

Maryland School Immunization Requirements

Maryland law and AoB policy states that students must be current on their required immunizations in order to attend school. Immunization records must be up to date; include the month, day, and year of each vaccination, be signed by a provider or health department official, and be reviewed by the school nurses. All new students, and returning students who have received additional/updated vaccines, must submit documentation of such, at least **1 month PRIOR to the first day of school.**

*** All students entering: **Kindergarten** must have received **2- MMR and 2-Varicella vaccines**
: **7th grade** must have **1- Tdap and 1- Meningococcal Vaccine**

School principals may opt to temporarily admit a student who is missing required immunizations providing the parent/guardian presents documentation from the Dr office of an upcoming appointment to receive any missing vaccinations. Students who do not meet the immunization requirements by 20 days from the start of school, will be excluded from school until proof of immunization is provided.

In the case of religious exemption or medical contraindication, form DHMH 896 must be signed (indicating exemption) , submitted to the nurses office, approved by the AOB and kept in the student's file. Exempt students will be excluded from school if there is an outbreak of the disease for which they are not immunized. Contact the nurse if you need help with exemption forms.

Health Inventory

****Health Inventory forms may be found on the St John School website.
sjwestschool.org Go to "Parents - Forms & Documents - Medical"**

Health Inventory Parts I and II are required for **all new** students and are to be updated for upcoming **7th** grade students. Part 1 is completed by the parent/guardian and should include any allergies, serious medical conditions, medications and emergency contact information. Part 2 is completed by your child's medical provider. An annual wellness exam affords the pediatrician an opportunity to conduct a complete physical, emotional, developmental, and psychosocial exam. We are required to have a physical when your child initially starts at St John, and again when they enter 7th grade, but feel free to send in annually if you'd like. Please notify the school nurse of any changes that occur with your child during the school year.

When to Keep Your Child at Home

The following guidelines compiled from the Center for Disease Control and Prevention (CDC) may help you decide when to keep your child at home. The school nurse also uses these guidelines to determine when you will be called to pick your child up from school. This information applies to all school-aged children. It is not intended to be inclusive of all illnesses or conditions that may indicate the need for your child to stay home from school, and does not take the place of a consultation with your medical provider.

COMMON COLD: The common cold is a contagious upper respiratory infection caused by a variety of cold viruses. It is the most frequent childhood illness. Symptoms can last 7 to 14 days. A child with no fever, mild symptoms, and who is otherwise feeling well may attend school.

KEEP CHILD HOME IF: child has a deep or uncontrollable cough and/or a significant lack of energy, even without a fever.

COUGH: A mild hacking cough often starts after the first few days of a common cold. A child with mild symptoms, no fever, and who is otherwise feeling well may attend school.

KEEP CHILD HOME IF: child has a deep or uncontrollable cough, even without a fever. If your child has a cough with a fever, they must stay home from school until they have been fever-free for at least 24 hours without the use of fever-reducing medicine.

EYE REDNESS: A child with eye redness but no discomfort, swelling, vision change, discharge, or drainage may attend school.

KEEP CHILD HOME IF: child has swelling around the eye/eyelid, thick drainage, crusting on the eyelids, eyelids matted shut, vision changes, and/or eye discomfort they should not attend school and should be evaluated by a medical provider. A child diagnosed with conjunctivitis (pink eye) must remain at home until they have received at least 24 hours of antibiotic treatment, and a doctor's note is required for readmission to school.

FEVER: A fever is defined as a temperature of 100°F or higher, and indicates the presence of viral or bacterial infection. Children are likely to be contagious to others when a fever is present. Please DO NOT give your child fever-reducing medicine and send them to school. Most likely, the medicine will wear off; the fever will return; and you will be contacted by the Nurse to pick up your child.

KEEP CHILD HOME IF: child has a fever of 100°F or higher. Child may not return to school until they have been fever-free for 24 hours without the use of fever-reducing medicine.

FLU (INFLUENZA): The flu is a highly contagious respiratory illness and can result in mild to severe illness. A person with influenza can be contagious for up to one week after symptoms appear. Children are one of the biggest sources for spreading the flu.

KEEP CHILD HOME IF: A child with flu-like illness (fever, cough, sore throat, runny or stuffy nose, body aches, headache, chills, tiredness, and or vomiting and diarrhea) may not attend school until they are fever free for at least 24 hours without the use of fever-reducing medicine.

HEAD LICE (PEDICULOSIS): Head lice are small grayish-tan insects most often seen in the hair. They do not jump or fly and do not transmit any diseases, but are highly transferable from one person to another, through direct head-to-head contact or sharing of brushes, hats etc. Infestation with head lice may cause persistent itching of the head or a rash on head or neck, most often from scratching.

KEEP CHILD HOME IF: live head lice are found. Children may not return to school until they have received home treatment and are free of any live lice.

SORE THROAT: A child with a mild sore throat, no fever, and who is otherwise feeling well may attend school. A significantly sore throat with or without fever, headache and upset stomach may be signs of Strep throat.. Strep throat is contagious and if left untreated can lead to serious complications.

KEEP CHILD HOME IF: sore throat is severe; and/or accompanied by fever, headache, or upset stomach as this could indicate strep throat. Children diagnosed with strep throat may return to school after 24 hours of antibiotics, and with a note from their doctor as long as they remain fever free.

VOMITING/DIARRHEA: Vomiting and diarrhea are usually caused by a stomach virus. Vomiting may last for 12-24 hours and diarrhea may take several days to completely resolve.

KEEP CHILD HOME IF: your child has vomited more than once in 24 hours and/or has had 2 or more watery stools. Children who have been sent home for, or currently have vomiting/diarrhea should be kept at home and may not return to school until they are symptom/fever free for 24 hours. Consult with your medical provider if your child has a stomachache that is persistent or severe enough to limit activity

Communicable Diseases

Parents must **call the school nurse directly** if their child is diagnosed with a communicable disease. The school must notify the Carroll County Health Department. All reports are confidential.

Reportable diseases include the following:

Measles – regular or German (Rubella)	Tuberculosis
Meningitis	Whooping Cough (Pertussis)
Hepatitis	Rocky Mountain Spotted Fever
Food Poisoning	Human Immune Deficiency
Mumps	Virus Infection (AIDS and all other Influenza Symptomatic infections)
Adverse reactions to Pertussis Vaccine	Animal bites / Rabies
Lyme disease	*Chicken Pox (varicella)
Covid-19	Conjunctivitis (Pink Eye)
Influenza	

**Conjunctivitis (Pink Eye)* Any student with drainage from the eyes associated with conjunctivitis (pink eye) must be kept at home until under treatment from a doctor. A doctor's note will be required for readmission to school.

**Varicella (Chicken Pox)* Students who have chicken pox are excluded from school until all lesions are scabbed over.

Allergies, Asthma, Seizures, Diabetes

Students with these or other medical conditions require an **Emergency Action or Treatment plan** on file in the nurse's office. The action plan should include a treatment plan/medication orders for use in case of emergency, as well as emergency contact information.

The Action Plan along with emergency medication orders must be completed and signed annually by your child's physician. **Medication must be delivered to the nurse's office by a parent/guardian in the original unopened container or box with the pharmacy label intact.**

Injuries

The nurse will notify the parents by phone or email of any student who has sustained an injury which requires monitoring after school hours; initiation of concussion protocol; and/or follow-up with a medical provider. If any injury to the head or any other serious injury occurs to a student, the nurse will notify the parent.

If the parent/guardian or alternative contact person cannot be reached in an emergency, the school will contact police/ambulance for assistance. If the injury or health issue requires treatment (e.g. concussion, fractures, sprains, severe lacerations) a note is required from the medical provider describing the nature of the injury, treatment, and duration of any restrictions on the day the student returns to school.

++If your child sustains an injury in or outside of school, and comes to school with crutches, a boot, sling, cast etc, a note must be sent to school upon their return. The note must state what the injury is and if there are any restrictions while at school. If no note is received, the student will not be allowed to participate in PE or recess.

MEDICATION ADMINISTRATION

****Medication authorization forms may be found on the St John School website. sjwestschool.org Go to "Parents - Forms & Documents - Medical"**

The administration of medication in school is discouraged. However, if a student's physician recommends that the student receive prescription or over-the-counter medication during the school day, a written order from the student's doctor is required. Medication can only be dispensed with a written order from the student's physician specifying start and stop date.

Medication must be brought to school in its original container or box(for inhalers), and must be labeled including: student name, medication name, date of prescription, expiration date as stated by the pharmacist, strength of medication, frequency and dosage.

++Students **may not** possess, dispense or distribute medication on their own. Under special circumstances, individual students may be authorized by their physician to carry and self-administer emergency medications (e.g. inhalers, epi-pens). In this case, the school nurse must be consulted, and the medication authorization form must reflect that decision. **All medication, including over the counter(OTC) meds must be delivered to school by a parent/guardian.**

++No OTC or prescribed medication will be administered to a child without current, and complete documentation on file in the Nurses Office.

Prescription Medication

If a student is prescribed daily or as-needed medication during the school day, a Medication Administration Authorization Form 1216 (found on the St John website) signed by the physician and parent/guardian is required. Please bring all medications labeled and in their original containers to the nurse's office.

Over The Counter Medication

If you choose to have over the counter medications kept at school for your child's use, an Over-the-Counter (OTC) medication authorization form must be completed. This list of optional, discretionary medications are for occasional use only to alleviate your child's minor discomforts and avoid early dismissals when possible. No cough drops or throat lozenges are permitted at school.

++All OTC medication will be dispensed by the school nurse based on their clinical assessment. **This form must be signed by a physician and parent, and medications must be brought to the nurses office in new unopened containers.**

General Use EpiPens

As of October 2019, St John School has adopted a policy allowing the availability of stock epinephrine in the health suite for use in the event of an anaphylactic emergency. This epinephrine is for emergency use during normal school hours and is not dependent on allergy history. It is not available outside of normal school hours or on field trips. Students with a known history of severe allergies are still expected to maintain emergency action plans, medical orders, and their own supply of emergency medication.

General Use Albuterol Inhaler

As of September 2025 St John has adopted a policy allowing the availability of stock emergency albuterol inhalers in the health suite. These are to only be used in the event of a medical emergency and not for those students with a known health history.

Naloxone

As of May 2024, St. John School has adopted a policy allowing the availability of Naloxone in the event of a suspected overdose emergency. This Naloxone is for emergency use during normal school days. It is not available outside of normal school hours or on field trips. For those interested in learning more about the program and administration of Naloxone, please refer to the following resources: https://youtu.be/p9hYzykHs_o and Pages-Home (maryland.gov).

Vision and Hearing Screenings

The school follows the directives of Carroll County Health Department and responds to parent's requests for individual testing.

This testing is usually done for:

1. All new students who have not provided documentation for screening in the past year
2. All students the year they enter the school in Grades Pre-K, Kindergarten, first grade and eighth grade.
3. Grade 3 or Grade 4 permitted by the Health Department.
4. Any student with a suspected hearing or vision problem as reported by school staff or parents/guardians.

Bloodborne Pathogens

A complete Bloodborne Pathogens Standard Exposure Control Plan has been established by the school and can be found in each Faculty Handbook and on file in the Office.

INSURANCE

The Office of Risk Management on behalf of the Archdiocese of Baltimore, offers a voluntary student accident plan for school families to purchase. This coverage is an inexpensive way for families to cover co-pays, high deductibles and may even provide accident coverage in the event that no other health coverage is available. If a family declines this coverage, please be aware that any injuries sustained while at school or during school activities may not be covered by any Archdiocesan insurance policy. for more details regarding purchasing student accident insurance, please visit: <https://www.archbalt.org/office-of-risk-management/>