine.

- It is common among 2 – 6 years old boys. The edema (swelling) begins in the face.
- Puffiness around the [eyes](#), characteristically in the morning.
- [Pitting edema](#) over the [legs](#).
- Fluid in the [pleural cavity](#) causing [pleural effusion](#). More commonly associated with excess fluid is pulmonary edema which can cause shortness of breath.
- Fluid in the [peritoneal cavity](#) causing [ascites](#) in the abdominal region.
- Generalized edema throughout the body known as [anasarca](#).

Treatment can include all or some of the following:

- Steroids
- Fluid restriction
- Diuretic therapy
- Blood pressure medication
- Additional immune-suppressant medications

## What can we do to help Student in the school setting and what to expect?

### Problem: Sickness

### Goal: Keep Student illness-free

- Good hand washing for the entire classroom- has proven to help ward off the spread of germs/illness (handwashing lesson/demonstration from school nurse from kids)
- Hand sanitizer usage in classroom: all students to wash hands or use hand sanitizer prior to entering classroom (in morning before entering class, after recess, lunch, etc.)
- Clean desks/door knobs, chairs, tables, and materials with antiseptic wipes at least once daily. May be done by parents, volunteers, or teacher. Work with parents to understand best practices.
- Encourage children/families who are sick to stay home to prevent others from contracting illness
- Encourage Student to bring his own water bottle if he is not fluid restricted as the water fountain is a vessel for germs
- Encourage children to cough into their elbows and wash their hands after blowing their noses
- Student should be seated away from unhealthy children in the classroom who are symptomatic with viral/cold illness symptoms
- Encourage Student to not touch his hands to his mouth/nose/eyes to prevent infecting himself
- Teacher/school nurse to communicate with a phone call / email with Student's parents regarding illnesses in the classroom/school that are known to them in a timely manner (flu, strep throat, chicken pox / shingles), with immediate attention to chicken pox / shingles (parents request phone call day or night)
- Student's classroom teacher will be in communication with other grade level teachers and administration regarding Student's health condition and will inform parents regarding illness of students in other classes as known
- Rest and bathroom privileges as needed
- School nurse/teacher to educate students at the beginning of the school year and throughout the school year regarding spreading of germs and good hand washing techniques to prevent germ spread (at beginning of school year, and once more at start of flu season)
- Teacher to notify parents if he/she is sick or experiencing cold/flu like symptoms but will still be coming to school to teach
- Student to have his own box of supplies (provided by parents) that he can use (pencils, scissors, glue, markers, etc.)
- Ask Student to use antiseptic wipes to clean his area before and after centers
- Substitute teachers to receive a copy of health care plan prior to instruction
- Parents will be provided a list of additional teachers that may be teaching Student or providing guidance (i.e. librarian, buddy program teacher, science, computers, music, etc.) prior to the start of the school year
- School nurse will distribute "nurse's illness policy" in writing to all students to take home at the beginning of the fall/flu season so that all families are aware of recommendations regarding the spread of illness and staying home if student is not well

- Parents will be allowed to come into classroom during agreed to non-instructional times with teacher to sanitize classroom. This schedule will be communicated to the Principal and School Nurse so that regular assessment of the schedule can be reviewed. This schedule will be agreed upon during meeting with teacher prior to the start of school and modified if need be, once the daily classroom schedule goes into effect and/or adjusted based on season and/or known health issues
- Parents will be informed at least 5 days before the start of the school year as to Student's teacher so that the appropriate meetings and communications laid out in this plan can be accomplished prior to the start of the first day of school
- Teacher, parents, school nurse, and principal will meet prior to the beginning of the school year to discuss implementation of health care plan and creation of a comfortable and safe environment for Student
- Meeting pre-scheduled with parents, teacher, school nurse after first week of school to discuss/assess classroom procedures and effectiveness. Modifications to be made as needed
- Monthly meetings to be set up with parents, teacher, nurse and principal to review proceedings and effectiveness of health care plan elements. These monthly meetings can be canceled if all parties are in agreement
- Meeting (timing to be agreed upon) to be held with all special instructors prior to start of school year or within 1 week of start of school so that parents, principal, and school nurse can discuss Student's situation and need for support
- Open door policy with Student's teacher for communication without issue
- Nurse to objectively and randomly observe classroom procedures on occasion at request of parents or of own accord
- Parents allowed 5-10 minutes at back to school night to introduce themselves/explain their situation
- Letter to be sent home to Student's "buddy" family through buddy's teacher informing them of Student's situation (when applicable)
- Student to be allowed to clean lunch room tables with Clorox wipes vs. rags.
- Nurse to send written letter to Student's class parents the first week of school letting them know there is a student in their class who is immuno-suppressed and highlighting the importance of adhering to the illness policy, importance of good hand-washing, and requesting they inform teacher / or nurse of illnesses.

**Problem: Steroid usage**

**Goal: Make Student as comfortable as possible when on steroids**

- Allow Student some quiet time if he has sudden mood swings due to his frequent steroid use
- Student may be hungrier when on steroids or may be on a fluid restriction so he may gain some weight or need some supervision regarding fluid intake
- Watch for teasing or bullying due to side effects of steroids

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Parent Signature

Date

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Teacher Signature

Date

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Principal Signature

Date

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School Nurse Signature

Date