

## Students

### ADMINISTRATIVE REGULATIONS ON CHRONIC INFECTIOUS DISEASE

**5141.22AR**

The school will respect the right to privacy of the individual and maintain strict confidentiality of any records containing health information. Therefore, knowledge that a child has a chronic infectious disease will be confined to those persons with a direct need to know and who are authorized by the parent or guardian. Those persons will be provided with appropriate information concerning the child's needs and confidentiality requirements.

The school nurse, with the written permission of the parent or guardian, will function as (a) the liaison with the child's physician, (b) the child's advocate in the school, and (c) the coordinator of services provided by other staff. Health records containing chronic infectious disease information will be maintained in a separate, locked health file at the office of the School Nurse Supervisor. Access to these records will be limited to authorized personnel.

Based upon individual circumstances, special programming may be warranted.

A child with a chronic infectious disease may need to be removed from the classroom for his protection when other communicable diseases (e.g., measles or chicken pox) are occurring in the school population. The decision will be made by the child's physician and parent or guardian in consultation with the school nurse or school medical advisor.

Under certain circumstances, a child with a chronic infectious disease might pose a risk of transmission to others. If any such circumstances exist, the parent or guardian will be notified. The school medical advisor, in consultation with the school nurse and the child's physician, must determine whether a risk of transmission exists in the school. If it is determined that a risk exists, the student shall be removed from the classroom.

A child with a chronic infectious disease may be temporarily removed from the classroom for the reason stated in paragraph #4 or #5 until an appropriate school program adjustment can be made, an appropriate alternative education program can be established, or the medical advisor determines that the risk has abated and the child can return to the classroom.

- Removal from the classroom will not be construed as the only response to reduce the risk of transmission. School personnel should be flexible in developing alternatives and should attempt to use the least restrictive means to accommodate the child's needs.
- In any case of temporary removal of the student from the school setting, state regulations and school policy regarding homebound instruction will apply.

**Students**

**ADMINISTRATIVE REGULATIONS ON  
CHRONIC INFECTIOUS DISEASE (continued)**

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Each removal of a child with a chronic infectious disease from normal school attendance will be reviewed by the school medical advisor in consultation with the parent or guardian and the student's physician at least once every month to determine whether the condition precipitating the removal has changed.

All staff will be trained in accordance with OSHA regulations in cleaning up blood or other body fluid accidents. Universal precautions will be followed.

In a medical emergency, if a parent or guardian is not available, the school nurse or other professional who knows the child's diagnosis may disclose this information directly to emergency service personnel or to a physician in order to ensure appropriate medical treatment.

8/27/2004