

OCTOBER

HEALTH SERVICES

NEWSLETTER



"To Live, To Love, To Learn, To Leave a Legacy"

Allergies & Colds

With autumn now here, runny noses, coughs, and red, itchy eyes are starting to appear. Seasonal allergies and the common cold can be so much alike that it's sometimes hard to tell the two apart. But look closely and you can find clues about what's going on- see *the chart below*.

Another sign that you might be dealing with seasonal allergies is if symptoms come on suddenly and last a long time. Cold symptoms tend to come on more gradually and usually go away within 7 to 10 days, but allergies last as long as someone is exposed to an allergen, which can be for weeks or months.

How to Help

Whether it's a cold or allergies, your child can feel pretty miserable making it hard for them to focus on school work.

- **Get them to bed on time- or early!** Plenty of rest is the best thing to help start their day out on the right foot.
- **Drink lots of fluids-** Drinking plenty of water will help with head congestion, sore throats, and stomach complaints. **Consider sending a clear water bottle to school.**
- **Consider a Humidifier-** With autumn upon us the air is getting cooler and dry indoor air is often the cause of chapped lips, dry skin and irritated sinus passages. The moisture from a cool mist humidifier can soothe dry sinus passages. However, if you have indoor allergies, dust and mold from the humidifier may cause more harm than good if not cleaned and taken care of properly.
- **Talk to your doctor-** whether it's a cold or allergies, it's always best to consult your doctor before giving medications- even over the counter ones. Your doctor can also help you determine what other things you can do at home to help (such as saline nose drops).

Symptom check: Is it a cold or allergy?

Symptom	Cold	Allergy
Cough	Usually	Sometimes
General aches and pains	Sometimes	Never
Fatigue and weakness	Sometimes	Sometimes
Itchy eyes	Rarely	Usually
Sneezing	Usually	Usually
Sore throat	Usually	Rarely
Runny nose	Usually	Usually
Stuffy nose	Usually	Usually
Fever	Rarely	Never

Based on National Institute of Allergy and Infectious Diseases, 2014



*Reminder:

Cough drops are considered a medication and required a signed consent form on file. This prevents your child from any miscommunication with staff about having “candy” in class and helps to promote the safety of other students. We have multiple students with allergies to certain dyes and other products and small children who are at risk from choking.

Once a consent form has been completed you may then send a small bag of cough drops that can be kept in the Health Services office and given out as your child needs them.

Need a consent form? You can find it [HERE](http://strideacademy.org/health-services/).
<http://strideacademy.org/health-services/>

Dealing with Absences

Your child has been out sick, you’ve already let the school know, you’ve just left the doctor’s office, now what? It can seem like the last thing on your mind, but following up with the school regarding your child’s diagnosis is important for a few reasons.

- Knowing what illnesses are going around and in which grades **help us determine how to respond quicker and cut down on illnesses spreading** between students.
- **Tracking information allows us to keep parents informed.** This also gives doctors vital information about exposures- which can cut down on unnecessary tests.
- Knowing about illnesses helps us to get information to the right people fast! **Certain illnesses can be dangerous for students with poor immune systems or staff who are pregnant or have other health concerns.** Having this information can prevent them from coming in contact with students who may pose a threat or get in contact with the doctor immediately.

Remember, your child’s health information is confidential and shared on a need-to-know basis only. You can simply call in and speak with our front desk staff OR you can feel free to speak our **Health Services** staff at **320-230-5340 ext. 6945**.



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Head Lice- Myths & Facts:

Just the the word “lice” is enough to make most of our heads itch. If your child has lice or has been exposed to a student who has lice here are some things to keep in mind:

- If your child is found to have lice during school hours we notify you so that you may pick your child up and begin treatment. Once all live lice are killed your child may return to school.
- If you notice your child has lice outside of school hours we ask that you please notify the school. By notifying the health office you can be sure that this information will be kept confidential- teachers and parents are only made aware that a child in their grade has had a confirmed case. Since students move between classes it is important that everyone be diligent about checking their children and not rely on the idea of “it wasn’t in his/her class so we’re okay”.
- Letters are sent out electronically to alert parents that there has been a confirmed case in the grade. ***Make sure to check your junk mail or spam settings!***

Myth: Lice “checks” help to catch lice in schools before it spreads.

Fact: Remember lining up for lice checks in school? This is now a thing of the past. Studies have shown that they not only waste vast resources but don’t help to decrease lice reports. Checks are only done on a case by case basis should a student exhibit symptoms.

Myth: Lice can jump from head to head.

Fact: Lice do not have wings. They cannot fly and they cannot jump. Instead, they move by crawling. That is why direct head-to-head contact, such as kids putting their heads together while playing, is the most common way for head lice to spread from one person to another.

Myth: An itchy head means your child most likely has head lice.

Fact: Itchy scalp is one of the common symptoms of head lice. But there can be other causes of itchy scalp, such as dandruff or dry skin. Moreover, some children who have head lice may not experience itching.

Myth: Kids are most likely to get head lice in school.

Fact: This is a common misconception, probably stemming from the fact that school-age children are at an increased risk for getting head lice. The fact is, kids tend to get head lice from places and activities where they are more likely to have direct head-to-head contact or share personal items, such as combs, bedding, towels and hair accessories. The most common sources of head lice infestations are, in addition to school, camp, daycare, slumber parties and sports activities, among others.

Myth: Head lice are extremely contagious and children who are diagnosed with head lice should be isolated until all the nits are gone.

Fact: The truth is that lice are most frequently spread through head-to-head contact, which allows the lice to travel from one person to another. Isolation of a child who has head lice, or keeping him out of school, as long as he has begun treatment, is not necessary.

In fact, the American Academy of Pediatrics and the National Association of School Nurses have recommended that schools revise so-called “no-nit” policies, which require children to be kept out of school until they are completely free of nits and lice. Doctors today are advising that children be allowed to return to school once they have begun treatment to eradicate lice.

Myth: Natural alternative treatments for head lice are always safe and effective for kids.

Fact: The truth is that parents must be cautious when using products that are touted as being “natural” to treat their child’s head lice. Many products are not approved by the U.S. Food and Drug Administration, and may contain ingredients such as certain essential oils that are not recommended for use on young children. Always check with your doctor before using any products on your child’s scalp. And keep in mind that no product, natural or not, is 100 percent effective in killing lice and nits.