



SCHOOL NURSE UPDATE

www.health.mo.gov/living/families/schoolhealth/

School Nurses
THE HEART OF SCHOOL
HEALTH SERVICES

Missouri Department of Health and Senior Services

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September 2011

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Welcome Back School Health Professionals!

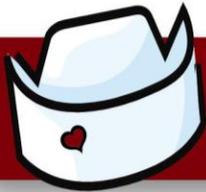
We are glad you are back; children are safer when you are in their lives. The School Health Program asked our partners to update the nurses on resources, changes, updates, or other information needed as you come back to school this fall. We hope that you have a wonderful 2011-2012 school year, and keep in touch. Marjorie and Andra

Standards of School Nursing Practice: The [National Association of School Nurses](#) (NASN) and the [American Nurses Association](#) (ANA) have just published the latest version of *School Nursing: Scope and Standards of School Nursing Practice*. They are available on the ANA and NASN websites. The School Health Program will review the changes and will offer webinars in the future to discuss these changes with school nurses. School Nurses are encouraged to use a portfolio to document individual accountability. If you are interested in further training on portfolio development, please contact the program at shs@health.mo.gov so interest can be gauged and possible trainings can be developed.

Professional Registration: The Board of Nursing wants to remind every nursing supervisor to check the status of the license of each Registered Nurse and Licensed Practical Nurse on staff using the Professional Registration website at <https://renew.pr.mo.gov/licensee-search.asp>. RNs renew in the odd year, (2011) and LPNs renew the even year (most current will be 2010). Remind others that it is felony to use the title "nurse" if you are not licensed.

Also, Licensed Practical Nurses on staff at a school must be supervised by a Registered Nurse or Physician. The supervisor does not have to be on-site. If there is no RN within the school district, you need a signed supervisory agreement from a RN or Physician to be a school nurse. Please make sure this is up to date and on file.

Nurse-to-Student Ratio: This year, Missouri ranked 16th on the National Association of School Nurses Nurse-to-Student Ruler. We have this information because of you, dearest colleague and your willingness to share your staffing information with us. In the next pages, Andra will give you the highlights of your collective information.



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Numbers Talk! Importance of Gathering Data

Because of you, we know that 2,241,311 students visited the school nurse in 2009-2010 and returned to learning environment instead of being sent home. This is 93% of office visits by students in our formerly contracted schools. We know this, because of nurses like you filling out our reports and surveys.

A frequent question received by the School Health Services program is why do reports need to be filled out and then what is the importance of the data. Below is an example from a school nurse on the importance of data:

“Due to your wonderful help with allowing us to track what we do for children every day in our schools, our nurses were able to quickly (in one day) pull together information over the last three years of how our services impacted children. When funding for the contract was eliminated our school board met and voted to fully fund what was cut. In addition, I put forth a need for additional nursing funds and an additional 0.3 staff (12 hours/week) was added. This would not have happened if it weren't for the meticulous data we gathered over the years that spoke to what we do daily for children in our schools.” Lori Osborne, RN, Columbia Public School District

Reports we generate through the School Health Services Update Survey and the Students with Special Healthcare Needs survey are shared with other programs within DHSS, state partners, and national agencies. Missouri was recently ranked 16th in terms of nurse-to-student ratio based on staffing information provided on the School Health Services Update.

We understand that as budgets get tighter nurses have less and less time on the job. We want to stress that not only is your reporting important to us, but it can also be very important to you when working on changing policies and requesting funding.

Reporting due this year:

Immunizations Reports
School Health Services Update (and added questions)
Annual Vision Screening report

Thank you for all the help we have received from you in the past and we look forward to hearing from you again this year.

The School Health Team

Results from the 2010-2011 School Health Services Update questions

- **79%** of schools responded

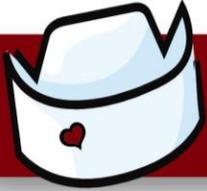
Injury Prevention:

- **70%** use some sort of bullying prevention.
- **17%** Use [CDC's Heads Up Program](#)
- **43%** have policies on playground safety.
- **48%** participate in [Arrive Alive](#).
- **30%** said they had some sort of suicide prevention program.

Smoking:

- **47%** said they had smoking cessation programs for students and **22%** for adults.
- **58%** have smoking cessation programs for adults in their community.
- **83%** have a smoke-free campus policy and **99%** have a smoke-free building policy.

Continued on the next page



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Results from the 2010-2011 School Health Services Update questions Contd.

Nutrition

- **66%** have healthy food options in vending machines.
- **62%** have policies or recommendations of healthy options for school parties, fundraisers, and concessions.
- **73%** are reducing vending machine usage.
- **44%** are adopting the [Eat Smart Guidelines](#).
- **60%** use non-food rewards in the classroom.

Physical Activity

- **41%** have recess before lunch.
- **42%** have increased the minutes per week of physical activity

This data has been shared with chronic disease prevention and health promotion programs to assist in program planning.

Communicable Disease Guidelines Update: The Bureau of Communicable Disease Control and Prevention is pleased to announce the release of the following document: "Prevention and Control of Communicable Diseases, A Guide for School Administrators, Nurses, Teachers, Child Care Providers, and Parents or Guardians". This document will be provided to schools and child care centers in CD-Rom format and will be posted to the Department of Health and Senior Service's website.

This manual contains 54 disease fact sheets for providers on specific infectious disease problems. These fact sheets have been designed to provide specific disease prevention and control guidelines that are consistent with the national standards put forth by the American Public Health Association and the American Academy of Pediatrics. In addition to provider fact sheets, there are 47 fact sheets available in a format specifically prepared for parents/guardians of childcare and school-aged children. This manual contains information for both staff and parents/guardians on numerous topics such as Cleaning, Sanitizing, and Disinfection; Diapering; and Food Safety in Childcare settings and Schools; to name a few.

New campaign to prevent foodborne disease: A new national multimedia public-service campaign called **Food Safe Families** was just launched with the goal of reducing food-related illnesses in homes. The campaign, which coincides with the summer grilling and outdoor-eating season, is a joint effort of the US Department of Agriculture's Food Safety and Inspection Service, the Food and Drug Administration, the Centers for Disease Control and Prevention, and the Ad Council. Aimed at making consumers pay attention to their food-handling practices, a series of actions called "**Check Your Steps**" urges them to focus on four key precautions: clean, separate, cook, and chill. The Centers for Disease Control and Prevention estimates that one in six Americans – are sickened every year by foodborne illnesses. The last several years have seen high profile outbreaks in peanuts, eggs, and produce.

See the [Check Your Steps](#) campaign at www.foodsafety.gov/keep/basics/index.html.

For more information contact Alyce.Turner@health.mo.gov with the Bureau of Communicable Disease Control and Prevention.



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Helping the Student with Diabetes Succeed: A Guide for School Personnel: An updated edition is now available from the National Diabetes Education Program. For a free copy, visit the website at www.YourDiabetesInfo.org.

Add Immunizations to School Supply Lists - Required for Kindergarten through 12th Grade: Immunizations are an important part of a child's health, and Missouri law requires children enrolled in kindergarten through 12th grade to be immunized against certain vaccine-preventable diseases. School-aged children must be immunized against diphtheria, tetanus, pertussis, polio, measles, rubella, mumps, hepatitis B, and varicella.

Individuals attending kindergarten through 12th grade are required to provide proof of up-to-date immunizations at registration. State regulation specifies that an individual cannot attend until all required immunizations are current. Public, private, parochial and parish schools are required to know the immunization status of the children enrolled in the facility. This information not only protects children but also the staff from harmful and potentially deadly vaccine-preventable diseases. It is the responsibility of the school to maintain the immunization histories of all the children enrolled and to report that information to the Missouri Department of Health and Senior Services by October 15th of each year.

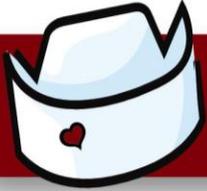
For additional information regarding immunization requirements for children enrolled in school, mandatory reporting or to obtain an immunization schedule that includes what age children should be immunized against particular diseases, please visit the Department of Health and Senior Services web site at www.health.mo.gov/living/wellness/immunizations or call 573.751.6124.

Fluoride Varnish Program (PSP): Alive and Well: School nurses are improving the oral health of Missouri's children, one smile at a time. During the 2010-2011 school year, 618 schools and Head Start centers in 98 counties implemented the Oral Health Preventive Services Program (PSP) and served over 64,000 children in Missouri.

The PSP is managed by the Department of Health and Senior Services (DHSS) and is a free community-based program currently available to any child (infant to age 18) in the state of Missouri. The program utilizes the services of volunteer dentists, hygienists, school nurses and parents working together to implement its four components. It is managed by DHSS through five regional Oral Health Consultants (OHCs) whose role is to assist school nurses in setting up the program.

Children who participate in the PSP receive an annual *oral screening* from a local, volunteer dentist or dental hygienist; an *oral health note* indicating the need for dental treatment; an application of *fluoride varnish* twice per school year; and *oral health education*. They also receive a toothbrush, toothpaste, floss, and educational brochures. The DHSS Oral Health Program staff anticipates continued growth as we begin the 2011-2012 school year. Please consider the PSP to improve the oral health of your students.

For more information on PSP, visit <http://health.mo.gov/living/families/oralhealth/index.php>, where you can find the OHC who serves your county. You can also hear testimonials about PSP from participating school nurses, dental professionals, and others, view the K-12 oral health curriculum, and find other useful information.



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Interscholastic Youth Sports Brain Injury Prevention Act: Governor Jay Nixon signed HB300 the “Interscholastic Youth Sports Brain Injury Prevention Act” to protect young athletes from long-term effects of sports-related concussions on July 13, 2011. Missouri is the 28th state to have a sports concussion law. Key components of the “Interscholastic Youth Sports Brain Injury Prevention Act” are:

- Coaches, parents and athletes receive education and information annually regarding concussions.
- An athlete who appears to have sustained a concussion is immediately removed from play or practice. They are not allowed to return for a minimum of 24 hours.
- A licensed health care provider trained in the evaluation and management of concussions must provide clearance for the athlete to return to play or practice.

Know Your Concussion: The Centers for Disease Control and Prevention (CDC) and the National Association of School Nurses (NASN) have teamed up to create a new poster called [Know Your Concussion ABCs](#) that highlights the critical role school nurses and other school professionals play in addressing concussions in school. The new poster is part of CDC’s [Heads Up to Schools](#) materials and is designed to be placed in an array of school settings for grades K-12. The poster helps raise awareness of concussion and offers key steps that school professionals can take to support students. CDC’s other Heads Up to Schools materials include fact sheets, a checklist, and a magnet, to help school nurses and school professionals identify and respond to concussions. To order the new poster and other Heads Up to Schools materials for FREE, visit: <http://www.cdc.gov/concussion/HeadsUp/schools.html>.

Suicide Prevention: Youth suicidal behavior is a significant national problem. In Missouri 2009, Suicide is the 4th leading cause of death between 15 – 19yrs of age (Death MICA 2011). Firearm is the leading method and majority who attempted suicide used poisoning. Young people are especially susceptible to suicide because they can experience many of the same stresses that adults face in addition to the pressures of growing up.

Some of the evidence based suicide prevention programs are:

- **QPR: Question, Persuade and Refer** - QPR is a 1-2 hour training intervention that teaches professional and non-professional gatekeepers to recognize and respond positively to someone exhibiting suicide warning signs and behaviors.
- **Safe TALK: Suicide Alertness for Everyone** - Safe TALK is a 2.5–3.5 hour training program that teaches participants to recognize and engage persons who might be having thoughts of suicide and to connect them with community resources trained in suicide intervention. Safe TALK stresses safety while challenging taboos that inhibit open talk about suicide.
- **ASIST: Applied Suicide Intervention Skills Training** - The ASIST workshop is a two-day workshop designed to provide participants with gate keeping knowledge and skills.
- **SOS: Signs of Suicide** - SOS incorporates two prominent youth suicide prevention strategies into a single program, combining a curriculum that aims to raise awareness of suicide and its related issues with a brief screening for depression and other risk factors associated with suicidal behavior.

The Missouri Department of Mental Health Suicide Prevention Resource Center Regions offer free gatekeeper training and also provide services such as depression screenings, support groups for survivors and educational presentations. For more information visit: <http://dmh.mo.gov/mentalillness/suicide/resourcecenters.htm>
<http://health.mo.gov/living/families/injuries/suicideprevention.php>



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- Free online training courses: <http://training.sprc.org/>
- National Suicide Prevention Lifeline is a free, 24 hr hotline available to anyone in suicidal crisis or distress. Please call 1-800-273-TALK (8255) or <http://www.suicidepreventionlifeline.org/>

Center for Education Safety is a new resource for school professionals. Review the website at www.moces.org. Of special interest is the recent web cast “*Human Trafficking—Basic Facts about the Commercial Exploitation of Youth*”. Additional web casts can be found on the “Archived Video Page”.

LGBTQ Youth: LGBTQ youth as a group experience more suicidal behavior than other youth. A variety of studies indicate that LGBTQ youth are nearly one and a half to three times more likely to have reported suicidal ideation than non-LGBTQ youth. While LGBTQ youth are at higher risk for suicidal behavior, some groups of LGBTQ youth are at particular risk: those who are homeless and runaway, living in foster care, and/or involved in the juvenile justice system. Although all youth in these settings are vulnerable, many LGBTQ youth experience multiple risk factors and have fewer supports than other youth.

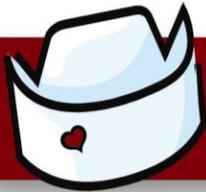
Suicide prevention programs can be effective in diminishing risk factors and especially in building protective factors. Agencies that serve youth – schools, health practices, suicide prevention programs, and youth services – as well as funders can help to reduce suicidal behavior among these youth.

For more information:

- The Trevor Project: <http://www.thetrevorproject.org> Trevor operates the nation’s only 24-hour toll-free suicide prevention helpline for gay, lesbian, bisexual, transgender, and questioning youth (1-866-4-U-TREVOR).
- The Gay, Lesbian, and Straight Education Network (GLSEN) <http://www.glsen.org/> this organization provides free and inexpensive tools to help establish school Gay-Straight Alliances, including Jump-Start Activity Guides, Safe Schools policies, stickers, do-it-yourself training kits, and results from the National School Climate Survey of LGBT students.
- Free Kit for Workshop: <http://www.sprc.org/LGBTYouthWorkshopKit.asp>

Safe school environments increase each student’s ability to learn: The School Violence Hotline is a Free Public Service for students to anonymously report weapons, fights, bullying, and other threats of violence. School staff can display posters with the program’s hotline number and the “Report It” texting service. Posters and graphics can be downloaded from the www.schoolviolencehotline.com website and placed in school handbooks, websites, and student calendars or planners. Promotional items such as posters, magnets, and pencils are also free to schools and can be ordered online or by calling toll-free 1-866-748-7047.

School Nutrition: The Alliance for a Healthier Generation’s Healthy School Program has many resources available to help support your efforts to develop a healthier school environment. Check out the website and resources at www.healthiergeneration.org. This website has tools for you and your school health advisory committee to use now for support in aligning school and district policies and contracts to School Beverage and Competitive Food Guidelines; create a shopping list of foods from companies that have agreed to produce and sell products to schools that competitive foods and school meals guidelines; tips for making the shift to lower calorie and more nutritious snacks in your district and a tool kit to use for advocacy.



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Healthy Eating and Physical Activity Habits: It is well known that eating too much and exercising too little will lead to overweight and related health problems. State leaders have been assured that there is a workforce of school nurses with the knowledge, skills and abilities to assist school communities in addressing poor nutrition and inactive children. You will be receiving information from DHSS on the best evidence known related to nutrition, physical activity and tobacco use. You are encouraged to review the 2011 Children's Food Environment State Indicator Report highlights and selected behaviors, environments and policies that affect child obesity. There are action steps and resources in the National Action Guide at <http://www.cdc.gov/obesity>.

Healthy Schools Program: Free Assistance in Preventing Childhood Obesity: Many schools in Missouri are recognizing the profound need to stem the tide of the childhood obesity epidemic and are starting to make changes to their school environments, with help from the Alliance for a Healthier Generation's Healthy Schools Program. The Alliance for a Healthier Generation was founded by the American Heart Association and the William J. Clinton Foundation with the mission to tackle one of our nation's leading health problems – childhood obesity.

The Alliance's Healthy Schools Program provides tools and solutions for schools to become healthier places students and staff to learn and work –all at no cost to schools or districts. The Healthy Schools Program provides best practice guidelines, implementation support, and recognition to schools across the country for their efforts to engage the entire school community (administrators, parents and school vendors) in increasing access to physical activity and healthier foods.

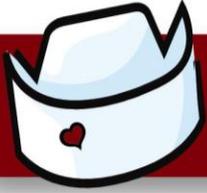
All schools in the United States are eligible to participate and take advantage of the free resources provided. Any member of the school community can help their school join the Healthy Schools Program. For more information you may contact the Relationship Manager in your area:

Jackson, Cass, or Lafayette County: Gretchen Patch 913-549-3175 or gretchen.patch@healthiergeneration.org

Missouri (Rural schools and St. Louis): Karen Cooper 417-260-0192 or karen.cooper@healthiergeneration.org

Or you may join today: Call 888-KID-HLTH or visit www.healthiergeneration.org

Strong Nutrition Standards and Financial Stability: The Division of Adolescent and School Health (DASH) released a new resource. The "Implementing Strong Nutrition Standards for Schools: Financial Implications" fact sheet summarizes the existing evidence of the financial impact on schools that have implemented strong nutrition standards. Implementing nutrition standards can be an effective strategy to improve the nutritional quality of foods offered and purchased in the school setting. One of the primary reasons that state and local education agencies are hesitant to implement strong nutrition standards for competitive foods is that they are concerned about losing the revenue that is generated from selling snacks and beverages to students. However, a key finding presented is that while some schools report an initial decrease in revenue after implementing nutrition standards, a growing body of evidence suggests that schools can have strong nutrition standards and still maintain financial stability. This fact sheet is available for download at: http://www.cdc.gov/healthyyouth/nutrition/pdf/financial_implications.pdf.



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Let's Move Salad Bars to Missouri's Schools: Have you considered a salad bar for your school? With benefits for your lunch program, the students and staff, and local farmers, adding a salad bar in your school lunch program is a great benefit to your entire community.

Effects seen in school lunch programs using salad bars:

- Higher participation rates (both children and adult lunches) and revenue for their food program
- Decrease in plate waste
- Increase in students' fruit and veggie intake
- Increase the options for serving local produce

To help schools take advantage of these healthful benefits, the *Let's Move Salad Bars to Schools Program* is providing salad bars for 6000 schools across the nation in the next three years. *Let's Move Salad Bars to Schools* is a public health effort to support salad bars in schools and is part of First Lady Michelle Obama's "Let's Move!" initiative.

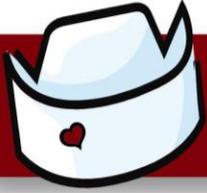


Check out the website at <http://saladbars2schools.org> for the information you need to begin efforts to get a salad bar in your school. Any school participating in the National School Lunch Program is eligible to apply, and the information on the website is free to everyone. The opportunity for salad bar awaits your school, get out there and make a change for the better. For more information, please contact Pat Simmons at pat.simmons@health.mo.gov.

Free lessons on nutrition and physical activity: The NEA Health Information Network (NEA HIN) announced the release of *Healthy Steps for Healthy Lives*, developed by NEA HIN and the Nestlé Healthy Kids Global Program. *Healthy Steps for Healthy Lives* provides K-3 educators with 31 lessons to teach fundamental nutrition and physical activity concepts. The lessons are aligned with national standards in the areas of Health, Math, Science, English/Language Arts, and Social Studies. Each lesson includes easy-to-follow instructions that take the educator from start to finish as well as supplementary materials, lesson extensions, and other teaching tools. *Healthy Steps for Healthy Lives* materials are available online at www.nestlefamily.com/healthysteps or as free printed kits upon request. Contact Rita Henderson at Nestlé USA (rita.henderson@us.nestle.com). For information about other NEA HIN resources related to staff wellness go to www.neahin.org.

Additional Nutrition Resources:

- Fruits and Veggies- More Matters is to encourage Americans to eat more fruits and vegetables. Website has tips, recipes and nutritional information. <http://www.fruitsandveggiesmatter.gov>
- BAM! Body and Mind. Answers kids' questions about health, including physical activity and nutrition. It also offers a "teachers corner". <http://www.bam.gov>
- KidsHealth offers nutrition and fitness information for kids. <http://kidshealth.org>
- Kidnetic provides tips on healthy eating and physical activity to kids and parents. <http://kidnetic.com>



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Children and Youth with Special Healthcare Needs Program: The Children and Youth with Special Health Care Needs (CYSHCN) Program provides assistance statewide for individuals birth to age 21 who meet medical and financial eligibility guidelines. The Program focuses on early identification and service coordination of individuals with special health care needs and their families. Children and youth with special health care needs are those individuals who have, or are at increased risk for a disease, defect or medical condition that may hinder the achievement of normal physical growth and development and who require health and related services of a type or amount beyond that required by individuals in general.

The participant must:

- Be a Missouri resident
- Be birth to age 21
- Have an eligible special health care need (conditions such as Cerebral Palsy, Cystic Fibrosis, Cleft Lip and Palate, Hearing Disorders, Hemophilia, Paraplegia, Quadriplegia, Seizures, Spina Bifida, and Traumatic Brain Injury)
- Meet financial eligibility guidelines for funded services (family income at or below 185% of the Federal Poverty Guidelines)

The CYSHCN Program provides two primary services:

Service coordination is provided to all participants, regardless of financial status.

- Outreach/Identification and Referral/Application
- Eligibility Determination
- Assessment of Needs
- Resource identification, referral and access
- Family support
- Service Plan Development/Implementation
- Monitoring and Evaluation
- Transition/Closure

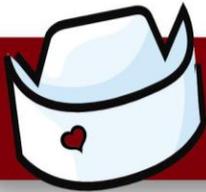
Limited funding for medically necessary diagnostic and treatment services for participants whose families meet financial eligibility guidelines.

- Funded services may include but are not limited to: doctor visits, emergency care, inpatient hospitalization, outpatient surgery, prescription medication, diagnostic testing, orthodontia and prosthodontia (cleft lip/palate only), therapy (physical, occupational, speech and respiratory), durable medical equipment, orthotics, hearing aids, specialized formula, and incontinence supplies.

Please visit their website at <http://health.mo.gov/living/families/shcn/cyshcn.php> For more information on the CYSHCN program.

Guttmacher Institute Publishes New Reports on the Steep Price of High Unintended Pregnancy Rates:

Three new reports, published by the Guttmacher Institute, discuss the rates and public costs of unintended pregnancy. All three reports-"[Unintended Pregnancy Rates at the State Level](#)," "[The Public Costs of Births Resulting from Unintended Pregnancies: National and State-Level Estimates](#)," and "[Unintended Pregnancy and Taxpayer Spending](#)"-are available online by clicking on the links above, or by visiting the [Guttmacher Institute website](#). This information could be useful in a school health advisory council meeting.



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STI's Among Missouri's Youth Remain a Concern: A National Youth Risk Behavior Study (YRBSS) finding indicates a downward trend from 1991-2009 in 9th through 12th grade students who have ever had sexual intercourse. ⁽¹⁾ However, Sexually Transmitted Infections (STIs) remain high among young adults with an estimated 19 million new infections occurring annually in the United States. ⁽²⁾ In 2010 among Missouri's youth there were 11,934 STIs reported among those 15-19 years old. This means 1 of every 35 Missouri high school students had a reported STI in 2010. The most common reportable STIs among Missouri's youth are chlamydia and gonorrhea. ⁽³⁾ Human papillomavirus (HPV) while not reportable represents another highly common STI.

CDC reports individuals who are infected with an STI are two-to-five times more likely than those uninfected to acquire HIV, the virus that causes AIDS, if they are exposed to the virus through sexual contact. ⁽⁴⁾ The importance of STI awareness, education and screening are paramount in addressing these preventable infections.

The increasingly asymptomatic nature of some STIs greatly increases public health concern for these infections. In females, about 70% of chlamydia infections are asymptomatic, while 40% of males report no symptoms. Without screening and treatment, up to 40% of chlamydia infections in females progress to pelvic inflammatory disease (PID). ⁽⁵⁾

PID is also be caused by gonorrhea. Gonorrheal infection rates have recently trended downward. However, it remains a significant concern as CDC recently reported indications of the growing resistance of gonorrhea to treatment. More information can be found at www.cdc.gov/std/gonorrhea/arg/default.htm.

Another STI, Human Papillomavirus (HPV), is the most commonly sexually transmitted infection. CDC estimates there are 40 million Americans currently infected with HPV with another 6 million becoming newly infected each year. Most who are infected do not know it. Signs and symptoms of HPV related problems include genital warts and cervical and other related cancers. Vaccines are available to prevent some common types of HPV infection. ⁽⁶⁾ More information can be found at http://health.mo.gov/living/wellness/immunizations/pdf/hpv_fact_sheet_bw.pdf

CDC's recommendations for routine STI screening include yearly chlamydia testing of all sexually active women age 25 or younger, older women with risk factors for chlamydial infections (those who have a new sex partner or multiple sex partners), and all pregnant women. ⁽⁷⁾ Testing locations are available statewide and can be found via www.hivtest.org or www.didjknow.org.

Health education, awareness and risk-reduction information is available through the Bureau of HIV, STD and Hepatitis including STI signs and symptoms, modes of transmission and preventive efforts. Further information can be obtained by contacting Stephanie Washington, Youth Health Educator or Ken Palermo at 573-751-6439 or via email: Stephanie.Washington@health.mo.gov or Ken.Palermo@health.mo.gov.

- 1) U.S. Department of Health and Human Services, Centers for Disease Control and Prevention. (2011). Trends in the Prevalence of Sexual Behaviors. Retrieved July 5, 2011 from the web: <http://www.cdc.gov/healthyouth/yrbs/index.htm>
- 2) U.S. Department of Health and Human Services, Centers for Disease Control and Prevention. "April is STD Awareness Month." *CDC Features*. March 30, 2010, Retrieved July 5, 2011 from the web: <http://www.cdc.gov/Features/index.html>
- 3) Missouri Department of Health and Senior Services. (2011) "2010 Epidemiologic Profiles of HIV, STD, and Hepatitis in Missouri." Retrieved July 5, 2011 from the web: <http://health.mo.gov/data/hivstdaids/data.php>
- 4) U.S. Department of Health and Human Services, Centers for Disease Control and Prevention. (2010). The Role of STD Detection and Treatment in HIV Prevention - CDC Fact Sheet. Retrieved July 5, 2011 from the web: <http://www.cdc.gov/std/hiv/default.htm>



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- 5) Maloney, Susan K and Johnson, Christianne. *Why Screen for Chlamydia? An Implementation Guide for Healthcare Providers*. Partnership for Prevention, Washington, DC. 2008.
- 6) U.S. Department of Health and Human Services, Centers for Disease Control and Prevention. (2009). [Genital HPV Infection - Fact Sheet](http://www.cdc.gov/std/hpv/stdfact-hpv.htm). Retrieved July 5, 2011 from the web: <http://www.cdc.gov/std/hpv/stdfact-hpv.htm>
- 7) U.S. Department of Health and Human Services, Centers for Disease Control and Prevention. (2011). "Chlamydia – CDC Fact Sheet." Retrieved July 5, 2011 from the web <http://www.cdc.gov/std/chlamydia/STDFact-Chlamydia.htm>

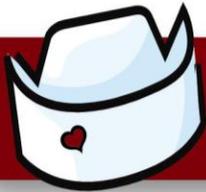
MMWR Sexual Identity, Sex of Sexual Contacts and Health-Risk Behaviors Among Students in Grades 9-

12: The Centers for Disease Control and Prevention's (CDC) Division of Adolescent and School Health (DASH) released in the June 6, 2011 edition of the Morbidity and Mortality Weekly Report, "Sexual Identity, Sex of Sexual Contacts, and Health-Risk Behaviors Among Students in Grades 9–12 in Selected Sites—Youth Risk Behavior Surveillance, United States, 2001–2009." The report documents the disproportionate rates at which sexual minority students—defined in this report as those who identify as gay, lesbian, or bisexual or who have sexual contact with persons of the same or both sexes—reported many health risks, including tobacco, alcohol, and other drug use; sexual risk behaviors; and violence. The report and supplemental materials are available at www.cdc.gov/healthyyouth/disparities/smy.htm.

Missouri Radon* Poster Contest: The Missouri Radon Poster Contest incorporates art, science and health lessons that you can encourage teachers to include in their curriculum. Not to mention, it gives your students and your school or organization the opportunity to be nationally recognized for raising radon awareness! Students ages 9-14 enrolled in a public, private, territorial, tribal, U.S. Department of Defense or home school—or a sponsoring club, such as an art, computer or science club; scouting organization; or 4-H club—can participate in the Radon Poster Contest. Posters must be submitted to the Missouri Department of Health and Senior Services, Bureau of Environmental Epidemiology between **August 1 and October 31, 2011**. Contact Carol Bell, 573-751-6102 or carol.bell@health.mo.gov for more information. More information about the National Radon contest may be found at: <http://sosradon.org/poster-contest/organizers>

***Radon** is a colorless, odorless, tasteless, and chemically inert radioactive gas. It is formed by the natural radioactive decay of uranium in rock, soil, and water. Naturally existing, low levels of uranium occur widely in Earth's crust. It can be found in all 50 states. Unless you test for it, there is no way of telling how much is present.

Public Health E-Cards now available on DHSS Website: E-cards are electronic postcards that can send public health messages in the click of a button. Choose one of the current topics on summer safety, flooding, avoiding ticks and mosquitoes, and salmonella risk from handling chicks. Additional soon-to-be-available themes include the new national food safety campaign, re-enactment event health tips, and cooling centers. They can be found at <http://health.mo.gov/ecard/index.php>. All you need is an e-mail address to send a personalized health message directly to cell phones or personal computers to parents, staff or any targeted group within your community. Check them out today! For more information or suggestions for additional topics, contact Alyce.Turner@health.mo.gov.



SCHOOL NURSE UPDATE

Missouri Department of Health and Senior Services

ThinkFirst Missouri! **ThinkFirst** Missouri is an award-winning trauma prevention program of the University of Missouri-Columbia School of Medicine. The mission of **ThinkFirst** is to educate the public, especially young people, about their vulnerability to brain and spinal cord injury, common causes of these injuries, and how to prevent them.

The primary program of **ThinkFirst** Missouri is the fast-paced school assembly program delivered to elementary, middle, and senior high school students. Each presentation features the compelling firsthand testimony of a young survivor of traumatic injury. These speakers motivate audiences to take personal responsibility and make smart choices.

Assemblies are presented in at least 50 schools, reaching 17,000 students each year. Thanks to generous state and private support, **ThinkFirst** programs are available to every school in Missouri at no cost. To learn more about **ThinkFirst** Missouri, or to schedule a presentation, e-mail Penny Lorenz at lorenzp@health.missouri.edu, call (573) 882-1176, or visit <http://www.thinkfirst.missouri.edu>.



To order emergency preparedness information for your school, visit the Ready in 3 School website at <http://health.mo.gov/emergencies/readyin3/schools.php>.

Free Driving Drug Free Posters: <http://store.samhsa.gov/product/ATI-1POS11>