

# EDWARD V. WALTON ELEMENTARY SCHOOL

## NEW STUDENT REGISTRATION

### HEALTH INFORMATION

Welcome to Walton School! We hope that the following information answers some of your questions regarding medical and health related matters in connection with Kindergarten (and Pre-K) registration and attendance. If you require further information or have specific concerns regarding your child, please contact me at [bschwartz@springfieldschools.com](mailto:bschwartz@springfieldschools.com) or 973-376-1025 x2491.

#### **MEDICAL RECORDS REQUIRED FOR ALL CHILDREN NOT PREVIOUSLY ENROLLED IN WALTON SCHOOL:**

- Completed medical forms must be returned by May 1<sup>st</sup>.
- All required immunizations must be in compliance with NJ State mandates.
- Documentation of immunizations must be provided by your child's health care provider.
- Documentation of a **recent** physical exam. NJ Law requires that the physician must have performed the physical **within one year of the first day of school in September 2013**.

#### **ALL CHILDREN ENTERING PRE-K:**

- **IMMUNIZATIONS** must be in compliance with NJ State mandates for Kindergarten:
  - DTaP: Minimum of 4 doses
  - IPV: Minimum of 3 doses
  - MMR: First dose given on or after 1<sup>st</sup> birthday (or laboratory titer results).
  - HIB: 3 doses with first dose given on or after 1<sup>st</sup> birthday
  - VARIVAX: 1 dose on or after 1<sup>st</sup> birthday or documented history of chicken pox disease.
  - PREVNAR: 3 doses with first dose given on or after 1<sup>st</sup> birthday
  - HEP B: Complete vaccine series (3 doses).
  - INFLUENZA: 1 Dose to be given between September 1 and December 31 of the year of preschool attendance.

#### **ALL CHILDREN ENTERING KINDERGARTEN & ABOVE:**

- **IMMUNIZATIONS** must be in compliance with NJ State mandates for Kindergarten:
  - DTaP: Minimum of 4 doses with one given on or after 4<sup>th</sup> birthday.
  - IPV: Minimum of 3 doses with one dose given on or after 4<sup>th</sup> birthday.
  - MMR: 2 doses given on or after 1<sup>st</sup> birthday (or laboratory titer results).
  - HEP B: Complete vaccine series (3 doses).
  - VARIVAX: 1 dose on or after 1<sup>st</sup> birthday or documented history of chicken pox disease.
- **Proof of immunizations is a NJ State requirement. If the school does not receive complete documentation as mandated, your child may be prevented from starting school on opening day in September (unless other arrangements have been made).**

#### **MEDICATIONS IN SCHOOL:**

- Medications can only be given by the School Nurse and must be accompanied by a Springfield School District Medication Administration **form signed by both the parent and physician**. (NOTE: THIS INCLUDES ANY OVER THE COUNTER MEDICATIONS, including TYLENOL, MOTRIN, ETC.)
- District Medication forms are available online on the district website (under the Health Office Tab in Parent and Teacher Resources Section) and in the Walton School Health Office.
- All medications must be given to the nurse by the parent/guardian in the *original* labeled pharmacy container (please **DO NOT** send medication to school in your child's backpack).

#### **ABSENCES**

- You must notify the school when your child will be absent.
- You will receive a "CALL FOR SAFETY" sticker with the voicemail number on the first day of school. Please use this number to report absences at all times.
- We thank you in advance for remembering to call.

Thank you for providing us with your child's medical records by May 1<sup>st</sup>.

~Betsy Schwartz, RN, NJ-CSN