



JCampus JHEALTH Overview

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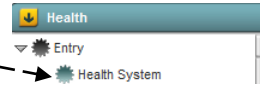
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<http://www.edgear.com>



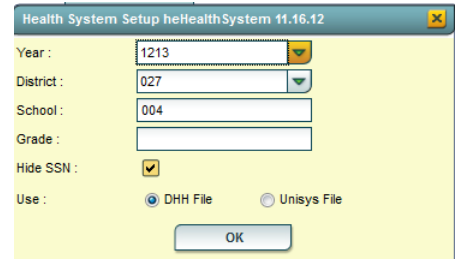
JCampus HEALTH OVERVIEW

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.

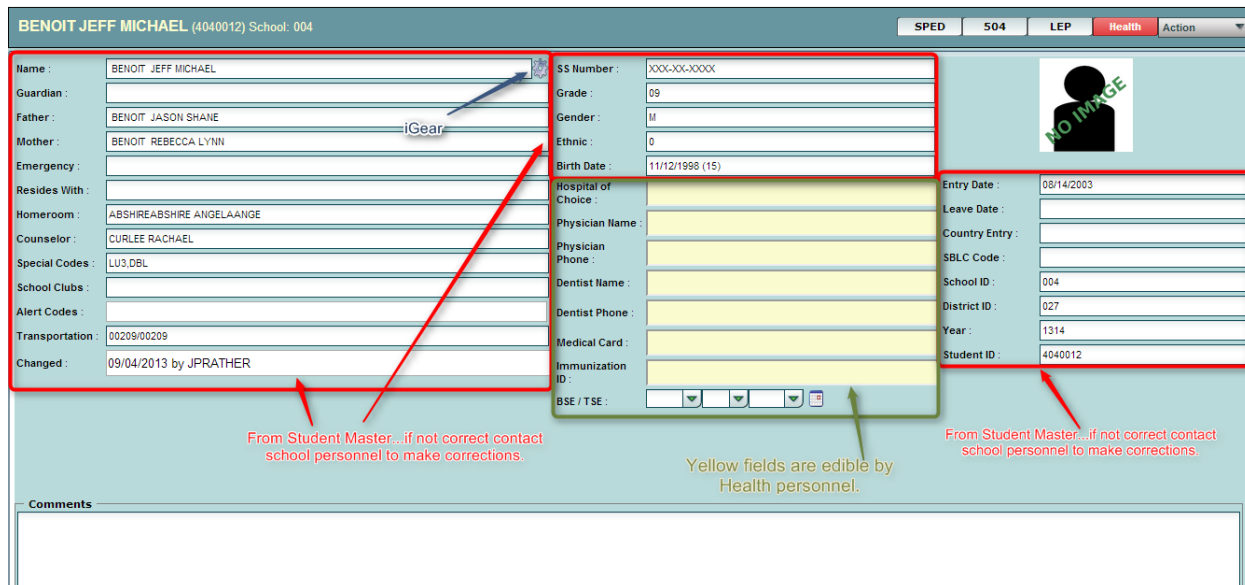
You can also choose to show SSN. Ask your district coordinator whether to choose how the district obtains the Medicaid eligibility file: DHH File or Unisys File.



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, LEP, or Health – button is red. Hoover oven or click on the button to see additional information.

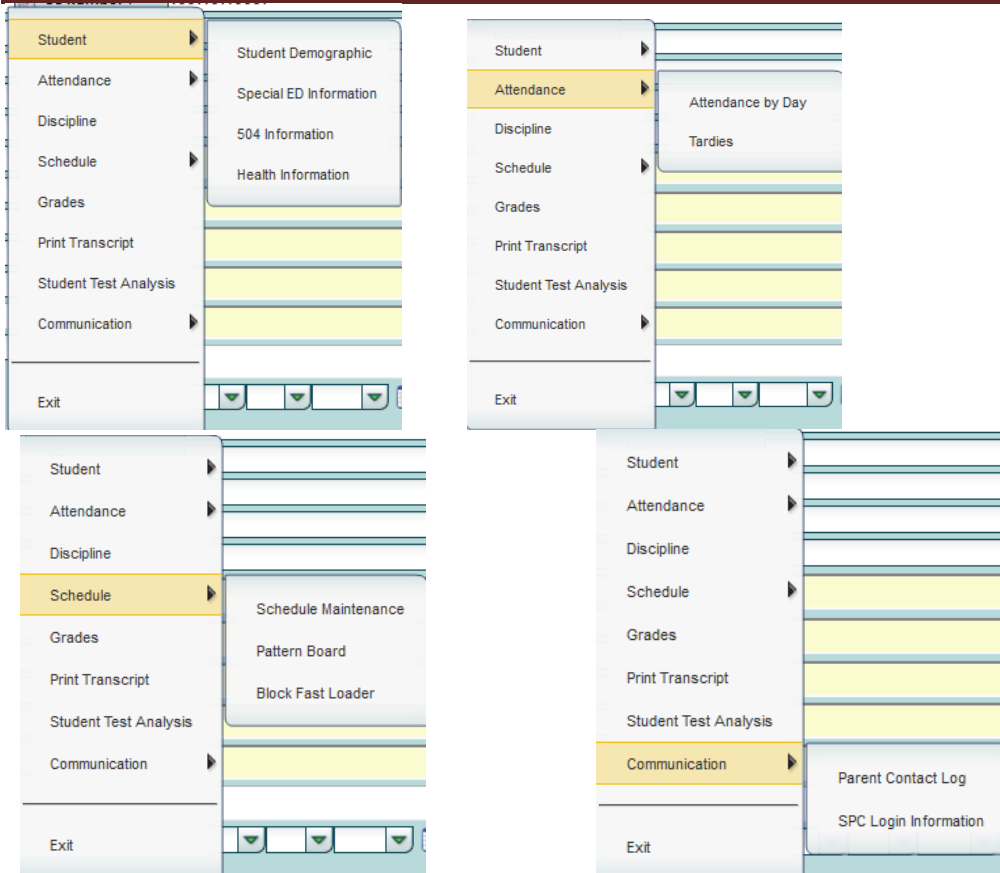


Click on the iGear (gray wheel/gear) and a gray box appears with a shortcut menu to information on the student. Because of security you may or may not be able to access the information.

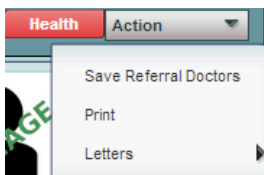
If you have security rights to the items on the gray box, you can see the student's demographic information, schedule, attendance by day, etc. Click on the Exit to close gray box.

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: Hospital of Choice, Physician Name, Physician Phone, Dentist, Dentist Phone, etc.

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Under the **Action** to the top right, you can save referral doctors for Vision and Hearing, Print various reports, and Letters.

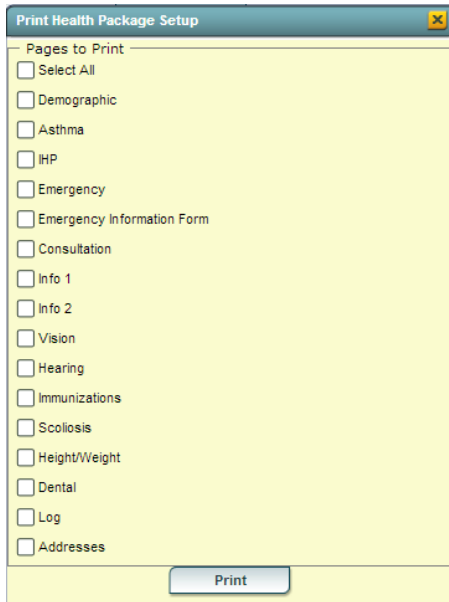


Referral Doctors for Vision and Hearing:

REFERRALS FOR VISION AND HEARING	
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>Vision Referral</p> <p>First: <input type="text"/></p> <p>Last: <input type="text"/></p> <p>AC: <input type="text"/></p> <p>PRE: <input type="text"/></p> <p>No: <input type="text"/></p> </div> <div style="width: 45%;"> <p>Hearing Referral</p> <p>First: <input type="text"/></p> <p>Last: <input type="text"/></p> <p>AC: <input type="text"/></p> <p>PRE: <input type="text"/></p> <p>No: <input type="text"/></p> </div> </div>	
<input type="button" value="Save"/> <input type="button" value="Close"/>	

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Print reports:



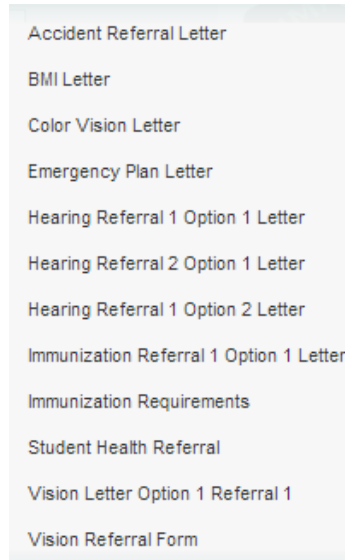
Print Health Package Setup

Pages to Print

- Select All
- Demographic
- Asthma
- IHP
- Emergency
- Emergency Information Form
- Consultation
- Info 1
- Info 2
- Vision
- Hearing
- Immunizations
- Scoliosis
- Height/Weight
- Dental
- Log
- Addresses

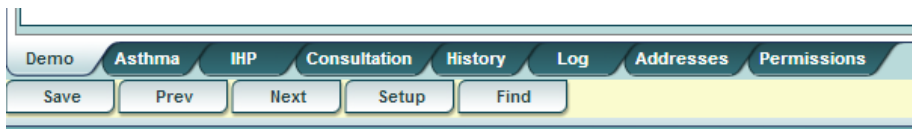
Print

Letters to Print:



- Accident Referral Letter
- BMI Letter
- Color Vision Letter
- Emergency Plan Letter
- Hearing Referral 1 Option 1 Letter
- Hearing Referral 2 Option 1 Letter
- Hearing Referral 1 Option 2 Letter
- Immunization Referral 1 Option 1 Letter
- Immunization Requirements
- Student Health Referral
- Vision Letter Option 1 Referral 1
- Vision Referral Form

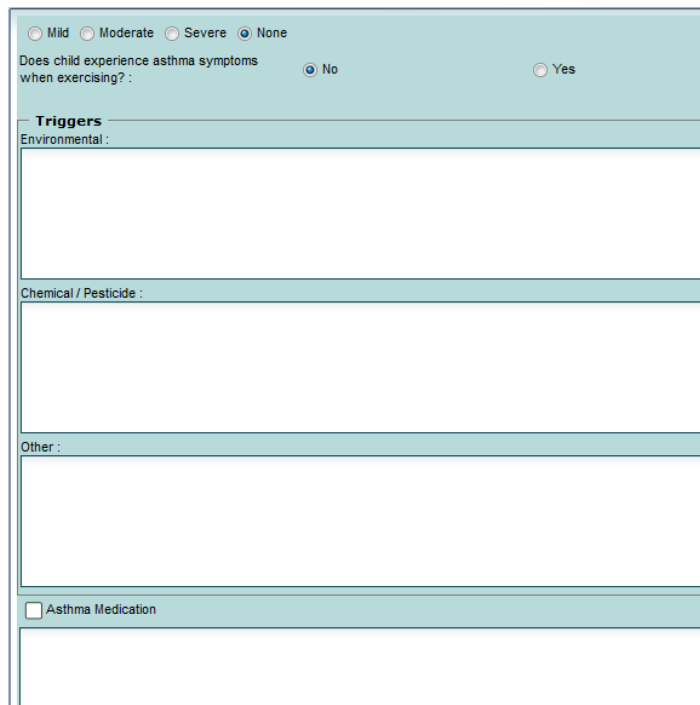
Review of Tab and Buttons at the bottom of the screen:



Demo **Asthma** IHP Consultation History Log Addresses Permissions

Save Prev Next Setup Find

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

Triggers

Environmental :

Chemical / Pesticide :

Other :

Asthma Medication

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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: Cover -- | 1579 Delete From: To: Nurse: Clone

Brief Medical History / Specific Health Care:

D	PROCEDURE	ADMINISTERED BY	EQUIPMENT	PROVIDED / MAINTAINED BY	AUTHORIZED BY

See IEP See 504 / IAP

Class / School Modifications, Explain:

Psychosocial, Explain:

Medication, List:

Student Participation

Self-Care Skill Level, Explain:

Activity Level - Explain Other: Ambulatory

Allergies - (if yes, Explain): No Yes

Transportation Needs (Explain): Specialized Bus

Diet - Explain if not blank: Regular

Standard Safety Precautions
 Standard District Emergency Plan
 Special Precautions

Safety Precautions Description:

Care Plan:

Cover Form Care Plan Emergency Plans

Select a Plan: NO CARE PLANS New From: To: Nurse:

Nurse Assessment: Diagnosis: Goals: Interventions: Outcomes:

Demo Asthma IHP Consultation History Log Addresses Permissions

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.

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Emergency Plan:

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 JCampus screen.

These are the plans available for use:

ALLERGY	EPI-PEN	MYASTHENIA GRAVIS
ASTHMA	GASTROSTOMY FEEDING TUBE	RETINAL DETACHMENT
AUTONOMIC DYSREFLEXIA	HEART CONDITION	SEIZURES
CHOKING - ASPHYXIA	HYPOGLYCEMIA	SICKLE CELL ANEMIA
COCHLEAR IMPLANT	KIDNEY - RENAL	TRACHS
DEEP VEIN THROMBOSIS	MEDICATION - SIDE EFFECTS	V-P SHUNT
DIABETES		OTHER

Consultation Tab – This tab is used to enter the nurse consultation.

Delete	School	Grade	Date	Time	DX Code	Reason	Action Taken	Nurse	Save	Recnum
	004	10								

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 consults.

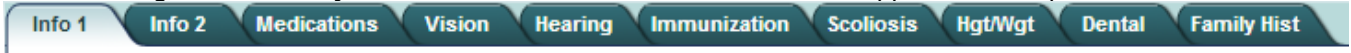
First you find the student by clicking on the **Find** button. The school and grade level of the student are brought over from the Student Master module. Click in the “**Date**” box to enter the date of the consult and enter the time, if you so desire. Remember to use military time – XX:XX. When you 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**. Your

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name should appear under the Nurse's column. The name of the nurse who logged into JCampus will appear in this box. Then, finally, click the **green box** under the "S" 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.



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 S above it. This is how to save the line you entered. The Red Box to the left of the line is the Delete row – allows you to delete the entire row.

Info1 Tab:

Health System - 004 Demo 004 K-12 04.12.11
File Reports Loaders LINKS Terms Help Websites
ANDREPOINT JOHN MICHAEL DOB: 07/03/2000
Tue, Apr 12, 2011 11:37 24 PM
No Immunization Due
Vision Hearing Immunization Scoliosis Hgt/Wgt Dental Info 1 Info 2 Family Hist
Check All That Apply
 ADD/ADHD Anemia Asthma Bone Disease
 Breathing Problems Cancer Cerebral Palsy Clumsiness
 Color Blindness Convulsions Cystic Fibrosis Dental Problems
 Depression Diabetes Digestive Disorder Eczema
 Emotional/Psychological Fainting Freq. Colds Freq. Earaches
 Freq. Headaches Freq. Nose Bleeds Freq. Sore Throat Freq. Urination
 Hay Fever Hearing Problems Heart Condition Hemophilia
 Mouth Breather Pneumonia Poor Appetite Pregnant
 Rheumatic Fever Seizures Sickle Cell Skin Problems
 Tires Easily Tonsillitis Tuberculosis Tubes in Ears
 Vision Problems Other
Other Health Problems
Condition Details

Choose appropriate conditions by checking one or more items. Text boxes are available at the bottom. Remember to use the "DM Save" at bottom to save the information.

Info2 Tab:

Health System - 004 Demo 004 K-12 04.12.11
File Reports Loaders LINKS Terms Help Websites
ANDREPOINT JOHN MICHAEL DOB: 07/03/2000
Tue, Apr 12, 2011 11:42 39 PM
No Immunization Due
Vision Hearing Immunization Scoliosis Hgt/Wgt Dental Info 1 Info 2 Family Hist
Allergies
 Insect Sting/Bites Drugs Foods Plants Animals Other
Other Allergies
Allergies Description
Medication
 Allergic to Medication
MEDICATION DOCTOR AMT DATE PRESCRIBED PRESCRIPTIO DISPENSE QTY COMMENTS
Medical Treatment
Special Diet
 Blended Soft Low Salt Low Fat Liquid Supplement
Diet Description

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Medication Tab

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	Comments
No items to show.						

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

Enter the Medication 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 medication are entered into the Medication Program and cannot be edited here.

Vision Tab

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	
	2013-11-05	N	Pass	Pass	Not Tested	Pass	Not Tested	Not Tested	Not Tested	No	None	Sloan - Ten Foot	Pass			Not Test				PRA
	2009-10-16	N	Pass	Pass	Not Tested	Pass	Not Tested	Not Tested	Not Tested	No	None	Sloan - Ten Foot	Pass			Pass				PRA
	2007-10-29	N	Pass	Pass	Not Tested	Pass	Not Tested	Not Tested	Not Tested	No	None	Sloan - Ten Foot	Pass			Pass				PRA
	2003-02-21	N	Not Tested	Not Tested	Not Tested		Not Tested	Not Tested	Not Tested	No	None			Not Test	20/30	20/30				

Vision Comments

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This tab allows vision results to be posted/edited on a single student. To save the line at the top, use the Save at the end of the line. Additional comments are available at the bottom of screen. Remember if information is 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, 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: 2nd Date; Save: Save Button; Nurse: Nurse completing the screening; Grade

Vision Suspected Conditions:

You can place up to four conditions for each student.

The conditions you can choose are: ----->

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

You can also indicate the Referral Type

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

Hearing Tab

D	GR	DATE	SC H	HR 1	HR 2	HR 4	HL 1	HL 2	HL 4	R	L	R IM	L IM	RF	COMMENTS	NURSE	F-UP 1	F-UP 2	S	REC.
04			N																	
01		11/15/2007	N	Pass	Pass	Pass	Pass	Pass	Pass	Not T.	Not T.	Not Tested	Not T.	No		PRATHER, JAN.				4122
03		10/14/2009	N	Pass	Pass	Pass	Pass	Pass	Pass							PRATHER, JAN.				1113

This tab allows hearing results to be posted/edited on a single student. Additional comments are available at the bottom of the 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 the end of the line.

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

Delete Button; SC H: Suspected Conditions for Hearing (same as for Vision above); HR 0.5: Right at 0.5 khz; HR 1: Right at 1khz; HR 2: Right at 2khz; HR 4: Right at 4khz; HL 0.5: Left at 0.5 khz; 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.

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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.

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

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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			
<div style="border: 1px solid #ccc; padding: 5px; margin-top: 10px;"> <p>Growth Comments</p> </div>																	

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			
<div style="border: 1px solid #ccc; padding: 5px; margin-top: 10px;"> <p>Dental Comments</p> </div>																	

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.

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.

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Family History Tab:

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.

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

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