

**Virginia Department of Education
Office of Student Services
2013-2014
Chronic Health Conditions Report**

School Division: Arlington County

Name of Person Completing this Report: Maryhelen Belknap

Contact Number for Person Completing this Report: 703 228-1651

Health Condition	Total Students with Condition
Diabetes:	
1. Type I	1. 42
2. Type II	2. 3
3. Blood glucose monitoring (requiring any assistance or documentation by the school health care provider)	3. 28
4. Insulin Injections	4. 20
5. Insulin Pump Management:	5. 17
Asthma	1878 (Total with asthma)
1. Receiving inhaled medication at school	1. 532
2. Receiving nebulizer tx at school	2. 6
Seizure Disorders	124 (Total with seizures)
1. Diastat, prn	1. 26
Cardiac Disorders	73
Cystic Fibrosis	8
Kidney Disorders	38 (Total with kidney disorders)
1. Self catheterization	1. 7
2. Staff performs catheterization	2. 1
Cancer	16
Tube Feeding	17
Impaired Mobility	81 (Total with any impairment in mobility)
1. Wheelchair dependent	1. 37
2. Prosthetics	2. 10
Hearing Impaired	165 (Total with impairment)
1. Cochlear Implant	1. 11
2. Hearing Aid	2. 43
Ventilator Dependent	1
Tracheostomy Tube	5
ADD/ADHD	371
Allergies	
1. Food w/ Epipen	1. 461
2. Food w/o Epipen	2. 842
3. Insect w/ Epipen	3. 16

4. Insect w/o Epipen	4. 29
5. Latex w/ Epipen	5. 3
6. Latex w/o Epipen	6. 20
Do Not Resuscitate Orders	0
Autism Spectrum Disorder	224
Acquired Traumatic Brain Injury	30
Sickle Cell Disease	11
Juvenile Rheumatoid Arthritis	6
Cerebral Palsy	41
Celiac Disease	41
Migraines	82
Oxygen Dependent	2
Diagnosed Mental Health Condition	134

Total number of student health/emergency cards reviewed this school year	18775
Total number of students in your school	22938
Are epinephrine auto-injectors stored in safe, unlocked, and accessible locations in ALL school buildings?	Yes X No

Instructions for completing the Chronic Health Conditions Report

To the school nurse:

1. This is a write on form. Save it to your hard drive, complete the report and attach it to an e-mail to your school nurse coordinator.
2. There are 5 sections above that ask for “Total with...” Please fill in the total number of students you have with that condition in the block next to those words. In addition, please answer the questions in the same section as the total. The secondary numbers in those sections may not add up to the total number of students who have the chronic illness.

To the school nurse coordinator:

1. Please collect a report from each school and compile the numbers for each category listed.
2. Please fill out a blank form and e-mail the report to Sheila.Beard@doe.virginia.gov by November 15th. **She should only receive one report for each school division.**

Thank you for your time and effort. This data will be invaluable when planning programs and services. It will also be useful when our office is asked for statewide data to support school nursing services.