

Walking to School

A simple way to find physical activity

By Kinnie Parker, MPH, CHES, DSHS Cardiovascular Health & Wellness Program

On October 6, 2004, 36 elementary schools in Texas participated in International Walk to School Day. Worldwide, more than 3 million people from 36 countries around the world walked or biked to school to promote health, safety, physical activity and concern for the environment. In Texas, the

event is also promoted as Walk our Little Texans to School Day through the Department of State Health Services (DSHS) Cardiovascular Health and Wellness Program.



Walk to School Day was established in the U.S. in 1997 by the Partnership for a Walkable America. In

2000, the U.S. partnered with Canada and the United Kingdom to create International Walk to School Day. In 2003, the event was expanded to International Walk to School Week, offering schools around the world the opportunity to increase their efforts, such as incorporating safety programs into classroom curriculum and hosting safety-themed events.

In Texas, coordinators of Walk to School Day report that this event is popular among students and their parents, affordable, easy to plan, and a good channel for community change. Most encouraging is

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New Federal Law to Require Local Wellness Policies

By John Dillard, DSHS Youth Focused Group

A requirement that local education agencies participating in school meal programs establish a local “school wellness policy” no later than the beginning of the 2006-2007 school year is among the amendments included in The Federal Child Nutrition and WIC Reauthorization Act of 2004 (Public Law 108-265). At a minimum the wellness policy must include:

- goals for nutrition education, physical activity, and other school activities designed to promote student wellness;
- nutrition guidelines for all foods available on the school campus during the school day;
- guidelines for school meals;
- a plan for measuring implementation of the wellness policy; and
- involvement of parents, students, and representatives of the school food authority, the school board, school administrators, and the public in development of the local policy.

Information and technical assistance from the Centers for Disease Control and Prevention (CDC) will be available upon request to local educational agencies, school food authorities, and state agencies to establish healthy school nutrition environments, reduce childhood obesity, and prevent diet-related chronic diseases. A copy of the law referred to above is available on-line at www.fns.usda.gov/cnd/Governance/Legislation/PL_108-265.pdf. From this page scroll down to Section 204 of the law. For more info on this legislation and its impact on Texas schools, contact John Perkins, Texas Department of Agriculture, at (512) 463-2091. ■

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Letter From The Editor

By Michelle McComb, MSN, RN

In the Navajo culture, when a child laughs out loud for the first time, it is cause for celebration. Indeed, the sound of children's laughter is one of my fondest memories of school nursing. Humor can be helpful to us in so many ways. Humor can break the ice, relieve stress, help healing, and help people cope with change. Humor has been essential in my life, and has been especially important to me over the past several months as I have coped with changes, and made a difficult decision.

I have been privileged to serve the people of Texas for eleven and a half years as a school nurse, a district health services coordinator, a state nurse consultant, and for the last four of those years as manager of the TDH School Health Program. What a ride it has been! I wouldn't trade the opportunity and experience for anything. For personal reasons the time has come for me to do something different. I have accepted a job in the private sector, which will allow me to work from home and spend more time with family, and particularly, my two sons. My boys are in grades 5 and 7, and this is a critical time in their lives. I eagerly look forward to trading my 2 hours of daily commute time for shuttle duty to the ever-increasing school and social activities that my boys are involved in.

I doubt I will ever have another job that was so perfectly suited for me, and for which I was so passionate about. For me, coordinated school health, and the way it is played out in communities across the state and nation, reflects society's true investment in our nation's future: it's children. I have had the fortunate support of a boss and camaraderie of co-workers who share my commitment to improving children's health. Over the past several years I have met and worked with phenomenal people from different organizations and with different perspectives. I have learned so much, and hope that I have shared just as much with others. Each meeting I attend, presentation I give, or person I talk to, represents another opportunity to spread the message about the importance of "school health". Even though I will no longer be employed to do this, you can bet that I plan on

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Safe Kids

Corner

Fire Safety

What Children Need to Know

Time is precious when a fire starts. Children need to understand the dangers of fire and what to expect, so they can respond quickly. An unprepared child often attempts to hide from the fire instead of exiting the burning building. A properly coached child has a much better chance of escaping.



Quick escape can be the key to surviving a fire. Extreme heat can cause severe lung damage, and both adults and children can be overcome by odorless, colorless carbon monoxide fumes in less than two minutes, falling into a deep sleep and never awakening.

The Texas State SAFE KIDS Coalition recommends the following:

- Teach children what a smoke alarm sounds like.
- Teach children to crawl low under smoke. More than 70 percent of childhood fire deaths are caused by the smoke and toxic gases produced as a fire develops and spreads.
- Teach children to cover their mouths and noses. A moist towel is best, but a t-shirt or anything within reach can protect lungs from dangerous fumes.
- Teach children to touch doors before opening them. If the door is hot, use an alternate exit.
- Teach children never to reenter a burning building. Children should be reminded not to stop or return for anything, such as a toy or pet, or to call 9-1-1. Emergency calls should be placed after leaving the premises.
- Teach children to "stop, drop, and roll." Upon leaving the burning home or building, children whose clothes have caught on fire should immediately stop, drop to the ground and roll back and forth. This can quickly extinguish the flames.
- Take children to your local fire station for a tour. It's fun and educational. Children will be able to see a firefighter in full firefighting gear and learn that he or she is someone who puts out fires and saves children.

For more information or to find a SAFE KIDS Coalition near you visit www.safekids.org. ■

Midland ISD *Steps Program*

By Cathy Harris, Health Services Supervisor, Midland ISD

{The Midland ISD Steps Program is one of ten 2003/04 Awards for Excellence in Texas School Health award winners. Midland ISD has won a \$1,000 award from the Texas Pediatric Society Foundation for promoting increased nutrition and physical activity among adolescents. Awards for Excellence winners will be honored on January 28, 2005 at the Texas School Health Association Conference in Plano, Texas.}

The idea for the Midland ISD Steps Program arose after we referred 307 students in Midland ISD for Acanthosis Nigricans. Many of the students referred had a Body Mass Index of 30 or greater. Elevated blood pressure was often present. If these children lose weight, the risk of diabetes, some cancers and cardiac disease is reduced. When we referred students with these factors, physicians felt their hands were tied unless parents made sure their children were compliant with diet and exercise requirements. It can be extremely difficult for a child to achieve such behavior changes without parental, school and community involvement. Midland Memorial Hospital established a Child Wellness Center, to address childhood obesity, when prescribed by a physician. It has been successful in initiating behavior change in some clients. Due to their limited capacity, and the fact that the program was limited to a 12-week time period, we wanted to replicate their success in the school setting and support on-going family participation.

For the Midland ISD Steps Program, participants measured their activity through personal use of a pedometer to attain 10,000 steps a day. Participants were taught to control their caloric intake by watching serving sizes and eating "5-9 fruit and vegetable servings a day." We conducted awareness sessions, provided tools for tracking progress and a calendar of events for family participation. We had competition between campuses by using the American Cancer Society's "Active For Life" program on a semester basis.

The goal was to Walk Across America (16,028,000 steps) in one semester. Students, families, staff, and friends logged in their steps at the campus of their choice. By the second semester, some campuses logged in enough steps to measure across America 3 to 5 times!

We sponsored special walking events throughout the semester. Each participant could log in an additional 10,000 steps for participating in an event, such as the Walk To School Day, American Heartwalk, Diabetes Walk, Junior Achievement Walk, Juvenile Diabetes Walk and Relay For Life. We also stepped off many of the Midland City Parks, so that if someone did not have a pedometer, they could still log steps. P.E. teachers hosted walking days and the 25-mile club so that students could get steps during P.E. Many parents came to school and walked with their children on those days.

We demonstrated healthy food options by incorporating the American Cancer Society's "Meeting Well" menus at our PTA presentations. By the end of the year the Midland ISD Steps Program documented the following accomplishments:



- We have parents and students walking together.
- We have managed to get both students that have plenty of physical activity and students that were sedentary wanting to participate. As a result, students that are obese do not feel singled out.
- We have implemented the coordinated school health model, so that each department contributes and benefits.
- By trying to meet the needs of 307 students who were referred for Acanthosis Nigricans, we actually had 9,918 participating: 8,438 students, 215 staff and 1,644 parents and community members.
- We were delighted with the unexpected response from people living in the community that did not have students in school, but still wanted to purchase a pedometer and log in steps. One of the participants even climbed Mt Kilimanjaro and logged in her steps at one of the campuses!

For more information about the Steps Program, contact Cathy Harris, RN, BSN at caharris@esc18.net or by phone at (432) 689-1015.

Awards for Excellence in Texas School Health

Has your school or district implemented a program to address health needs of your students or staff? Awards for Excellence honors and awards schools/districts in Texas that are promoting the lifelong health of students and/or staff through effective health promotion initiatives. Awards for Excellence offers:

- ◆ Excellence Awards - \$1,500
- ◆ Outstanding Awards - \$1,000
- ◆ Texas Pediatric Society Foundation Awards - \$1,000
- ◆ Previous Winner Awards - \$1,200
- ◆ All Well Institute Award - Free Registration

For more information and to obtain an application for an award, visit www.tdh.state.tx.us/schoolhealth/awards.htm or call 1-888-963-7111, ext. 7279. Awards for Excellence is sponsored by the Texas Health Foundation and administered by the Department of State Health Services.

School Immunization Requirements Proposed Amendment

An amendment has been proposed to the Immunization Requirements for Schools & Child-Care Facilities in Texas. The proposed amendment will allow a 30-day provisional enrollment for children of military families who are moving to Texas from out-of-state and awaiting the transfer of immunization records. The proposed rule amendment and notice of the public hearing were posted in the *Texas Register* on October 29, 2004. The Department of State Health Services (DSHS) held a public hearing to accept public comments on the proposed rule on November 10, 2004 at DSHS in Austin. The comment period ran for thirty calendar days after publication of the proposed rule in the *Texas Register*. DSHS will consider the comments that are received as the rule process goes forward. To see a copy of the current immunization requirements for schools and child-care facilities in Texas, visit the DSHS Immunization Division website at: www.tdh.state.tx.us/immunize/school_info.htm. For information on the proposed amendment, contact Victoria Brice, DSHS Immunizations Division, at (512) 458-7111, ext. 6658.

Flu Vaccine Shortage FAQs for Schools

For the 2004-05 flu season, the Centers for Disease Control and Prevention (CDC) has developed recommendations to help protect people who are at greatest risk from serious complications from the flu. Because of the shortage of influenza vaccine for the 2004-05 season, CDC recommends that existing flu vaccine supplies be given to people who are at the greatest risk from serious complications from influenza disease.

CDC has prepared a FAQ for schools to promote awareness of the flu and

prevent its spread. CDC is also providing printable posters designed for school and community settings. These provide step-by-step instructions and illustrations on how to best cover your cough and wash your hands. The FAQ and materials are available at www.cdc.gov/flu/school/index.htm. Also, printable flyers with clear, concise messages describing who should be vaccinated and other ways to prevent the flu are available at: www.cdc.gov/flu/professionals/flugallery/index.htm. Several of these items are available in various languages. For information visit the CDC at www.cdc.gov/flu or call the CDC Hotline: 1-800-CDC-INFO (4636).

School-Based Health Center Funding Opportunity

The Texas Department of State Health Services is anticipating an early 2005 release of a Request for Proposals for Fiscal Year 2006 grant funding to establish School-Based Health Centers. Grant funds may be used to provide coordinated preventive and primary health services and related social services on a school campus to a school-age population lacking access to medical care. Eligible applicants are school districts, charter schools, and school district cooperatives. Questions about this funding opportunity may be directed to John Dillard, School Health Program Specialist, at (512) 458-7111, ext. 2782 or john.dillard@dshs.state.tx.us.

School Spinal Screening Program Changes

As a result of the recent consolidation of Texas health and human services agencies and the subsequent realignment of programs within the Department of State Health Services (formerly TDH), the school spinal screening program has moved from the

School Health Program to the Health Screening Branch. The program has not changed, it has merely been transferred to a new department. For questions related to spinal screening in schools, contact Elaine Braslow, M.Ed. at (512) 458-7111 ext. 3829 or elaine.braslow@dshs.state.tx.us. The Spinal Screening Guidelines have been updated to reflect the agency name changes. The revised manual is available on-line at www.tdh.state.tx.us/schoolhealth/spinal.htm. You may request a hard copy from the DSHS Health Screening Branch by calling Elaine.

National Poison Prevention Week Poster Contest

National Poison Prevention Week is March 20-26, 2005. The Texas Poison Center Network (TPCN) is coordinating a Texas Poison Prevention Poster Contest sponsored by Wal-Mart Pharmacy. The objective of the contest is to increase awareness of the Poison Center and educate children about poison hazards and prevention. The contest is for third and fourth graders in any Texas school. Participating in the poster contest provides a fun and valuable learning experience, and an opportunity to win a Wal-Mart gift certificate. Posters are turned in to your local Wal-Mart Pharmacy, where they will compete for prizes. First place winning posters are forwarded to the Central Texas Poison Center to compete at the regional level. Regional winners compete at the state level, and the state winner is sent to Washington D.C. to compete to be the official National Poison Prevention Week Poster. To sign your school up to participate in the contest and obtain instructions and materials, contact Carolyn Insall, Community Education Specialist, Central Texas Poison Center, at (254) 724-7404.

TPCN also provides free poison prevention brochures and telephone

stickers to send home with your students. Network representatives can also come to your school to do a program, or refer to the TPCN website at www.poisoncontrol.org. Click on the Education link, then the VFTN virtual tour pill bottle for TEKS aligned curriculum, photos and scenarios to teach poison prevention in the classroom.

Continuing Education in Bioterrorism for Nurses On-Line

University of Texas Medical Branch (UTMB) has designed a two-hour, web-based course for nurses to meet the two-hour bioterrorism continuing education requirement. The course, entitled *Recognizing and Responding to Bioterrorism and Other Public Health Emergencies*, was developed in collaboration with the Department of State Health Services, and is based on criteria from the Board of Nurse Examiners. The cost of the course is fifteen dollars. The course can be accessed at the UTMB website: www.son.utmb.edu/BioTerrorism/. For information contact the Texas Statewide Bioterrorism Continuing Education Project at UTMB at (409) 772-4818.

Tobacco Prevention in Your School

Tobacco use, including cigarette smoking, cigar smoking, and smokeless tobacco use, is the single leading preventable cause of death in the U.S. Each day, approximately 4,000 American youth between the ages of 12 and 17 try their first cigarette. The School Health Index, available through the Centers for Disease Control and Prevention (CDC), is one tool a school or district can use to identify the strengths and weaknesses of their policies and programs aimed at reducing tobacco use by school-age youth. Local School Health Advisory Councils (SHACs) can play an important role in implementing this tool.

The School Health Index is a self-assessment and planning guide that uses a team approach to examine existing policies and programs to develop action plans for improving student health and safety. Available at no cost, the School Health Index focuses on promotion of physical activity, healthy eating, a tobacco-free lifestyle, and a wide range of safety-related behaviors. The Index can be accessed online at www.cdc.gov/healthyyouth/shi.

For assistance with implementing this tool, contact the Department of State Health Services (DSHS) Tobacco Specialist in your Public Health Region. Contact information is available on the DSHS website at www.dshs.state.tx.us. Select "Fund Services" then "Program Listing" then "Tobacco Prevention and Control Office."

Animal-Related Injury & Disease Prevention

Has a stray dog ever entered your playground? Has a downed bat ever been handled by a group of children at your school? Have you ever seen a student inappropriately handle or approach an animal? The Department of State Health Services (DSHS) Zoonosis Control Group offers guidance on how to respond to such situations. Educational pamphlets are available on a variety of diseases transmitted from animals to people including rabies and vector-borne diseases such as Lyme disease, plague, and Rocky Mountain spotted fever on the Zoonosis Control Group website at www.tdh.state.tx.us/zoonosis. Some of the educational materials available include information on how animals spread diseases, how

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School Health Resources Online

FDA & YOU - free newsletter for school health educators and students by the U.S. Food and Drug Administration. Variety of health topics that are geared towards middle and high school students. www.fda.gov/cdrh/fdaandyou/index.html

National Safe Kids Campaign – non-profit organization dedicated to the prevention of unintentional childhood injury — the number one killer of children ages 14 and under. Provides access to many resources for school health programming focusing on safety and injury prevention. www.safekids.org

Illinois Emergency Medical Services – Guidelines for the Nurse in the School Setting: Illinois Emergency Medical Services for Children recognizes the unique and multiple roles that school nurses perform. This manual provides school nurses with a set of emergency care guidelines for ill/injured students. Includes links to related resources. www.ems-c.org/products/frameproducts.htm

Health, Mental Health, and Safety Guidelines for Schools - Developed by AAP and NASN, these guidelines assist in assessing, planning, and improving school health and safety programs. www.schoolhealth.org

Walking to School

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that some coordinators for this year's Walk to School Day indicate that the event is being used to initiate year-long walk or bike-to-school programs and that work is being done to improve pedestrian safety, such as sidewalk construction.

If your school did not participate in Walk our Little Texans to School Day this year be sure to plan early for next year's event. For information and strategies on how to implement this program on your campus, visit the DSHS Cardiovascular Health and Wellness website at www.tdh.state.tx.us/wellness or call (512) 458-7200. And remember – you can do this as a week-long event, or consider incorporating walking to school into a new or existing year-round health promotion program!

Walk to School Resources Online

Walk our Little Texans to School
www.tdh.state.tx.us/wellness/WOLT/Wolthome.htm

International Site
www.walktoschool-usa.org/

CDC Kids Walk to School
www.cdc.gov/nccdphp/dnpa/kidswalk/resources.htm

NHTSA Safe Routes to School
www.nhtsa.dot.gov/people/injury/pedbimot/ped/saferouteshtml/index.html

National Center for Bicycling and Walking
www.bikewalk.org/

Editor's Letter

Continued from page 2

continuing this habit. In fact, my new job will provide me with a brand new audience to indoctrinate!

I've been told that in certain Pueblo cultures there is not a word for "good-bye" because it is understood that traveling paths will cross again in the future. I certainly hope that is the case, as I don't consider this a true "good-bye." Know that "school health" is in the capable and caring hands of my esteemed colleagues. I will miss them terribly, for we've shared so much and come so far together. I hope that one of our readers might answer the call and come to serve alongside them. I promise, it won't be boring!

{Michelle McComb's last day with the Texas Department of State Health Services (DSHS) was November 3, 2004. Michelle was the manager of the TDH School Health Program, which is now a part of DSHS Youth Focused Group. Michelle will be greatly missed by her colleagues at DSHS and we wish her all the best in her new career path.} ■

School Health Announcements

Continued from page 5

to avoid animal bites, prevent exposure to rabies, properly remove an attached tick, and responsibly care for pets. For more information, contact your local DSHS Zoonosis Control office or call (512) 458-7255. ■

You are invited to attend the All Well Institute

"And How are the Children"

July 11-14, 2005

Navasota, Texas – Camp Allen Retreat Center

This conference will create positive, well-prepared leaders capable of working towards changing systems in the schools and communities they represent. Each participant will have an opportunity to learn Leadership Development Skills for Coordinated School Health Education in the following areas:

- Nutrition Education and Food Service
- Physical Activity Programming
- Community Support
- School Health Advisory Councils
- Worksite Wellness
- Personal Wellness

Participants will leave with a realistic, personalized action plan ready to implement the following school year, and a knowledge of school health professionals and expert trainers from throughout the state with whom to network.

Scholarships are available. For more info or to register, go online to Schoolhealth.info and click on the "star" for events, or contact Shelley Summers at (512) 919-1726 or shelley.summers@cancer.org

Impetigo

Frequently Asked Questions

By Gary Heseltine MD, MPH, Epidemiologist, DSHS Infectious Disease Control Unit

What is Impetigo?

Impetigo is a skin infection that can spread from one person to another. Impetigo causes one or more “sores” on the skin that are often covered by a thick, dry honey-colored crust. The sores don’t hurt, but may be tender if touched. They may also be itchy. Any skin area can be affected, but sores are usually on arms or legs, the face (mainly around the mouth, nose, or ears), and sometimes on the scalp. Anyone can get impetigo, but it most often occurs in children 2 to 6 years old. The disease is most common during summer and fall, but can occur anytime.

What Causes Impetigo?

Impetigo is usually caused by a group of bacteria (“germs”) called group A streptococci (“strep”), or by other bacteria called staphylococci (“staph”). These bacteria are normally found on the skin and in the nose. When small cuts, scratches, or insect bites occur, these bacteria can get under the skin surface and cause infection. Infected areas are often reddish and puffy. Fluid or pus oozes from the sore for a few days. The fluid dries to form honey-colored crusts. As the bacteria multiply, the sores increase in number and size.

How is Impetigo Spread?

Impetigo is very contagious. Sores have large numbers of the bacteria. The bacteria are easily passed to new areas of the skin by scratching or touching the sores or to other people by unwashed hands, dirty fingernails, and clothing or other objects that have touched the sores. To help prevent spread of impetigo:

- Bathe or shower daily.
- Keep fingernails clean and short.
- Wash with hot water and soap any clothing, sheets, towels, and other items that come in contact with impetigo sores or crusts. Do not share these items with anyone else.
- Keep sores covered with clean bandages. Wash your hands after changing the bandage.
- Throw away used bandages in a trash bag.

Children who may have impetigo should not attend school or daycare. They should not sleep, play, or have close contact with other children until after they have been seen by a doctor.

How Can Impetigo Be Treated?

While rarely serious, impetigo can sometimes lead to complications. See a doctor if small breaks in the skin do

not heal quickly or if the sores get bigger and honey-colored crusts appear. The doctor can decide if the skin problem is impetigo and what type of treatment is needed. Oral antibiotics may be prescribed to treat impetigo infections. Be sure to finish all of the medication given, even if your child seems better. This helps prevent the infection from reoccurring. Antibiotic creams or ointments are also used on the surface of the skin and sores. The crusts must be removed before using the ointment. The best way to remove the crusts is to soak them in warm, soapy water until they soften and can be wiped away. After the crusts have been removed, gentle scrubbing of the sore will help wash away more bacteria. After washing, dry the area and apply a thin layer of antibiotic ointment. Repeat this process three or four times a day until several days after new crusts have stopped forming. If already being treated for impetigo, see a doctor if a fever, diarrhea, or painful pus-filled sores develop, or if the skin doesn’t begin to heal after three days of treatment.

What Happens if Impetigo Is Not Treated?

If impetigo is not treated promptly, it can spread to other areas of the body or to other people. Severe or untreated impetigo can cause kidney damage.

How Can Impetigo Be Prevented?

- Bathe or shower daily with soap and water.
- Wash face, hands, and hair regularly. If you are caring for someone with impetigo, be sure to wash your hands after each contact.
- Keep fingernails short and clean.
- Change and wash clothing frequently.
- Do not let your children play, or have other close contact, with someone who may have impetigo (look for the sores with honey-colored crusts).
- If you or your child get a cut, scratch, or insect bite, wash the wound with soap and water. You can then apply a small amount of an antibiotic ointment and cover the wound with a bandage or gauze and tape to larger breaks in the skin.

REMEMBER: See a doctor if a cut, scratch, or insect bite fails to heal properly, gets larger, or develops a honey-colored crust. It may be impetigo.

For information on impetigo and other infectious diseases, contact Dr. Heseltine at (512) 458-7676 or gary.heseltine@dshs.state.tx.us.



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Mark Your Calendar!

December 2004
National Hand Washing
Awareness Week (5 - 11)
(www.henrythehand.com)
National Drunk and
Drugged Driving Prevention
(3D) Month (www.3dmonth.org)
Healthy Lung Month (www.lungusa.org)

January 2005
Healthy Weight Week January 16-22
(www.healthyweightnetwork.com/)
National Volunteer Blood Donor Month

February 2005
National Girls & Women in Sports Day (9)
(www.womenssportfoundation.org/)
National Child Passenger Safety
Awareness Week (13-19)
(www.nhtsa.dot.gov/)
Random Acts of Kindness Week (14-20)
(www.actsofkindness.org/)
American Heart Month
(www.americanheart.org)
National Children's Dental Health Month
(www.ada.org/)

March 2005
National School Breakfast Week (7-11)
(www.asfsa.org/)
National Nutrition Month
(www.eatright.org/)

April 2005
Kick Butts Day (13)
(www.tobaccofreekids.org/)
National Humor Month
(www.larrywilde.com/)
National Youth Sports Safety Month
(www.nyssf.org/)

All dates above are from www.nationalwellness.org

The School Nurse's Holiday Season Card

Contributed by a subscriber
{ Sung loosely to the tune - My Favourite Things }

**Listen dear teachers, and you shall hear,
a verse from the nurse for the Holidays are near...**

**Belly aches, head aches, popped wires in braces,
hangnails and chapped lips and pimples on faces...**

**Viruses causing GI distress,
tears and upsets cause "my life is a mess!" ...**

**Kids with green faces approaching my door,
barely over the threshold...oops...
all over the floor...**

**Tonsils that kiss, their throats are so sore,
glands big as grapes... need I say more?**

**Earaches, heartaches, jammed thumb or finger,
wheezles and sneezles and coughs that do linger...**

**Allergic reactions, occasional lice,
contusions and bruises from falls on the ice...**

**"I threw up on the bus, I felt like a jerk,
but you can't call my Mom, 'cuz she's gotta work."**

**I love being your nurse, and I love all this stuff,
but by the Holidays, even I've had enough.**

**Enjoy your break, wipe the virus slate clear,
and we'll all start anew when we come back next
year!**

**I hope that my poem doesn't make you feel worse,
for it comes with my love,**

**Signed,
Your school nurse**

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