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## Today's school nurse has a lot on the plate

By **Mary E. Hart**

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Back when today's parents were kids, students usually visited the nurse's office with an upset stomach, cold, or aches and pains from overdoing it in gym class (or trying to get out of gym class). With the rise in food allergies and more children being diagnosed with asthma, today's school nurses have far more to deal with and today's parents need to be more involved than ever.

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### **Asthma and Allergies On the Rise**

"Depending on the area, asthma is the No. 1 diagnosis that children are receiving," says Marie DeSisto, RN, MSN, past president of the Massachusetts School Nurse Organization (MSNO) and director of nurses for the Waltham Public Schools, "and it ranges from 5 to 11 percent on average across the state. Asthma, managing asthma symptoms and teaching students about it are significant issue for school nurses in Massachusetts. There is also a great deal of case management, such as assisting parents with medication management, follow-up, getting medications to the school nurse, and making sure that students are carrying the medication with them so it is available (but not overused) when needed."

“Food allergies are a recent and difficult problem,” says DeSisto. “Approximately 6 to 8 percent of students have a food allergy or other life-threatening allergy that requires treatment with an EpiPen.”

Life-threatening allergies require prompt treatment and immediate 911 transport for care/observation. This also requires a great deal of teaching by the school nurses to the parents, staff and community. Most school nurses also delegate EpiPen administration to the staff in order to ensure that many people in the school know how to administer it.

If your child has asthma or allergies, you should share the information with the school nurse as soon as it is known and definitely before your child enters school.

### **Knowing the Rules of Medication**

“Whenever possible, any medications should be given at home and every effort made to avoid school hours,” says Ann Marie Melley, R.N., school nurse for the Marstons Mills East Horace Mann Charter School. “When this is not possible, such as in an allergic reaction that occurs at school, medication will be administered in the health office. A signed authorization form, which is available at the office, completed by both parent/guardian and physician, is required by law before being administered at school (this includes both prescription and over-the-counter medications).

Students may not carry medications at any time. Parents are to bring medications to the health office in a current pharmacy bottle or original container, Melley added.

### **Using Computerized Devices**

New technologies are constantly changing the way we live and work, and this holds true in school nurse offices. AEDs , an abbreviation of Automated External Defibrillators, are a new item in schools due to several incidents in Massachusetts and across the country of sudden cardiac death of students or staff.

“The AED gives an electric shock to restart the heart’s normal rhythm,” explains DeSisto. “It is not a simple process to correctly institute an AED program. In order to purchase and have the AED available, the nurses must have physician

oversight by a qualified doctor, have a written policy, have a plan to monitor the AEDs and do staff trainings on the use of the AED and CPR.”

### **Keeping Nurses Informed**

When your child has an illness or condition, make sure that the school nurse knows what's going on, and how to help your child if needed. If your child becomes ill at school, or for some reason is unable to speak, the nurse will need all information as fast as possible. Having your child's medical history/info on hand can mean the difference between life and death.

“Using severe asthma as an example, to assure the best treatment, it is critical for the nurse to have knowledge of the student's asthma/medical history, immediate access to rescue medication, and up-to-date contact information,” says Judy Styler, RN, BSN, NCSN, director of school health services for Framingham public schools. “A child is at a decided disadvantage if she has a severe asthma attack in school and the nurse has no prior knowledge of the diagnosis. Parents should err on the side of caution when bringing information to the school nurse, that is, the more information the better and sooner rather than later.”

### **Staying in Touch**

“One of the biggest changes for today's school nurses is the number of calls one has to make to reach a parent given that everyone now has a cell phone,” says Gwen Lemire, RN, BSN, NCSN, nurse at Masconomet Middle School in Topsfield. “I often have to leave messages at five different numbers: home, dad's work, dad's cell, mother's work, and mother's cell. Also, we need the parents to bring physical exams to us, because with HIPPA laws, we can no longer send lists of major health concerns of students by grade to teachers, nor can we contact doctor's offices to have them send/fax physical exams.”

Also, don't just think that you only need to tell the school nurse about events that happen to your child. Keep them informed about any major event happening in your family's life that could affect your child's health, as stress can play a large part in well-being.

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