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**HEALTH
SCREENING
PROGRAMS**

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6. Each eye must see *at least* the 20/40 line.
7. A passing score is obtained when the student can read the majority of the shapes presented on the 20/40 line with each eye.
8. Referral is made when the majority of shapes presented on the 20/40 line cannot be read with one or both eyes.
9. Referral is also made when there is a two-line or greater difference between the acuities of the two eyes, except when the poorer eye is 20/30 or better.
10. If the student fails to correctly identify the minimum number of symbols or letters on the 20/40 line, slide the mask up to the next line and screen the student again. Keep sliding the mask until the student is able to successfully identify the majority of the shapes on the line. The student's visual acuity is the line

HEARING SCREENING

Overview

The purpose of school hearing screening is to identify students with a possible hearing loss that may affect their intellectual, emotional, social, speech, and/or language development. A subtle hearing loss may be overlooked resulting in developmental or academic delays. Even mild hearing losses may be educationally and medically significant.

Hearing Screening Procedures:

- Screenings are scheduled and conducted by the school or the screening team. Call the School Health Screening Services office at 904-858-1946 to notify them of the dates(s) for hearing screening at the school. The School Health Screening Services staff will assist you with any questions.
- Audiometers must be reserved and checked out from the Audiology Department. Call 904-348-7809 to reserve audiometer(s) no more than two weeks before the date scheduled to conduct hearing screenings.
- Hearing screenings are conducted by trained volunteers, teacher assistants, and/or other school staff.
- Students in KG, 1st, and 6th grade will be screened for hearing. Students in other grade levels will be screened as needed, based on teacher or school counselor referral.
- For elementary students, each ear is screened at 25 decibels on 3 frequencies (1000, 2000, and 4000 Hz).
- For sixth grade students, each ear is screened at 25 decibels on 4 frequencies (1000, 2000, 4000, and 8000 Hz).
- . Re-screen students who fail to hear at one or more of the indicated frequencies in either ear.
- Students should be rescreened at the same level as the initial screening.
- Failure on the second screening requires referral to an audiologist or health care provider.
- It is recommended to rescreen students who fail approximately two weeks after the initial screening.
- The school screening coordinator should keep a copy of all the completed Hearing Screening Class Lists. The originals should be sent to the Screening Services office via fax (904-858-sd(s)-2 (hou)2

SCOLIOSIS SCREENING PROGRAM

Overview

The Florida Department of Health and Duval County Public Schools will carry out a scoliosis screening program for all Duval County Public Schools in grade six (6). Scoliosis is an abnormal curvature of the spine usually developing in pre-adolescents and adolescents during rapid growth spurts. Early detection can prevent scoliosis from progressing and can identify those in need of treatment.

The Department of Health School Nurse will send any referral letters, follow up on referrals, and place a dated copy of the referral letter in the health record of the student's cumulative folder with all follow-up documentation.

Scoliosis Screening Procedures:

- The school will send letters home to notify parents of the scoliosis screening date(s).
- The DOH school nurse will arrange for use of the facilities with the school administrator.
- Scoliosis screening is best done by RNs, but may be performed by trained qualified staff or volunteers.
- The DOH school nurse will confirm screening date(s) with school administration.
- There should be two adults present during screening.
- To respect the students' modesty, boys and girls should be screened separately.
- Prepare students for screening for the exam by explaining the procedure.
- Rescreen any student with questionable results and notify parents of any failures.
- Scoliosis screening can be done with students fully clothed, as long as clothing isn't bulky and does not prevent the screener from seeing the students back clearly.
- Signs indicating abnormal results include un-level shoulders or hips, visible curvature of the spine on forward bend test, uneven space between arms and waist when student is standing, prominent scapular process on one side, as well as any child with an obvious deformity.
- Scoliosis screening results will be recorded in the health record in the students' cumulative folder or entered into the students' electronic record.
- The Department of Health School Nurse will send any referral letters, follow up on referrals, and place a dated copy of the referral letter in the health record of the student's cumulative folder with all follow-up documentation.

- Students whose BMI calculation result is less than 5th percentile or greater than the 95th percentile value may be at greater risk of health-related problems than the rest of the population.
- In special situations, consideration should be made for environmental and genetic influences in determining the average size of children in various populations.
- Growth and development screening results should be recorded in the health record in the students' cumulative folder or entered into the students' electronic record.
- Referral for further evaluation and/or treatment is at the discretion of the DOH school nurse.
- If referral was made for dietary or nutritional counseling, notation should be made in the student's cumulative health record and follow-up noted.
- Data should be kept on those who have followed up regarding failure notices, so outcomes can be entered into the Florida Department of Health's Health Management System (HMS).