



# WebPams JHEALTH Overview

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# WebPams HEALTH OVERVIEW

Click on **Health Module** Button in the navigation bar. Then click on Health System.

A setup box will appear to choose the Year, District, School, and Grade Level.

You can also choose to show SSN. Ask your district coordinator whether choose how the district obtains the Medicaid eligibility file: DHH File or Unisys File.

The program opens with the first student in the list. If you need to find a student follow down to the bottom of the screen to the Find button. The student is found and brings you to the **'Demo' tab** (Demographics).

The **"Demo"** tab contains demographic information on the student. Most of this information is pulled from the Student Master module. In most districts, the school's secretary enters this information. If you find some item(s) that need correcting, contact that person in the school to make the corrections.

The top buttons alert you if the student is SPED, 504, or LEP – button is red. Hoover over the button to see additional information.

The screenshot shows the 'Health System Setup' dialog box with the following fields: Year (1213), District (027), School (004), Grade (empty), Hide SSN (checked), and Use (DHH File selected). Below it is the student demographic form for AUGUSTINE MARK DAVID (DOB: 07/09/2002). The form includes fields for Name, Guardian, Father, Mother, Emergency, Resides With, Homeroom, Counselor, Special Codes, School Clubs, Alert Codes, Transportation, SS Number, Grade, Gender, Ethnic, Birth Date, Physician Name, Dentist Name, Medical Card, IHP Date, and BSE/TSE. A red box highlights the SS Number, Grade, Gender, Ethnic, and Birth Date fields, with a red arrow pointing to the 'iGear' icon. A yellow box highlights the Physician Name, Dentist Name, and Medical Card fields. A red box highlights the Entry Date, Leave Date, Country Entry, SBLC Code, School ID, District ID, Year, and Student ID fields. Red arrows point from the 'From Student Master...' text to the SS Number, Leave Date, and Student ID fields. A green arrow points from the 'Yellow fields are editable by Health personnel' text to the Physician Name, Dentist Name, and Medical Card fields. The bottom of the form has tabs for Demo, Asthma, IHP, Consultation, History, Log, and Addresses, and buttons for Save, Prev, Next, Setup, and Find.

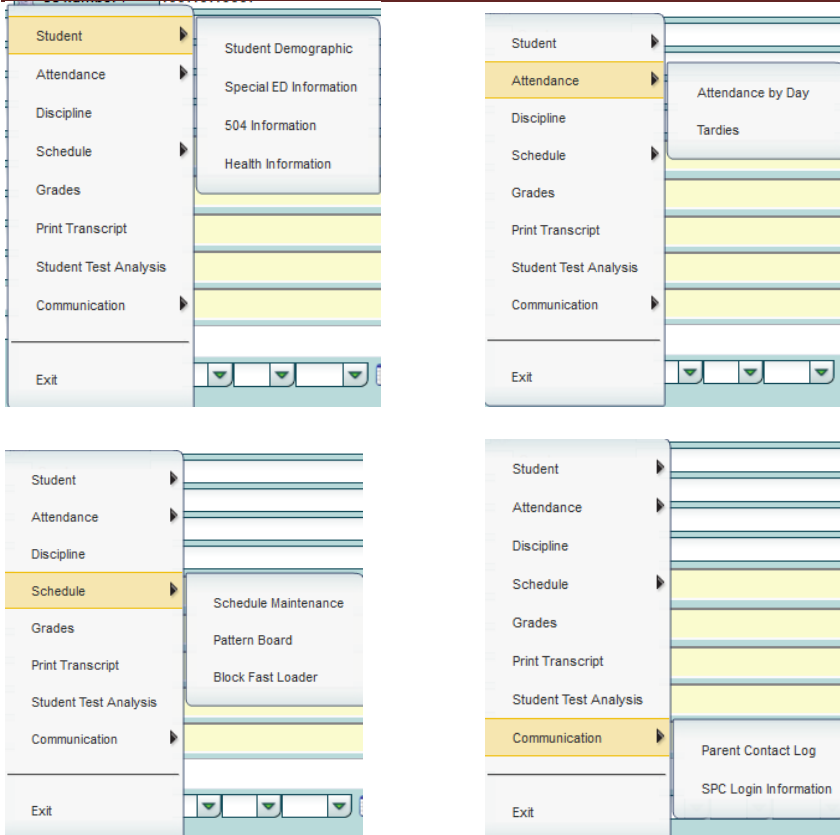
Click on the **iGear** (gray wheel/gear) and a gray box appears with a shortcut menu to information on the student. Because of security you may or may not be able to access the information.

If you have security rights to the items on the gray box, you can see the student's schedule, attendance by day, etc. Click on the Exit to close gray box.

Each of the arrows expands to more choices.

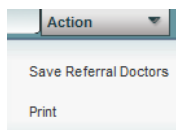
The screenshot shows the 'iGear' shortcut menu with the following options: Student, Attendance, Discipline, Schedule, Grades, Print Transcript, Student Test Analysis, Communication, and Exit.

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Nurses can enter a few items on this screen. Only the boxes in yellow can be updated with Health security permissions. White boxes show information which is pulled from the student master, if available. If you spot errors in other boxes, please notify your school's office personnel to make necessary changes. This means you can enter/change information in the following boxes: Physician Name, Physician Phone, Dentist, Dentist Phone, and Medical Card. The date of BSE/TSE can also be entered. After change(s) are made on this screen, you must click the **Save** button on the bottom row of buttons.

Under the Action to the top right, you can save referral doctors for Vision and Hearing.



## Review of Tab and Buttons at the bottom of the screen:



# WebPams HEALTH OVERVIEW

**Asthma Tab** – Tab used to enter all information concerning asthma and any medication(s). If any information is added, changed or deleted, remember to click on the **“Save”** at the bottom of the screen.

Mild  
  Moderate  
  Severe  
  None

Does child experience asthma symptoms when exercising? :  
  No  
  Yes

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**Triggers**

Environmental :

---

Chemical / Pesticide :

---

Other :

---

Asthma Medication

**IHP Tab** – This tab is used to enter the IHP plan for students. The IHP Tab leads you to the complete IHP which includes the Cover Form, the Care Plan, and the Emergency Plan. You must create a Care Plan or Emergency Plan to complete the Cover Form.

**Cover Form:**

Cover Form   **Care Plan**   Emergency Plans

Select a Cover Form : ▼  
 Delete  
 Clone  
 From : ▼ ▼ ▼ ▼ ▼ ▼  
 To : ▼ ▼ ▼ ▼ ▼ ▼

Brief Medical History / Specific Health Care :

D	PROCEDURE	ADMINISTERED BY	EQUIPMENT	PROVIDED / MAINTAINED BY	AUTHORIZED BY

See EP  
  See 504 / IAP

Class / School Modifications, Explain :

Psychosocial Explain :

Medication, List :

Student Participation

Self-Care Skill Level, Explain :

Activity Level - Explain Other : ▼

Allergies - (if yes, Explain) :  
  No  
  Yes

Transportation Needs (Explain) : ▼

Diet - Explain if not blank : ▼

Standard Safety Precautions  
 Standard District Emergency Plan  
 Special Precautions

Safety Precautions Description :

Demo  
 Asthma  
 **IHP**  
 Consultation  
 History  
 Log  
 Addresses

Save  
 Prev  
 Next  
 Setup  
 Find

# WebPams HEALTH OVERVIEW

## Care Plan:

Cover Form Care Plan Emergency Plans

Select a Plan: [Dropdown] Delete From: [Date Picker] To: [Date Picker]

New

Nurse Assessment: Diagnosis: Goals: Interventions: Outcomes:

Demo Asthma IHP Consultation History Log Addresses

Save Prev Next Setup Find

Option 1: Create a New Plan by clicking the button “**New**”.

Option 2: Select an existing plan from the drop-down list, edit the plan and then **Save**.

Option 3: Select an existing plan and select the “**Delete**” button to delete the plan.

## Emergency Plan:

Cover Form Care Plan Emergency Plans

CurrentPlans: [Dropdown] New From: [Date Picker] To: [Date Picker]

No Emergency Plans

Demo Asthma IHP Consultation History Log Addresses

Save Prev Next Setup Find

To create a new emergency plan, select the “**New**” button to create a plan. Some information is provided and can either be edited and/or deleted and new information entered. If you have an electronic document already created, it can be copied from other software and pasted inside the WebPams screen.

# WebPams HEALTH OVERVIEW

These are the plans available for use:

ALLERGY ASTHMA AUTONOMIC DYSREFLEXIA CHOKING - ASPHYXIA COCHLEAR IMPLANT DEEP VEIN THROMBOSIS DIABETES	EPI-PEN GASTROSTOMY FEEDING TUBE HEART CONDITION HYPOGLYCEMIA KIDNEY - RENAL MEDICATION - SIDE EFFECTS	MYASTHENIA GRAVIS RETINAL DETACHMENT SEIZURES SICKLE CELL ANEMIA TRACHS V-P SHUNT OTHER
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**Consultation Tab** – This tab is used to enter the nurse consultation.

DELETE	DATE	Time	DX Code	Reason	Action Taken	SAVE	NURSE	GRADE

This can serve as the electronic version to a paper log for nurses. A complete district view by supervisors can give a total number of consults made by nurses. This information is also used by the Medicaid module to pull Medicaid eligible students into a transmission file for billing nursing consultations. First you find the student by clicking on the **Find** button. The school and grade level of the student are brought over from the Student Master module. Click in the **“Date”** box to enter the date of the consult and enter the time, if you so desire. Remember to use military time – XX:XX. When you click on the **“DX Code”** box, you will see a window containing diagnosis codes. Choose the appropriate code by clicking in the check box. This brings in the **DX Code** and the **Reason**. You can add text to the reason, if needed, and then enter the **Action Taken**. The name of the nurse who logged into WEBPAMS will appear under the Nurse’s column. Then, finally, click the **green box** under the **“Save”** column to save the consultation.

## History Tab

When clicking on the **History** tab at the bottom of the screen, these tabs appear at the top of the screen.

Info 1
Info 2
Medications
Vision
Hearing
Immunization
Scoliosis
Hgt/Wgt
Dental
Family Hist

Some tabs have their own **Save** feature. After entering information on the line scroll over to the right and click on the **Green box** with the Save above it. This is how to save the line you entered. The Red Box to the right of the line is the Delete row box – allows you to delete the entire row.

## Info1 Tab:

Info 1
Info 2
Medications
Vision
Hearing
Immunization
Scoliosis
Hgt/Wgt
Dental
Family Hist

Check All That Apply

<input type="checkbox"/> ADD/ADHD	<input type="checkbox"/> Cochlear Implant	<input type="checkbox"/> Fainting	<input type="checkbox"/> Heart Condition	<input type="checkbox"/> Shunt
<input type="checkbox"/> Anemia	<input type="checkbox"/> Color Blind	<input type="checkbox"/> Feeding Tube	<input type="checkbox"/> Hemophilia	<input type="checkbox"/> Sickle Cell
<input type="checkbox"/> Asthma	<input type="checkbox"/> Convulsions	<input type="checkbox"/> Freq. Colds	<input type="checkbox"/> Meningitis	<input type="checkbox"/> Skin Problems
<input type="checkbox"/> Bone Disease	<input type="checkbox"/> Cystic Fibrosis	<input type="checkbox"/> Freq. Earaches	<input type="checkbox"/> Mouth Breather	<input type="checkbox"/> Tires Easily
<input type="checkbox"/> Breathing Problems	<input type="checkbox"/> Dental Problems	<input type="checkbox"/> Freq. Headaches	<input type="checkbox"/> Pneumonia	<input type="checkbox"/> Tonsillitis
<input type="checkbox"/> Cancer	<input type="checkbox"/> Depression	<input type="checkbox"/> Freq. Nose Bleeds	<input type="checkbox"/> Poor Appetite	<input type="checkbox"/> Tracheostomy
<input type="checkbox"/> Cerebral Palsy	<input type="checkbox"/> Diabetes	<input type="checkbox"/> Freq. Sore Throat	<input type="checkbox"/> Pregnant	<input type="checkbox"/> Tuberculosis
<input type="checkbox"/> Chicken Pox	<input type="checkbox"/> Digestive Disorder	<input type="checkbox"/> Freq. Urination	<input type="checkbox"/> Prosthetic Eye	<input type="checkbox"/> Tubes in Ears
<input type="checkbox"/> Clumsiness	<input type="checkbox"/> Eczema	<input type="checkbox"/> Hay Fever	<input type="checkbox"/> Rheumatic Fever	<input type="checkbox"/> Usher's
<input type="checkbox"/> CMV	<input type="checkbox"/> Emotional Psychological	<input type="checkbox"/> Hearing Problems	<input type="checkbox"/> Seizures	<input type="checkbox"/> Vision Problems
<input type="checkbox"/> Other				

Other Health Problems :

Condition Details :

# WebPams HEALTH OVERVIEW

Choose appropriate conditions by checking one or more items. Text boxes are available at the bottom. Remember to click the **“Save”** button at bottom of the screen to save the information.

## Info2 Tab:

Info 1	Info 2	Medications	Vision	Hearing	Immunization	Scoliosis	Hgt/Wgt	Dental	Family Hist	
Allergies										
<input type="checkbox"/> Insect Sting/Bites		<input type="checkbox"/> Drugs		<input type="checkbox"/> Foods		<input type="checkbox"/> Plants		<input type="checkbox"/> Animals		<input type="checkbox"/> Other
Other Allergies :		<input style="width: 100%;" type="text"/>								
Allergies Description :		<input style="width: 100%;" type="text"/>								
Medication										
<input type="checkbox"/> Allergic to Meds?		<input style="width: 100%;" type="text"/>								
<input type="checkbox"/> Medical Treatment		<input style="width: 100%;" type="text"/>								
Special Diet										
<input type="checkbox"/> Blended		<input type="checkbox"/> Soft Diet		<input type="checkbox"/> Low Salt		<input type="checkbox"/> Low Fat		<input type="checkbox"/> Liquid		<input type="checkbox"/> Supplement
<input type="checkbox"/> Low Sugar		<input type="checkbox"/> GlutenFree								
Diet Description :		<input style="width: 100%;" type="text"/>								

Enter any needed information by checking one or more items. Text boxes are available to give more details. Remember to click the **“Save”** button at bottom of the screen to save the information.

## Medication Tab

Info 1	Info 2	Medications	Vision	Hearing	Immunization	Scoliosis	Hgt/Wgt	Dental	Family Hist					
Medications that are NOT given at school														
DELETE	Medication	Begin Date	End Date	Administer	Dosage	M	T	W	R	F	Sat	Sun	SAVE	Comments
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Information Only - Medications that have been entered into the medications module to be given at school														
Medication	Doctor First	Doctor Last	Date Rx	Expiration Date	Dosage									
asprin	Doc	Holliday	2013-11-18	2014-05-25	1									
asprin	Doc	Holliday	2013-11-18	2014-05-25	1									

The top portion of this window includes **medications that the student takes at home only.**

Enter the Medicaid Name, Begin Date, End Date, Administer Quantity, Dosage and/or Units, check off day of the week and any needed Comments. Click the Save button at the end of the line.

The bottom portion of this window includes information only from the Medication Module in the Health System. These medications are entered into the Medication Program and cannot be edited here.

# WebPams HEALTH OVERVIEW

## Vision Tab

Info 1	Info 2	Medications	Vision	Hearing	Immunization	Scoliosis	Hgt/Wgt	Dental	Family Hist														
DELETE	DATE	SC V	AC-R	AC-L	MF	MB	CV	NR	NL	Rx	GL	TOOL	PL	R	L	COMMENT	FOLLOW UP 1	FOLLOW UP 2	SAVE	NURSE	GRADE		
	2013-12-12	N	Not Tested	Not Tested	Not Tested	Not Tested	Not Tested	Not Tested	Not Tested	None	None	NOT TESTED									ISTRE, CATHERINE	12	
	2013-11-15		Pass	Pass	Not Tested		Not Tested	Pass	Pass	No	None	TITMUS	Pass									12	
	2013-11-14		Pass	Pass	Not Tested		Not Tested	Pass	Pass	No	None	Allen Cards	Pass									12	
	2010-10-22	N	Pass	Pass	Not Tested	Not Tested	Not Tested	Not Tested	Not Tested	No	Glasses	TITMUS	Not Test									ISTRE, LAURA	09
	2008-11-17	N	Pass	Pass	Not Tested	Not Tested	Not Tested	Not Tested	Not Tested	No	Glasses	TITMUS	Pass									THOMPSON, STEPHEN	07

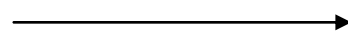
This tab allows vision results to be posted/edited on a single student. To save the line at the top, use the **Save** at end of line. Additional comments are available at the bottom of screen. Remember if information entered in the comments; use the **Save** button at bottom of screen.

The other existing fields have drop-down lists to choose the item:

Delete Button, Date, SC V (see below), AC-R: Acuity Right; AC-L: Acuity Left; MF: Muscle Fusion; MB: Muscle Balance; CV: Color Vision; NR: Near Right Test, NL: Near Left Test, Rx: Prescription; GL: Glasses; Tool: Screening Tool Used; PL: Plus Lens; R: Right; L: Left; Comments: Vision Comments, Follow Up 1: Date; Follow Up 2: 2<sup>nd</sup> Date; Save: Save Button; Nurse: Nurse completing the screening; Grade.

### Vision Suspected Condition:

You can place up to four conditions for each student.

The conditions types are 

- A Medical
- B Vision
- C Hearing
- D Dental
- E Nutritional
- F Developmental
- G Abuse/Neglect
- H Psychological/Social
- I Speech/Language

**Vision Suspected Condition** ✖

Condition Type :

Condition Type :

Condition Type :

Condition Type :

Referral Type :

Referral Reason :

You can also indicate the Referral Type

Referral Type :

Referral Reason :

O Offsite Referral (Requires Condition Code)  
 I In House Referral  
 R Retest at a later date

and Referral Reason by entering a code from the drop-down list.



# WebPams HEALTH OVERVIEW

## Hearing Tab

Info 1	Info 2	Medications	Vision	Hearing	Immunization	Scoliosis	Hgt/Wgt	Dental	Family Hist												
DELETE	DATE	SC H	H R0.5	HL 0.5	HR 1	HR 2	HR 4	HL 1	HL 2	HL 4	HR	HL	R IM	L IM	COMMENT	FOLLOW UP 1	FOLLOW UP 2	SAVE	NURSE	GRADE	
	2013-12-12	N	Not Tested	Not Tested	Not Tested	Not Tested	Not Tested	Not Tested	Not Tested	Not Tested	Not Tested	Not Tested	Not Tested	Not Tested						ISTRE, CATHERINE	12
	2013-11-15		Pass	Pass	Pass	Pass	Pass	Pass	Pass	Pass	Pass	Pass	Pass	Pass							12
	2013-11-14		Pass	Pass	Pass	Pass	Pass	Pass	Pass	Pass	Pass	Pass	Pass	Pass							12
	2010-10-22	N	Not Tested	Not Tested	Pass	Pass	Pass	Pass	Pass	Pass	Pass	Not Tested	Not Tested	Not Tested	Not Tested					ISTRE, LAURA	09
	2008-11-17	N	Not Tested	Not Tested	Pass	Pass	Pass	Pass	Pass	Pass	Pass	Not Tested	Not Tested	Not Tested	Not Tested					THOMPSON, STEPHEN	07
	1006-10-16	N	Not Tested	Not Tested	Pass	Pass	Pass	Pass	Pass	Pass	Pass	Not Tested	Not Tested	Not Tested	Not Tested					THOMPSON, STEPHEN	05

Hearing Comments

This tab allows hearing results to be posted/edited on a single student. Additional comments are available at the bottom of screen. Remember if information entered in the comments; use the **Save** button at bottom of screen. To save the line at the top, use the **Save** at end of line.

The other existing fields have drop-down lists to choose the item:

Delete Button, Date, \_SC H: Suspected Conditions for Hearing (same as for Vision above);  
 HR 0.5: Right at 0.5khz; HR 1: Right at 1khz; HR 2: Right at 2khz; HR 4: Right at 4khz; HL 0.5: Left at 0.5khz; HL 1: Left at 1khz; HL 2: Left at 2khz; HL 4: Left at 4khz; HR: Right Test, HL: Left Test, R IM: Right Impedance, L IM: Left Impedance, Comments: Nurse's comments; Follow-up 1 date; Follow-up 2 date; Save: Save button, Nurse: Nurse completing the screening; Grade.

**Immunization Tab** – This tab allows you to enter immunizations for a student.

Info 1	Info 2	Medications	Vision	Hearing	Immunization	Scoliosis	Hgt/Wgt	Dental	Family Hist												
DELETE	Vaccine	Date 1	Date 2	Date 3	Date 4	Date 5	Date 6	Due Date	Comments	SAVE	Exempt	Complete									

Are immunizations up to date? REASON IF NOT :

Delete Button, Vaccine, Date 1, Date 2, Date 3, Date 4 Date 5, Date 6, Due Date – Next date this vaccine is due, Comments, Save button, Exempt – Exempt from this vaccine, Complete – Completed this vaccine.

# WebPams HEALTH OVERVIEW

**Scoliosis Tab** – This tab allows scoliosis results to be posted/edited on a single student.

Info 1	Info 2	Medications	Vision	Hearing	Immunization	Scoliosis	Hgt/Wgt	Dental	Family Hist
DELETE	Date	Pass	RF	Follow Up	Comments	SAVE	Nurse	Grade	
	2013-04-10	Not Tested	No				Override	10	
	2010-03-25	Not Tested	No				THOMPSON, STEPH 08		

Scoliosis Comments

Delete Button; Date, Pass; RF: Referred to physician; Follow-up date; Comments: Nurse comments; Save at end of line, Nurse: Nurse entering the information, Grade.  
 Additional comments field at bottom of screen. Remember, if information entered here, use the Save button at bottom of screen.

## Height/Weight Tab

Info 1	Info 2	Medications	Vision	Hearing	Immunization	Scoliosis	Hgt/Wgt	Dental	Family Hist					
DELETE	Date	Height	Weight	BMI	Percentile	BPS	BPD	Pulse	TEMP	Resp	Comments	SAVE	Nurse	Grade
	2012-12-11	42	45	17.93									field, field	12

Growth Comments

Delete Button; Enter Date, Height (in inches) and weight (in pounds) and once the save button on the end of the line has been clicked; the BMI and Percentile are calculated and returned on that line. You can also enter BPS: Systolic BP, BPD: Diastolic BP, Pulse, Temp, Respiration, Comments: Nurse Comments; Save at end of line, Nurse: Nurse entering the information, and Grade. Additional growth comments can be entered at the bottom of screen. Remember, if information entered here; use the Save button at bottom of screen.

## Dental information

Info 1	Info 2	Medications	Vision	Hearing	Immunization	Scoliosis	Hgt/Wgt	Dental	Family Hist					
DELETE	Date	CAV	Caries	Sealants	# Sealants	Treatment	Ethnic	Lunch	RF	Follow Up	SAVE	Comments	Nurse	Grade
	2013-08-21	No	Yes	Yes	2								field, field	12

Dental Comments

Delete Button, Date, CAV: Untreated Cavities, Caries; Sealants; # Sealants: choose number from list; Treatment: No Obvious Problem, Early Dental Care, Urgent Care; Ethnic; Lunch Status; RF: Referred to physician; Follow-up date; Save; Comments: Nurse's comments; Grade, Age.

# WebPams HEALTH OVERVIEW

Family/History can be entered on the following tabs: Info1, Info2, or Family Hist

Note: If conditions are indicated here, they can be seen in the Student Master on the “Health” button which will also turn red to alert the secretaries and office staff to any medical conditions or allergies. So, it is very important to mark the medical conditions on these tabs.

## Family History Tab:

DELETED	Name	DOB	Gender	Gen Health	SAVE

Details about family history can be entered on the screen. Family Information has check boxes to choose the issue and a comment box to give comments. Parent information and Sibling information can be entered. Additional Notes may be entered also.

Notice the line for sibling information – Save at end of line. All other information entered must have the Save button to save the information entered.

The Log tab is a screen which is password protected for nurses to access. This is where other information is stored that is not found on other screens or to document sensitive information which needs to be noted.

Please enter Password

Please enter the password to view Student's Log information

Password : [input field]

Ok Cancel

# WebPams HEALTH OVERVIEW

**Address tab** provides contact information from the Student Master on a single screen.

<b>Address1</b> : 6007 FINANCIAL PLAZA <b>Address2</b> : SUITE 215 City : SHREVEPORT State : LA Zip : 71129 Home Phone : (318) 868-8000 Cell Phone : Email :	<b>Address1</b> : 6007 FINANCIAL PLAZA <b>Address2</b> : SUITE 215 City : SHREVEPORT State : LA Zip : 71129	<b>Emergency Name</b> : <b>Address1</b> : <b>Address2</b> : City : State : Zip : Home Phone : Cell Phone : Work Phone : Beeper :
Guardian Address <b>Guardian Name</b> : <b>Address1</b> : <b>Address2</b> : City : State : Zip : Home Phone : Cell Phone : Work Phone : Beeper : Email :	Father Address <b>Father Name</b> : ACHANE II DARRYL <b>Address1</b> : 6007 FINANCIAL PLAZA <b>Address2</b> : SUITE 215 City : SHREVEPORT State : LA Zip : 71129 Home Phone : (318) 868-8000 Cell Phone : Work Phone : (318) 868-8000 Beeper : Email :	Mother Address <b>Mother Name</b> : PRUDHOMME REBECCA <b>Address1</b> : 6007 FINANCIAL PLAZA <b>Address2</b> : SUITE 215 City : SHREVEPORT State : LA Zip : 71129 Home Phone : (318) 868-8000 Cell Phone : Work Phone : (318) 868-8000 Beeper : Email :