

Student Name	Grade	Teacher (if applicable)	School Year
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Parent/Guardian 1	Preferred Contact
Parent/Guardian 2	Preferred Contact

Health Concern Description:
<p>Overweight and obesity may be summarized as excess body weight, in terms of fat, muscle, bone, water, or a combination of these factors, with relation to height (Selekman et al., 2019). For children, Body Mass Index (BMI) is a measure of body weight adjusted for height and age and is measured in percentiles. Overweight for children is defined as a BMI at or above the 85th percentile and less than the 95th percentile for children of the same age and gender, and obesity is defined as a BMI greater than the 95th percentile for children of the same age and gender (CDC, n.d.).</p> <p>Systems and norms within schools may unintentionally contribute to childhood overweight and obesity, but schools also can play a significant role in reducing overweight trends in the next generation. Obesity in children results from a caloric imbalance, where calories are expended (or lost) slower than they are consumed (or gained). Lifestyle choices (e.g., unhealthy eating, lack of physical activity, etc.) and environmental and socioeconomic factors account for the majority of the energy imbalance contributing to overweight and obesity in children. Other less frequent causes include specific genetic syndromes, hormonal disorders, and side effects of medications (Selekman et al., 2019).</p>
<p>Stage of care (The American Academy of Pediatrics Institute for Healthy Childhood Weight provides an algorithm for assessment and management of childhood obesity - ages 2 and older - including four stages of care):</p>
Nutritional limitations/adjustments:
Presence of acanthosis nigricans (areas of dark discoloration on skin):
Activity/mobility considerations:
School attendance pattern:
Psychosocial concerns:
Other related medical conditions/diagnoses (type 2 diabetes, hypertension, sleep deprivation, etc.):

Nursing Diagnoses	Nursing Interventions
<p><u>At risk for:</u></p> <ul style="list-style-type: none"> • Activity intolerance • Chronic low self-esteem • Impaired cardiovascular function/hypertension • Ineffective breathing pattern • Joint pain or limited mobility • Learning deficiency • Overweight or obesity • Sleep deprivation • Social isolation or bullying 	<ul style="list-style-type: none"> • Obtain release of information for health care provider orders annually with updates as needed specifying medications, ongoing assessment, or other interventions that will be needed at school. • Utilize communication skills to assist student in sharing individual experiences and feelings about their current health status (Davis-Alldritt, 2017). • Apply motivational interviewing to assist the student in establishing short-term and long-term goals for changing eating and physical activity habits. • Individualize IHP based on identified stage of care, nursing assessment, and student/family identified goals and priorities. • Provide education to school staff in the following areas (Sample tips for teachers document from the CDC): <ul style="list-style-type: none"> ○ Adequate hydration: encourage for all students ○ Bullying: recognize signs and symptoms and intervene quickly according to school policy ○ Healthy messages on nutrition and physical activity: deliver to the entire class and never single out a student ○ Healthy habits in the classroom: support activities including brain breaks, non-food rewards, encouragement of physical activity at recess ○ Healthy lifestyles: promote at school through dissemination of school wellness policies or use of educational handouts ○ Report to school nurse: when any student shows signs of increasing difficulty in the following areas: <ul style="list-style-type: none"> ▪ Excessive daytime sleepiness or inattention ▪ Intolerance of physical activity or difficulty with mobility, limping, or joint pain ▪ Persistent headache, complaint of blurry vision ▪ Poor school attendance or poor school performance

Examples of Student Outcomes/Self-Care
<p>Improves health through self-reporting of progress toward nutrition and activity goals (e.g., daily dietary journaling, participating in physical activity per intensity level and time specified in healthcare management plan) (Davis-Alldritt, 2017)</p>
<p>Maintains or increases school attendance, with associated academic achievement</p>
<p>Maintains or decreases weight as directed by healthcare management plan</p>
<p>Maintains or increases participation in extracurricular school activities</p>
<p>Participates in regular moderate to vigorous physical activity at least 60 minutes each day</p>
<p>Verbalizes confidence and positive feelings about weight management plan to the school nurse</p>
<p>Other:</p>
<p>Student selected outcome goals (from above or other as selected by student using Healthy Weight SMART Goals Worksheet):</p>

Emergency Action Plan (EAP)

Students with overweight or obesity may not need an EAP unless they are also diagnosed with a life-threatening chronic disease such as diabetes, cardiovascular disease, or have a co-existing diagnosis such as a life-threatening food allergy. In these instances, an EAP is written specifically around the disease/diagnosis.

Current Section 504 Plan Yes No

If yes, refer to the Section 504 plan for the Management and Modifications section in lieu of the table below.

Management & Modifications	<i>Leave this section blank if attaching a Section 504 plan. This column provides example management and modifications in italicized font. Replace italics with student's individualized plan.</i>
Support prior to attending school	<ul style="list-style-type: none">• <i>Meet with parent/guardian and student to develop IHP and identify student outcomes/self-care</i>• <i>Identify school and community supports to assist with mental health concerns as needed</i>• <i>Finalize IHP</i>• <i>Educate school staff (general and targeted)</i>
Nursing care	<ul style="list-style-type: none">• <i>List all nursing tasks and procedures needed at school or at before and after school activities</i>• <i>Provide delegation training and supervision for nursing tasks and procedures as indicated</i>
Classroom and before and after school activities (Davis-Alldritt, 2017).	<ul style="list-style-type: none">• <i>Evaluate chair/desks in each classroom and seating on school provided transportation (e.g., buses) to provide adequate room for seating</i>• <i>Consider and provide adaptations needed for the physical education program</i>• <i>Consider the accommodations needed for the student to navigate the school environment (e.g., allow extra time between classes, permit student to use elevator, etc.)</i>• <i>Verify school restrooms are accessible, providing modifications as necessary, and consider use of health office restroom to ensure privacy for self-care</i>• <i>Ensure availability and promote socialization opportunities including accommodations required for student to participate in intramural and extracurricular events</i>

Written Notes/Addendum to Plan of Care

Date	Notes	Nurse Initials

School Nurse	Date

Parent/Guardian Signature	Date

References:

Centers for Disease Control and Prevention (CDC). (n.d.). Defining childhood obesity.

<https://www.cdc.gov/obesity/childhood/defining.html>

Davis-Alldritt, L. (2017). Obesity and overweight. In S.I.S. Will, M.W. Arnold, & D.S. Zaiger (eds.) Individualized Healthcare Plans for the School Nurse: A Comprehensive Resource for School Nursing Management of Health Conditions (pp. 753-770). Sunrise River Press.

Selekman, J., Buffin, D., & Mosca, N. (2019). Students who are overweight. In J. Selekman, C.F. Yonkaitis, & R.A. Shannon (Eds.) School Nursing: A Comprehensive Textbook (pp. 627-651). F.A. Davis