Waterbury School Nurses Journal

Stories from 38 School Nurses who ensure that 23,000 Waterbury School Children are Healthy, Safe, & Ready to Learn

2017
The City of Waterbury was an early adopter of school nursing in 1904, and Waterbury School Nurses have proven themselves to be everyday heroines ever since, ensuring that the City’s School Children are healthy, safe and ready to learn. School Nursing remains a vital service in Waterbury to this day, with Mayor Neil M. O’Leary’s committed leadership ensuring the provision of a Registered Nurse in each school.

Ongoing research into Waterbury School Nursing history reveals that women’s work is not always well documented. The names, voices and insights of individual School Nurses who have served the City and its School Children since 1904 are elusive. Vintage annual reports dating as far back as the early 1900’s record the thoughts of a few early School Nurses, notably Miss Mary A. Monagan, who detailed the needs of Waterbury School Children and the response of the Waterbury School Nurses to fulfill these needs.

Miss Monagan, known as Minnie within her family, was the sister of Dr. Charles Monagan, among the first Medical Inspectors of Schools. When her sister-in-law and later her brother passed away, Mary Monagan raised their children while continuing to care for countless Waterbury School Children for decades. She raised John S. Monagan who became Waterbury Alderman, Mayor 1943-1948, and U.S. Representative 1959-1973. She is described in his memoir in her capacity as his aunt — but with no mention of her story as one of the first and longest-serving Waterbury School Nurses.

The current Waterbury School Nurses listed below have contributed their stories to this historical collection. Comparison of vintage and current School Nurse accounts demonstrate that the needs of Waterbury School Children have always been great and growing, and that Waterbury School Nurses remain devoted. This journal is dedicated to School Nurses past, present and future. I am proud of each and every one of you and I am privileged to work among you! Thank you for all you do for our children, who are our future.

—Lois Mulhern, RN, BSN, NCSN, Nursing Supervisor & School Health Coordinator, Waterbury Department of Public Health
I have been a public health nurse in the City of Waterbury for the past 13 years at an elementary school. I have worked in a hospital, doctor’s office, and as a visiting nurse, but in school health, I have found my home. Over the past years I have been lucky enough to have met some of the most amazing children, families, educators and co-workers. Unless you have actually worked in a school setting, you can’t understand the level of compassion, selflessness, and generosity that I’ve seen on a daily basis. No matter how stressful my day may be, there is always a child who will say something hilarious to make me smile and laugh. School nursing is not just fixing boo-boos and putting on Band-Aids— the level of medical and emotional acuity is ever-changing.

If there is one thing that I feel is special and unique about the children in my school it is the level of empathy, compassion, and acceptance that is shown to children with special needs. I have had the pleasure of caring for many special need students over the years. (Children using wheelchairs, walkers, leg, arm and back braces, children with 1:1 nursing because they need the assistance of a ventilator and tracheostomy, children needing to be fed by a gastrostomy tube, children needing catheterizations, and children with seizures. The children at my school have impressed me so much over the years with the kindness, compassion and tolerance they have shown to children who do not fit into a cookie cutter mold. It makes me proud to work in a place in which diversity is welcomed and treated so respectfully. The good memories prove that every day is an adventure!

—Hope Fenn, RN

I returned to school nursing last year after about 15 years away from it. My previous school nursing experience was in a rural Maine school system and I bounced around between several schools every day. Needless to say I was nervous about working in a city, but amazingly a lot of school nursing "issues" are the same no matter where you are! Here are some things I've learned ...

1. I should have taken Spanish in high school instead of French.
2. Head lice will never go away and will always be a bigger concern to non-healthcare people than any contagious disease.
4. The nursing office can fix anything (or so a lot of teachers assume); broken eyeglasses, ripped pants, goo in hair, dog mess on a shoe, spilled milk, injuries or illnesses that happened a week ago at home.
5. Cell phones are not a more convenient way to reach parents. I have quickly figured out that parents don’t answer if they do not recognize a number, or their phone is turned off, or their mailbox is full. But, if you call a relative listed as an emergency contact, they can maybe text the parent and have them get back to you. Sigh.
6. The nurse is the last to know anything new about a student, especially a medical issue. Double sigh.

I love my job, I truly do. ... The most important advice I can offer is to laugh as much as possible because it really is good medicine! ... if I can provide a little TLC and get a child through a difficult time then I have done my job well. There are so many issues in school nursing that cannot be fixed with a Band-Aid, but we continue day after day to try and keep everyone as healthy and productive as possible in the school environment.

—Melanie Lessard, RN, BSN
I spent the beginning of my career at the bedside in a hospital. Regardless of the amount of effort and time spent at the bedside, it rarely brought me joy. However, joy and humor makeup most of my days as a school nurse. Of course there is stress, but school health is very rewarding.

My days are filled with visits from grade school children. I attempt to teach every child I work with a healthy tidbit. My goal is to empower children with the knowledge required to stay healthy. I enjoy hearing the students repeat my advice back to me. “Miss Tabitha, I had a sore throat this weekend. I gargled salt water like you told me and it worked.” Occasionally, I even get a thank you or a hug. That always makes me smile.

—Tabitha Krosi, RN, BSN

I have had the opportunity twice to work with the nurses of our Waterbury Health Department. First, 1978-1983 and then returning for the past 10 years in 2007. In 1978 I returned to Waterbury and began as a Health Department Nurse. At that time we visited schools, rotated communicable disease clinics, visited mothers and children as well as follow up visits to clinic patients. By 1980 the nurses were a strong force working with city and state to get all school age children properly immunized. We made home visits and held city wide immunization clinics in our schools. I found a strong committed group who now staff immunization and communicative disease clinics. School nurses today are meeting challenging individual student needs by helping the family and staff to understand, the medically complex needs of today’s children.

Yes, I give many Band-Aids, take temps and evaluate stomach aches. The joy is not only diagnosing a health problem, but maybe realizing that the complaint has more to do with sadness, "Grandma’s sick", my pet died or someone in class or outside is bullying them. Helping families find the funds to get their children glasses or adjust to a new city. I have, like other nurses have, to meet daily physical student needs. G- tube feeding, catheterizing, medications, to name a few. Some of my most gratifying moments have been a child’s independence in self catheterizing or calculating their own carbs per insulin units and understanding their diseases better.

Our nurses are a vital members in our schools, working with our educators to open all children’s abilities to learn, socialize and be positive and optimistic in that they can become their own best selves. It’s the smiles, the hugs, and "Hi Nurse," from the children in and out of school that warms my heart and let’s me say I’m proud to be a "School Nurse."

—Claire Pelletier, RN, BSN
Lessons I have learned from being a pre-school nurse:

1) **Appreciate the little things.** Band-aids are fun, stickers are mandatory, and smiles are contagious. These are just a few little things that will make such a big difference in giving a preschooler a positive experience in the nurse’s office.

2) **There are no language barriers.** Hugs, smiles, high-fives, respect, and the willingness to help someone are all universal no matter what language you speak. This applies to families and children alike.

3) **We aren’t always forgotten.** Sometimes as a school nurse, we may feel as if we are invisible until a medical problem or major life crisis arises. This is until a staff member shows up at your door with a slice of cake for you or a plate of food from the staff luncheon. Also, when you get a phone call from a parent to thank you for taking care of their sick child and to update you on their status. Also, there is always the child who you walk by in the hallway days, or even weeks, after you treated their “boo-boo,” who looks at you with their thumb up and says, “Look nurse, I’m all better!”

4) **Children with disabilities are often much stronger than anyone could imagine.** I am truly inspired by the children that I see every day at school. There are medically fragile children with rare diagnoses, in addition to children with other disabilities. However, these disabilities do not hinder them from being happy, independent, and determined. They are strong willed and do not give up. There are children walking by with the aid of a walker who were once in a wheelchair. And the children who are in wheelchairs inspire me with smiles that brighten my entire day. There are children who were once nonverbal who have surprised me with a new word spoken clearly or a sentence of 3 words. They never cease to amaze me as they achieve physical and communication milestones.

5) **School nurses do not get breaks.** I remember one day, I was relieved just to have a moment to run to the bathroom only to have an overhead page for the nurse to please return to her office. Then there are the days that I just open up my bottle of water to take a sip or unwrap my sandwich to take the first bite, only to see that several students have showed up to my office from the playground. Nursing is never routine. Flexibility is key!

I am grateful, praise God, and give Him the glory for the opportunity and ability to care for these precious little ones.

—Sandra Hall, RN
A student chose to break the cycle of abuse after over 17 years. A physical altercation had occurred between the student and his father, yet only the student was arrested. Per court order, the student was then placed in a 2-week short term therapeutic program by the judge.

Now, as a senior with only 4 months until graduation the student asks himself the age old question: What will I do with my life? At this point, with the help of therapy the student realizes he must choose to break the cycle of domestic violence both physically and mentally. The student formulated an itemized list of his best options to avoid returning to his home filled with physical and verbal abuse, with my help. Not quite 18 years old adult education or dropping out really was not a choice. He had two options.

Option one: he would enter foster care and become involved in the DCF program. This option would allow him food, clothing and shelter but not to graduate from his present school. Option two: he could join Job Corp. and he would receive training for a job, shelter and receive a monetary allowance, during training. The hard part would be that he would have to leave the state for training. Housing would be provided during training only, but he would be provided with a guaranteed job upon completion of Job Corp. After training he would be responsible for housing and buying a car. What would the student choose? The one issue that pulled at his heartstrings was the fact he would not see his brother or sister for months. His final decision was to join the Job Corp. He is living with the therapeutic counselor and all of his criminal charges were dismissed by the judge. He is awaiting his acceptance into Job Corp where he will work and obtain his GED.

The moral of this story for me is that you never know how profound an impact you will have on a student’s life. This student’s story connected with me both personally and professionally. Every day we as nurses need to put our best foot forward and relate to students. Above all he has taught me that you should never give up regardless of your circumstances. In today’s judgmental world, I could have easily dismissed his actions for as a “bad kid”, but there are always two sides to every story and we as professionals should remain nonjudgmental. All in all, regardless of why students come to the nurse’s office, I treat them with kindness because you never know how much of an impact you will have on them, and how much they will impact you!

—Noreen Prince, RN

School Nurse Nursing was a second career for me. I graduated from NVCC in 2013 with my associate’s degree in nursing and immediately started working on my BSN at Western Connecticut State University. I began working at Glendale Center in Naugatuck as a Transitional Care Unit (TCU) floor nurse in August of 2013. I gained the much needed experience at there, surrounded by a team of fantastic nurses. While working at Glendale, I searched for opportunities to get into pediatrics. I started working as a substitute school nurse in Watertown. I worked in the elementary, middle and high schools for two years. I loved each day I spent working with children no matter which school I was at. It was during these days of substituting that I decided to look for a permanent position as a school nurse. I had found my niche.

I graduated from WCSU with my BSN in May 2016. I was offered a position with the City of Waterbury, as a school nurse in October 2016. As a school nurse, I have had many experiences that will remain with me forever. If I could write a book it would be a best seller because you truly can’t make up what kids say and do. Children will take you by surprise every day, and to say there is never a dull moment would be putting it mildly.

This past February, I was called into the cafeteria to assess an unresponsive kindergartener. She was slumped over her lunch at the table. She had no pulse or respirations. I moved her to the floor to begin CPR while calling for the AED and someone to call 9-1-1. This memory gives me chills and tears every time I think about it, because I could have lost that precious little one to God’s hands that day, but luckily God was smiling down and let me save her precious life! The staff worked well in this crisis and we were able to get her off to the hospital quickly. Today, the student is back in the classroom among her friends. Seeing her smiling face every day lets me know I definitely chose the right career as a school nurse!

—Jennifer Voity, RN, BSN
It has been said that one should have a career where “work” is enjoyable and doesn’t feel like work. That is what school nursing is to me. I find the energy school life exudes a positive place to be. Kids buzzing through the halls, happy, smiling; their excitement is contagious. I thoroughly enjoy getting to know the children, some of whom were in kindergarten when I started and are now in 5th grade and ready to move onto middle school next year. I enjoy meeting the new kindergarteners each year. There is a large amount of students transferring in and out of my school and the city in general, but when I float to other schools I look forward to seeing some of my former students. The students all have stories, many of them coming from difficult home lives and I am proud to help care for them each day. Their resilience is inspiring.

Working in a school environment requires teamwork between all staff and I am proud to say that the staff in my school works cooperatively to make sure that each student’s needs are met. We strive for them to stay healthy, attend school, learn, socialize with their peers and participate in all school activities. From a nursing perspective, we make sure that their optimal level of health is maintained so that they may participate to their fullest capacity and learn to the best of their ability.

There are so many stories to be told, from children with acute illness and injuries to the children who just want to get out of class for a few minutes. Nursing is a career which never gets boring and if you can find a specialty that doesn’t feel like “work” then you’re in the right place.

—Danielle Caro, RN, BSN

I have been a school nurse for six years now. I have learned that beyond the daily hectic routine of medications, procedures, and injuries, there are a set of students that suffer in silence. The students whose home life is in turmoil. The neglected students. When you look beyond the frequent visits to the Nurse’s office at those students who complain of stomach aches and headaches, you realize that these students need much more than icepack or temperatures taken. They need someone who cares about them. So when you finally get these students to engage in a conversation you begin to build a relationship with them.

During the last six years of school nursing, I found that this aspect of school nursing is the most rewarding for me, to see these student’s lives changed, by just caring enough to look beyond the frequent visits of headaches and stomach aches.

—Margaret Famiglietti, RN, BSN
My decision to become a school nurse was one that came with many uncertainties. I asked advice from friends and family, and played the images of what I imagined an average day would be like, over and over in my head. I was teased by colleagues who assured me that all I would do was “pass out band aids all day,” and that I would surely “be bored out of my mind.” Thankfully, my colleague’s predictions were as far from accurate as they possibly could be. I have been very pleasantly surprised by the fulfillment this position has brought me. Every day is a new experience. Although I have had to deal with situations that have really tugged at my heartstrings for the most part my days have been filled with happiness and laughter.

Working with grade school students has been rewarding in many ways. As much as I try to educate them they always seem to teach me something in return. They are so grateful when I can help them through the, “very serious paper cut”, and really appreciate hearing how brave they were. They beam with pride when they bring me an addition to my “art gallery” and I hang it on the wall. They stop by for a hug, to share a story, or tell me about their latest adventure. Their smiles when I pass them in the hallway are beautiful and always make me smile in return. They have reminded me what it’s like to look at the world through a child’s eyes and how important it is to stop and pay attention to one another. As adults we sometimes forget how taking just a few moments to listen and notice someone can really turn their day around. Yes, I pass out band aids, take temps, hand out medication, and fill out mountains of paperwork but I am NEVER bored and I’m (almost) always appreciated. My only hope is that I can make as big of an impact on my students as they have on me!

—Kimberly Fedak, RN

School Nurses can tell stories of harrowing days where they put out numerous medical ‘fires’, heroically triaging an ER cleverly disguised as a school health office while balancing daily duties of medication administration, treatments, procedures and a myriad of other duties as we care for the city’s youngest citizens. But, it isn’t the chaotic moments that bring a smile to the face of the school nurse—it’s the sweet little moments that inevitably cross our minds with a tender memory from the past. At times it’s something that was said—like the young girl describing the ‘headache in her stomach’, or the young teen who has expressed new confidence in managing their diabetes.

There is immense reward in helping a child gain confidence in a new skill or relieving a child’s symptoms so that they can return to class. Perhaps the greatest reward is the heartfelt gratitude that our young clients bestow after seemingly small things—a sticker over a Band-Aid or a smiley face on an ice pack—the sheer joy from something so small. Or a letter from a grateful parent after you provided care to their diabetic child.

There have been so many memorable moments over my career as a school nurse. It is difficult to pick one moment over another. I have always tried to imagine that if my child were injured or ill, who would I want tending to my child— I have always tried to be that person.

—Tracy Gumpert, RN, BSN
After, almost 25 years working as a school nurse in Waterbury, I have many thoughts for a story or a book! Some of them are silly, some are sad and emotional, many are unbelievable and crazy, but I chose to write of a very humbling story about a little girl called "Kate."

Kate was a very quiet and shy girl, who attended my school from Kindergarten to Fifth Grade. Kate wasn't a child who ever got into any kind of trouble in school. Kate wasn't a frequent flyer, (actually in her 6 years at my school I probably only saw her 10-12 times). Kate wasn't a loner, but she wasn't popular either. I guess one could say, that Kate pretty much went unnoticed as she never demanded any attention!

Years after Kate left Wendell Cross, I saw a young woman in church, who seemed to look familiar to me, but I couldn't quite remember what her name was. After Mass, she approached me, smiled, and quietly said Thank you! I wasn’t sure why she was thanking me but Kate went on to say, "Throughout all my years in school (Kate was then a college sophomore), you always were so nice to me, talked to me, and always NOTICED me"! Kate gave me a warm hug and thanked me again!!

Meeting this young woman, after so many years, was humbling to me as it made me really see how important kindness, a little TLC, and "noticing", can really impact a child forever! It only takes a minute to ask a child how their day is, to give a compliment, to show interest in what they are saying and make them know that you Care!

—Carol Ciccarelli, NBSN

The one experience that has touched me the most, as a school nurse, was the day I was talking to a parent about his twin boys who were starting kindergarten at my school in the fall. He asked me if I remembered him because he used to come and see me every day to take his afternoon medicine. He said, "You were my school nurse all those years ago and now you will be my boys' school nurse."

After getting over the fact that I was getting old, and how fast time truly does fly by, I felt very humble knowing that my job as a school nurse may have played a very small part in this man and his sons' lives.

—Joanne Daigle, RN

When I got this job I gave my students about 10-15 minutes rest after my assessment and intervention, (except for cuts and bruises) and for my for Gr.K-2 students, I would allow them to color. Hence, they got used to it and they would just sit at the desk and take the coloring books and crayons out and when it was time to go back to their class they would bargain for a little more time to finish what they're doing. Needless to say I realized they became what I called my "frequent flyers." And parents would tell me that their kids would love to visit me. I was flattered but I had a second thought, what if these kids just want a little time out from their class and I am their excuse? I changed my plan to a 5-10 minutes rest, no coloring, and there were less visits of my "frequent flyers."

—Emerita Goold, RN, BSN
I am employed as a public school nurse for an elementary school, and it is the most rewarding job I ever had in my 37 years of being in the nursing profession. I feel I make a difference in the life of Waterbury school students everyday on an emotional, spiritual, and physical level.

Here is one example: A nine year old female student comes into my office with an exacerbation of asthma and required a dose of medication prescribed by the doctor with minimal effect. Along with the asthma symptoms, the student experienced panic attacks associated with headache, dizziness, and shakiness, at times. I used the nursing process to assess, observe and treat the student until the parent arrived to take student home. The next day; bright and early at 8am, the student visited me in my office to verbalize she was fine. The student thanked me for taking good care of her yesterday during her asthma attack and stated, “I would not know what to do without you.” This was a “Hallmark”, moment for me, and I felt this student “touched my heart”, with her words of praise.

I became a nurse to assist another person in their time of need, and I felt I accomplished that goal each and every day I care for students in school. I may not be a writer; but if I can convey one thought, it would be---school nurses do make a difference in the life of our Waterbury Public school students, just as the students touch the hearts of school nurses.

—Linda Konopka, RN

Although I have only been a school nurse for a short time, I have made a few special connections. One in particular stands out. This student was struggling with a life changing decision. She felt she couldn’t reach out to her parents but trusted me enough to help guide her through this stressful time. I was able to convince her to talk to and trust her parents.

She did follow up with me and said she opened up to her parents and ultimately it ended up working out for the best. She thanked me for being there for her and didn’t know what she would have done without me.

To have a student come to me with such trust is an amazing feeling.

—Amy Leclerc, RN
It is really special to find the humor that can slip by us, as school nurses because we are so busy in our health offices. I would like to share a story that reminds me to stop and smell the roses when things are overwhelming. This story reminds me of how innocent and refreshing children can be when you least expect it!

A very precocious kindergarten girl has become a frequent flyer visiting the health office everyday, sometimes twice a day. Her ailments range from stomach ache, ear ache, head ache, thumb pain, nose ache, and chapped lips. It is becoming comical, with all the illnesses she can imagine. Every time she visits we go through the same assessment: temperature, bathroom, drink of water and assess out the ache etc. and then I send her back to class explaining she is fine and “no temp” on her pass. Last week, she came in and I asked, “What is it today my dear?” She always smiles and comes up with something new, I think to challenge me! After going through the assessment motions, I took her pass, wrote down that she was fine, no issues and RTC. I handed back the pass to her and as she started walking out the door she turned to me and said… “But you forgot to write, “NO TEMP”, on my pass!

—Sharon Bassett, RN

Some of the cute things kids do: The other day a kindergarten student came into the health office. She said, “The teacher said I have head lice.” When I looked in her hair, I found Doritos and hair glitter. The student said, “Everyone was touching my hair.” When I realized it was picture day, I did my best to clean her hair. I had a good laugh and sent her back to class.

—Louise Carlozzi, RN, BSN

I am new to school nursing and in December 2016, I was at my school for less than a month. I was still trying to learn the ropes and build a connection with the students. One particular second grader had come into my office because he had a “bathroom accident”, but he didn’t have a pass. I informed him I would need to call home so I needed his name. He told me what his formal name was, but that he goes by “JB”. I called his dad and explained who I was and that “JB” had a bathroom accident and needed a change of clothes. The dad sounded a little confused but agreed to bring in clothes. After about 30 minutes, the father showed up and I greeted him with a big smile. I proceeded to explain that if “JB” has accidents he can keep a change of clothes in school so he wouldn't need to be called. The father started laughing and stated that his son has never gone by “JB” and no one calls him that.

Embarrassed, I looked at the student and asked him why he told me that everyone calls him that. The student smiled and said it was a new nickname, that he was trying to start for himself. The father and I burst out laughing. The next time I saw the student, he told me he no longer goes by "JB," and that now he goes by "MC." However, I learned my lesson and only referred to him by his formal name when calling his parents.

—Veronica Farone, RN

The teacher’s note reads, “I do not understand what he is saying, he says he has a beetle.” After questioning the student I still did not understand what was wrong. His temperature was normal, yet he kept complaining about having “a beetle.” Therefore, I placed a call to parent who spoke with student. Since the parent spoke only Spanish, it required using a family member present in the home to translate to me. I was told, “He is saying he has a bug like a virus.” Case solved.

—Robertine V. Csaes, RN
I was working on a health record in my office, when a student came in with a complaint of left-sided jaw pain. I asked him if he had been hit in the face, fallen, or had any accident lately. He stated that he had not. I palpated the area, which was not red, edematous or tender. I asked if anything like this had happened before, but he said this was the first time. I then began an exam of the inside of his mouth. His dentition was normal, his gums were not red and I could not see any laceration or signs of trauma.

As I was examining his teeth and buccal mucosa, he looked up at me and said, “I know what it is.”

“Really?” I said.

“Yes, it’s my sweet tooth.”

“You have a sweet tooth?” I inquired.

“Yes it’s my sweet tooth,” he responded.

“Where is your sweet tooth located?” I asked.

“Right here”, he said tapping his jaw. “And I know how to fix it,” he replied.

“How should we fix it?” I asked.

“One of those mints up there on your shelf should do the trick,” he told me. !!!

—Mary Rechenberg, RN

Since I have only been a school nurse for little over a year, my stories are kind of limited. I am surprised however, of the many students in the lower grades that seem to think I sleep or live at the school. They also ask “Who takes care of you when you’re sick?” And “What happens if you need ice or a band aid? ”. I think these conversations are sweet and help me to realize there is still some innocence left in this crazy world of ours. And then on the other hand......there are the wise guys that say, “Oh it must be so easy to be a nurse!” So, I say, “Sure go to nursing school, by all means! You can work here when I retire!” All joking aside, I enjoy my job immensely, and it brings me satisfaction knowing that somehow I am making a difference in my own little way.

Then like everyone, I have the days that I wonder why I became a school nurse. Especially one day last summer when a flock of geese decided they were going to do their business all over the playground......while kids were out there, of course. There only ended up being two poor souls that felt the wrath of the geese, luckily, I guess. At first I was a little dumbfounded (and kind of annoyed), but eventually I got my bearings and called their parents. Also, one of the kindergarten teachers was nice enough to find some school shirts to give to the kids, so that they didn’t have to sit in the nurse’s office covered in goose p**p.

—Rachel Sewitsky, RN

The day starts with music, children skipping to class, smiling faces (many missing front teeth), and “Good Morning Nurse Carey.”

My school, is a family school and the most rewarding phrase that I hear over and over from parents when I call home for various reasons is: “Thank you for taking care of my child and thank you for taking care of all of our children.” I feel appreciated.

What brings me the most laughter is when testing the vision on the little ones and they say they can’t see the letter and I turn around and they have both eyes covered with their little hands!

—Geraldine Sullivan-Carey, RN
I was in the nurse’s office as a teacher came running into our office with pure anxiety and fear on her face. I immediately got up and addressed her concerns even though there were two other children signing in. She showed me her hand and expressed her concern that she was having a heart attack. She told me her hand was blue and she didn’t know why and thought she needed to go to the emergency room. “What’s wrong with me? Am I having a heart attack or something?” She denied chest pain or pressure.

Upon examination of her hand, I knew exactly what was wrong. I asked her to wash her hand with soap and water. Sure enough, she was cured, the bluish tint came off her hands. She then remembered that she had been using a blue pen or marker a little earlier in the day. We both agreed to not ever bring this up again to each other. Sorry, it was too funny not to share. You just never know what type of “emergencies” you’re going to have. I have to be prepared every day!

—Nicole Treffery, RN, BSN

A sixth grade boy came into the office with a really loose tooth—hanging by a thread. He insisted it needed to be out before lunch since it was pizza day, but he was terrified at the mention of me taking it out for him. He decided he would just play with it with his tongue until it came out.

Just before lunch he shows up again, this time near tears, begging me to take it out for him. After the tooth was out I asked him if the tooth fairy would be paying him a visit and he says, “Miss, I’m eleven. I know the tooth fairy isn’t real.”

I said, “Bummer. I was hoping to get a cut since I did all the work.”

He laughed and said, “I’ll tell you what ... Don’t tell Mom I know the tooth fairy’s a fake, and I’ll give you half!”

—Alison Vazquez, RN
Wow, a story of how school nursing moves me! Hmmm, there are so many stories to tell on a daily basis, as each day is a new and challenging experience that most people could not even imagine! The story I will share is one that makes me proud, and proves that our encouragement, guidance and examples can provide a positive impact on the futures of the students, with whom we build relationships with during the most influential part of their lives.

When I started at my high school this quiet, shy young girl would come in every day at lunch time complaining of some ailment and assessments always proved negative. Finally, I asked her if she wanted to talk and she agreed. We talked about her anxieties of going into the lunch room that was so crowded, not fitting in with the other kids. We strategized on coping mechanisms together. She expressed her desire to become a nurse. She obtained permission to come to the nurse’s office for her study hall to assist with small tasks such as making copies, stuffing envelopes with physicals, stamping envelopes, or whatever other little things she could do. We worked together in getting her application into the allied health program in and application for jobs. She blossomed and grew. Each year she achieved her goals and reached further to her aspirations.

Graduation approached and college applications were in and the acceptance letter to Western CT was received to the nursing program. The sheer joy she expressed and the hug she gave me was one I will never forget. She commenced her quest with a zest like no other! During her last year in college she volunteered in, to shadow me on a nursing level, as her future plan is to become a school health nurse. As the nursing boards were fast approaching, she was stressed out and again looking for those words of encouragement. We talked about study techniques, the important issues of nursing, and the fact that she honestly has everything she needs to finish what she started. She has since graduated with honors and I am proud to announce she is now an RN, BSN at Danbury Hospital. It still brings a smile to my face when she calls me just to say “hi” on a professional level.

—Tracy Benson, RN

I have been a registered nurse for 24 years. For the last 12 of those 24 years, I have been a school nurse at an elementary School. As a new graduate, I remember thinking that the two fields of nursing I would never want to work in were Home Care and School Nursing. Turns out I had no idea what I was talking about. I did both and loved them both, but in the end school nursing won out!! I love my job and it is hard to imagine me doing any other job. Being a School Nurse is a very rewarding job. It’s more than just band aids and ice.

I have come to love the fact that I have 525 kids and although they do not come home with me and they are not mine, they have grown to be a part of my family and my heart.

I had a pre K student, who was an Insulin dependent Diabetic. He was an amazing kid. He was cute and funny and I loved seeing him when I would go and check his blood sugar. Since his blood sugar tended to be really high or really low at any given time, I got to see him frequently and because of that, I got to be close with his mom and his Pre K teacher. But, my favorite time was when it was dress up during playtime and I would love seeing what silly outfit he would put together to wear. Because I had built a special bond with him and his mom, I was asked to come along to CCMC when he got his first insulin pump. I felt very special and it was a great learning experience as well. I was very sad at the end of his Pre K year. He went to Kindergarten and was transferred to a different school. Over the years I would get deployed to different schools for a day to cover for the regular nurse. Was I ever surprised to see him again in 5th grade and again this year, when I got deployed to a high school? He was a sophomore. My heart was so happy to see the progression that had occurred over the years. I was happy to see that this little boy I remembered; remembered me and was growing up to be an amazing young man. This is one of the many reasons I love my job as a school nurse.

—Andrea Brady, RN, BSN
This is my second year as an elementary School Nurse. Prior to becoming a School Nurse, I worked over twenty-five years with adults and seniors in the Home Health Care industry. I have long recognized the value of humor and wellness in my professional and personal life.

Sharing humor with my new young students, has been an added blessing! Our school had its very first Sweetheart Dance this past February, 2017. A very shy third grade boy came to my office the morning of this dance requesting a Band-Aid and he told me he was attending the dance. He told me he was bringing his mom as his sweetheart. When I asked him if he would show me some of his dance moves, he immediately broke out into a wild, hand-flinging and foot-stomping dance! I joined in with him and our laughter was priceless!

An added bonus...several other students came to my office to show me their dance skills!

—Debby Finn, RN

When I was 5 years old, I remember wanting to be a School Nurse! Did I know what that meant? Absolutely not. Well, back in those days the Nurse was only in the School 1 or 2 days a week. She was doing heights and weights, vision, possibly scoliosis, recording physicals, and of course, washing scrapes and applying Band Aids. She probably did more; however, remember, I was only 5. Life went on; high school, started college for Respiratory Therapy, moved, found my soul mate, got married, and had 2 daughters. When the girls were in 5th and 6th grades, my husband, knowing my dreams encouraged me to go to nursing school. And so it happened. Albeit a challenging ride, it was a God send. This is what I was meant to do.

One can not say I am just a nurse. You can not be bored or become complacent being a School Nurse with 200 to 1400 students, since you have so many hats to wear. Obviously first you are a nurse, and add to it, Care Taker, (providing information to families to be able to seek help from outside agencies to obtain food, clothes, housing), Mother and Grandmother Figure (for children who don’t have that support at home), Social Worker (listening to students health or social problems and issues), Detective, (trying to find working telephone numbers and addresses, or necessary medical information of students), and Teacher (for obvious reasons, educating students on personal hygiene, how to take care of themselves to feel better, when to seek medical attention, how to cope with their scary real life situations.

I call my school a Mini Emergency Room. You never know what you are going to encounter. A school nurse starts her day off most often with students waiting at the door when she walks in. Who is on crutches, who comes in hungry, has a sore throat, got hit by a car coming to school, got a very deep cut yesterday that won’t stop bleeding (who needs stitches), didn’t want to wake parent up to say they don’t feel good. Whose parent tells them go to school and go see the school nurse because they don’t have a thermometer, or just give them Band Aids. Teachers and staff even come seeking advice with medical issues and questions. In today’s world we have children in schools with multiple complex diagnoses, illnesses, diseases, mental health issues & disabilities. (Life threatening allergies, asthma, ADHD, autism, bipolar, cancers, seizures, multiple sclerosis, muscular dystrophy, spina bifida, children with tracheostomies, and with catheters), to list a few. We are always dealing with possible life and death situations. We do it without a back up Nurse or Doctor, such as in an emergency room. 911 is our closest ally.

We are Nurses. We respect life. We care about everyone. This is what I was meant to do. ... I consider these students, my students, usually talking to them the way I talk to my own children. The most rewarding part is when they come to you upon returning to school after a severe medical condition that you dealt with which required emergency care and they give you a hug and say, “Thank you, you saved my life”, or when you’re out in public and they say, “I remember you, you were my nurse”, and it was 22 years ago. I love people, I love my job, and I am not bored. When I was 5, I wanted to be a school nurse!

—Margaret Owens, RN
I know I’m supposed to write a story about something that has moved me during my career as a school nurse. It’s very hard for me to come up with a single situation. I’ve been a middle school nurse for a number of years now. The middle school years are tough. The kid’s hormones are running rampant, they have issues with bullying, some are facing gender identity issues, and most aren’t really sure where they fit in. The one thing that they do realize though, is that they can come to my office for anything. On any given day I’m a nurse, a doctor, a social worker, an advocate, a mom, a friend, or someone for them to talk to for a couple minutes. They know that if something, or someone is bothering them, I can find the appropriate person to help them. Some kids come in because they’re stressing out and just need a place to calm down.

When I know that I am truly helping them, even in the simplest way, that’s what moves me. When I see them after graduation, and they say I’m missed, that moves me. One of our teachers does a yearly project where the kids have to give a blue bracelet to someone who has helped them, and they look up to. Getting a blue bracelet moves me. When I’m asked to sign yearbooks because they say they'll miss me that moves me. I had one girl who was diabetic. She was the speaker at her 8th grade graduation. She personally thanked me in her speech. That moved me ... to tears actually.

So, it’s not a single situation that moves me as a school nurse. It’s what I do on a daily basis that allows my kids to have their best day, every day that moves me most...and I love it!

—Doreen Pelletier, RN

I can think of several ways the specialty of School Health moves me on a daily basis, however, for the purpose of this story I will only mention one. When returning to a school in which I had not worked in for a few years, I encountered a medical situation with a student. After attending to the situation and resolving the issue, it became apparent that this particular student remembered me.

She then began to question where I had been and stated "I missed you.” It was at that very moment that I realized the impact that we as nurses have on these children that sometimes goes unnoticed. I was overjoyed to know that she not only remembered me but also thought of me enough to miss me. I made a promise to her that day. That promise was that I would attend her graduation. I have every intention of doing so and hope that I could bring her that feeling of joy on her day, just as she had done for me on this particular day!!!

—Krista Phelan-Wright, RN, BSN
I am fairly new to the school nurse specialty. I quickly learned that although the daily activities and responsibilities within the health office are vital to the school it’s the little extras every day that are the most rewarding and memorable. It can be as simple as celebrating with a kindergarten student who lost their first tooth or reading a book to a sick student who is waiting to go home.

During the bitter cold winter months a very young student had been coming to school wearing thin dress shoes without socks. Knowing my daughter had several pairs of new socks I brought in a pair and put them on the student. She smiled and went on her way. A few days later she spotted me in the hallway and came running over to give me a hug I will never forget. Still wearing the same socks she said “My new socks are beautiful!” A simple act of kindness can make a world of difference.

—Natalie Kaoud, RN

One day this year, a fourth grade female student tripped and fell down some stairs during outside recess. She sustained some substantial abrasions to her face and hands. Understandably so, she was quite shaken up by the fall and her injuries. I rendered care to her abrasions, as well as her injured sense of well-being and security, as she was visibly shaking. While she was settling down, I called her single dad whom she lived with, and explained what had happened. I gave appropriate advice for follow-up care and also mentioned to her dad that if he would like to pick her up early from school, that would be okay. Her dad stated he would come to get her as soon as he could, but wasn’t sure when it would be due to work constraints.

I informed her of what her dad stated, and gave her the option of returning to class or staying in the nurse’s office. She chose to return to class at that time. I told her to return to my office if she felt she needed to. She returned a few times for more ice and a few Band-Aid changes. Throughout this experience and each time she came back I tried to make her feel better and well cared for by simply showing her a little extra TLC. I didn’t realize how much those simple acts of kindness meant to her that day. Unfortunately her dad never made it to school to pick her up and she went home on the bus. But I knew I did everything that school day to make her feel as comfortable as I could. To my surprise, the next day she came to my office with a piece of artwork she had hand drawn to thank me. It brought a tear to my eye. I then realized how important my simple acts of kindness were to her. Her artwork now hangs proudly displayed in my office.

—Sherry Mitchell, RN, BSN

A little over a year ago, a kindergartner arrived to my office complaining of his chest hurting. He has a history of asthma. I listened to his lungs and he had severe wheezing throughout, increased work of breathing, and difficulty taking a deep breath. I called mom right away and she seemed unconcerned by the situation. I explained the severity of his condition and he needed to be assessed by a MD ASAP. She stated she was 20 minutes away by foot.

After hanging up, I reassessed the student and felt he could not wait to be seen and we needed to call 911. I notified mom of the call we would be making ... We proceeded to call 911 for this innocent child, who was sitting there without his family, or parents. I did my best to comfort him while EMS arrived and prepared him for transport. Just as they were about to leave, mom showed up ... to escort him with EMS to the hospital. I had sympathy for this little boy who had no control. I felt I did the best possible thing for him. At just 5 years old, he showed courage and strength, and still managed to squeeze out a smile through it all.

—Karen Mueller, RN
I have only been a school nurse for three months, thus making my experience more general. I have been blessed in this short amount of time with learning the value of teamwork, as I have been placed in a high volume middle/high school campus. I have learned what it is like to have work together with other nurses, knowing I can pick up where someone left off and vice versa. Also, having and/or being an extra pair of hands when needed. School health as a specialty has been an amazing experience for me and I am excited for the journey to unfold. I am excited for the years to come.

—Melissa Cummings, RN

I started my school nursing career after Christmas break in what people would call an “easy” school. It was a PreK-8th grade with only 187 students. No medications or procedures to perform. The busiest time was recess when the smaller children would get scraped or hit with a ball a little too hard. Nothing a little wash, band aid or ice couldn’t help. My second school year I was moved to one of the biggest (if not the biggest) middle schools in CT. Twelve-hundred plus children would now be counting on me to help them during some of their lowest points, or to administer daily medications along with monitoring multiple diabetics. When I received this news towards the end of summer, I began having an out of body experience. To go from a school with a little under 200 kids, to a school with over 1200 kids, to say I was feeling overwhelmed is an understatement. Plus, I never opened a school. Sure I was trained and thought I had it in the bag when thinking of reopening my little private school where the numbers dwindled for reenrollment for the following year. But what an awakening I had to just jump in with all the paperwork involved, parents dropping meds off, transfers, training, on top of some really sick kids and emergencies happening in the beginning of the year.

I had originally kept telling myself from the moment I found out I was going to be on this new adventure, the instant a transfer was offered I was going to take it no matter what school, it had to be better. Well the time came and a transfer was offered to everyone very early on in the school year and I really pondered to put in for it. I eventually checked the “not interested” box and faxed it back. Yes this school was a challenge but I’m all about challenging myself. But, what really solidified my decision was thinking about losing my health aide. We had such a routine down and though early in the year, seemed to work well together and really truly understood the teamwork involved and needed in order to make this office successful.

The health aides really do a lot for the nurse’s. Transfer ins and outs, posting physicals, first aid, sport sign ups, holding down the office when the nurse is called away for emergencies, eye testing etc. etc. While yes, this is “their job”, I try to imagine having to do all this while passing out meds, diabetic testing, performing procedures, calling doctor’s for orders and attending PPT or 504 meetings and shudder at the thought of being alone here. I know I wouldn’t be able to survive. I have found the nurse’s success at a busy school rests on the collaboration, coordination and open communication with their health aide. I’m lucky to have one that knows her job inside and out and was able to help out a newbie along the way. Health aides can feel and be under appreciated in their role within the health office to those who are on the outside looking in i.e. teachers, principals etc., but even as a newbie, I know the school nurse appreciates and values their health aides as their role would not be able to be fulfilled without them. So here’s to all the health aides that make the nurse’s job a little simpler, THANK YOU!

—Crystal Grenier, RN
A student came to the health office complaining of a headache. His response to questions was delayed and we did not know the student if this was his baseline. He denied injury, but something did not seem right to the nurse and public health aide.

We wondered if he was hit by another student and did not want to tell us. We contacted the resource officer and asked if he would review the cameras to see if there was any incident in the hallways transitioning to or from class. The officer saw him walk to class without incident. We asked the gym teacher if anything happened in gym class or the locker room. The teacher stated nothing happened that he was aware of. House principal was called, but she did not know the student well.

His parent was called to make her aware of his visit to the health office and of our concern. She spoke to the student and he kept stating, "I don't know." Social worker and special education teacher was called to speak with the student hoping to gather more information and to give nurse background information of the student like his baseline behavior. They stated he was not himself. We called his parent to pick up student.

Parent arrived to health office and at that time, the student would not answer questions. 911 was called due to change in mental status. Later on, the parent called and stated the student took narcotic medication that was not prescribed to him. Through thorough investigation and collaboration between the staff in the health office and other school staff members, this student was able to receive life saving treatment.

—Phyllis Levy, RN

Looking back, the funniest adventure in my School career was the day a controlled pill went down the sink drain. Being new on the job, my worry was – How will I ever explain this? I obviously knew the severity of the situation, so I asked the custodian to take the drain apart so I could at least get the pill. That way I could show my supervisor that is really was an accident. His answer was that he needed special tools, a work order, and on and on. Really – was he kidding? That was not the answer I wanted. I decided to put gloves on and I took the drain apart myself, and got the pill out before it had dissolved!! The supervisor couldn’t believe what I did. We called the state to report what had happened. Apparently they never call back – you just leave a voice message. Well, they called me to say they had heard about dedicated employees, but couldn’t believe I took a drain apart. We chuckled as I explained what I did. They will now hire me if ever necessary! Moral of the story: Never count pills near a sink, even if that’s the only tiny piece of space you have!

One memorable day at my high school, my Health Aide was absent. This school is very busy from the minute the door is opened. They may need a simple bandage to being deathly ill. On this specific day, students were coming in when I message came across the walkie-talkie: “Nurse needed in the gym with a W/C!” As I’m getting the wheelchair to go to the gym, another message comes over the walkie-talkie: “Nurse needed in the woodworking class, lots of blood!” Within the next 30 seconds another message on the walkie-talkie: “Nurse needed in Classroom 120, student can’t breathe and has chest pain!” These calls all came within one minute.

Since obviously it’s impossible to be in 3 places at one time, I got on the walkie-talkie and explained to the administration that I was by myself and need assistance. Within seconds, a VP came in to help. A teacher who knows the student in the gym very well (seizures where the student stares), offered to stay with her until it was over and then bring her to the health office. Student “bleeding to death”, was brought to the Health Office and was found to have a tiny cut. VP assisted in the washing of the hand and then awaited the nurse. I ran to the student who could not breathe. Once I was there, she seemed to calm down. She stated that she was having an anxiety attack. All vitals were good, lungs were clear.

I brought the student to the health office where I now had all the emergencies in one room – out of a seizure, not bleeding to death, and breathing normally. Thank goodness they were all happy endings. Teamwork made this happen – and I am so thankful. As for me, well let’s just say I was the happiest at 2:00 pm.

—Margo Ricciardi, RN, BSN
December 31, 1919.

Dr. C. W. S. Frost,
Health Officer,
City.

Dear Doctor:—

During the past year ending November 1st.,
1919 I have assisted Dr. E. L. Smith and Dr. E. W. Goodenough
in examinations and inspection of the children in the following
schools:

Barnard, Begnal, Bunker Hill, Buxes Hill,
Columbia, Duggan, East Mountain, East Farms, Merriman, Mill
Plain, Mulcahy, Newton Heights, Oronoke, Park Road, Slocum,
Sacred Heart, Town Plot, Washington, Walsh and Hopeville.

Have carried out Medical Inspectors orders
instructing the children in personal hygiene in the school room
and in their homes.

Have made three hundred and fifty home calls
necessary in follow up work as instructed by the Medical Inspector.

Also worked in the Clinic at the City Hall alt-
ternate weeks from three to five in the afternoon caring for the
cases sent there for treatment by the Medical Inspectors and
Principals of Schools.

Respectfully submitted,

Mary A. [Signature]
School Nurse.