



## Meningitis and the School Population

by Marjorie A. Theel, RN, BSN, M.Ed  
Supervisor of Health Services



Meningitis is a term that for many can cause alarm and concern. The definition of meningitis is inflammation of the meninges (membrane covering the spinal cord and brain). It can be one symptom of an illness, just as itchy watery eyes is one

possible symptom of an allergic reaction.

**Bacterial meningitis** can be very serious and result in disability or death if not treated promptly. Bacterial Meningitis may be caused by *Neisseria meningitidis*, *Haemophilus influenzae* serotype b (Hib), *Streptococcus Pneumoniae*, and Group B streptococcus (GBS). All cases are **required** to be reported to the local health department by **health care providers**. The Lincoln Lancaster County Health Department (LLCHD) serves our community. Health department officials will conduct an investigation to ensure that when necessary, all close contacts are provided appropriate treatment to prevent spreading the disease. Vaccinations such as Menactra (*Neisseria meningitidis*) and Hib (*haemophilus influenzae*) help to prevent meningitis illness caused by *Neisseria meningitidis* (menactra) and *Haemophilus influenzae* (Hib).

**Viral** (“aseptic”) meningitis is serious but rarely fatal in people with normal immune systems. Usually, symptoms last from 7-10 days. There is no specific treatment for viral meningitis. Most individuals completely recover on their own within 2 weeks. Different viral infections can lead to viral meningitis. But

most causes in the United States, particularly during the summer and fall months, are caused by **enteroviruses** (which include enteroviruses, coxsackieviruses, and echoviruses). Most people who are infected with enteroviruses either have no symptoms or only get a cold, rash or mouth sores with low-grade fever. And, only a small number of people with enterovirus infections develop meningitis.

These viral illnesses can be spread through feces, saliva, sputum or the mucous of an infected person. **Covering coughs** and sneezes into a sleeve or elbow and **proper hand washing** are essential to reduce the possibility of spreading illness. Being exposed to an infected person may put you at risk of becoming ill from the virus, but there is only a minimal chance that you will develop the symptom of meningitis.

The symptoms of viral meningitis are similar in the early stages of the illness. A person suspected of having meningitis may begin antibiotics initially while lab results are pending. This process could take 24-72 hours to complete. Once a bacterial infection is ruled out, antibiotics may be discontinued. In the event of a confirmed case of bacterial meningitis, health department officials will notify the Supervisor of Health Services.

Lincoln Public Schools policy 5431 and Regulation 5431.1 address Communicable Disease Control. The school district will cooperate with county and state health department officials in implementing any procedures that need to be followed. The school nurse serves as the liaison with the student’s physician and coordinates health management procedures within the school building. Please see your school nurse if you have questions and remember to **“Wash your Hands”**.

### Resources:

[www.cdc.gov](http://www.cdc.gov) and Lincoln Lancaster County Health Department Communicable Disease Program.

“And no, we don’t know where it will lead.

We just know there’s something much bigger than any of us here.”

—Steve Job  
2/24/55-10/5/11

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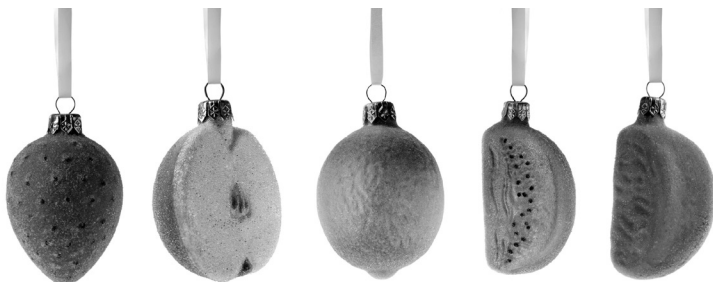
# Staying Healthy This Holiday Season

By *Jessie Coffey, RD, LMNT- Lincoln Public Schools, Nutrition Services*

The holiday season is a time to celebrate with family and friends. Unfortunately, for many it also becomes a time for over-eating and weight gain. According to the National Institutes of Health, holiday eating can result in an extra pound or two every year. Over a lifetime, holiday weight gain can really add up. The holidays don't have to mean weight gain. Focus on a healthy balance of food, activity, and fun family memories. By implementing a few simple tips you and your family can stay healthy through the holiday season.

## Ten Tips for Healthy Holiday Eating

1. **Be realistic.** Don't try to lose pounds during the holidays, instead try to maintain your current weight.
2. **Plan time for everyone to exercise as a family.** Exercise helps relieve holiday stress and prevent weight gain. A moderate and daily increase in exercise can help partially offset increased holiday eating. Try 10- or 15-minute brisk walks twice a day.
3. **Don't skip meals.** Before leaving for a party, eat a light snack like raw vegetables or a piece of fruit to curb your appetite. You will be less tempted to over-indulge.
4. **Survey party buffets before filling your plate.** Choose your favorite foods and skip your least favorite. Include vegetables and fruits to keep your plate balanced and stand across the room from the buffet line to minimize grazing.
5. **Eat until you are satisfied, not stuffed.** Listen to your body and stop when your body says stop. Savor your favorite holiday treats while eating small portions. Sit down, get comfortable, and enjoy.
6. **Be careful with beverages.** Alcohol can induce overeating; non-alcoholic beverages can be full of calories and sugar.
7. **If you overeat at one meal go light on the next.** It takes 500 calories per day (or 3,500 calories per week) above your normal/maintenance consumption to gain one pound. It is impossible to gain weight from one piece of pie!
8. **Take the focus off food.** Turn candy and cookie making time into non-edible projects like making wreaths, dough art decorations or a gingerbread house. Plan group activities with family and friends that aren't all about food. Try serving a holiday meal to the community, playing games or going on a walking tour of decorated homes.
9. **Bring your own healthy dish to a holiday gathering.**
10. **Practice Healthy Holiday Cooking.** Preparing favorite dishes lower in fat and calories will help promote healthy holiday eating. Incorporate some of these simple-cooking tips in traditional holiday recipes to make them healthier.



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We would like to hear from you.

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# Stress How to Cope Better With Life's Challenges

by Jody Geer, RN, BSN

Stress management can be complicated and confusing because there are different types of stress-- acute stress, episodic acute stress, and chronic stress -- each with its own characteristics, symptoms, duration, and treatment approaches. This article will address the acute stress, something we all may have most days. The episodic acute stress and chronic stress will be in following editions.

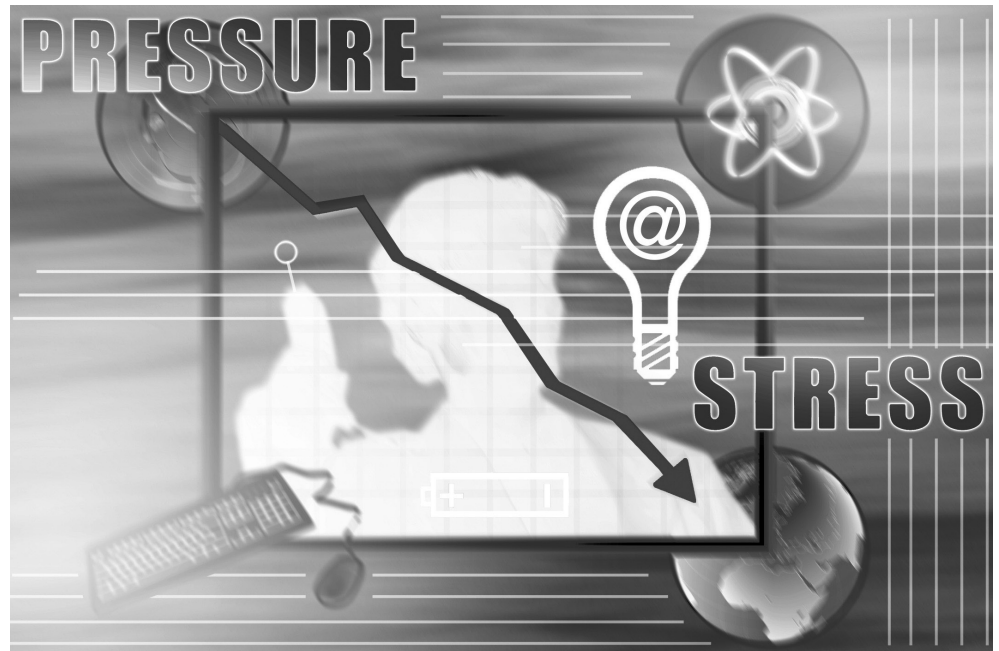
## Acute Stress

Acute stress is the most common form of stress. It comes from demands and pressures of the recent past and anticipated demands and pressures of the near future. Acute stress is thrilling and exciting in small doses, but too much is exhausting. Stress has positive effects when it helps us deal constructively with daily problems and challenges. Stress also has negative effects when things become continuous and/or are not dealt with.

We need to decide if these stressors are controllable (i.e. realize your limitations and act accordingly; when faced with several tasks, do one thing well and then move to the next, don't try to do them all at once), or uncontrollable (i.e. weather, other people's driving).

We are faced with situations that make our hearts beat faster, muscles tense, blood pressure rise, fear, confusion, anger and/or sweating. These emotions and physical reactions can help us prepare for and meet the challenge head on.

After meeting this challenge, all should return to a normal state. This recovery should help us feel emotionally rewarded for overcoming the challenge.



Fortunately, acute stress symptoms are recognized by most people. It's a laundry list of what has gone awry in their lives: the auto accident that crumpled the car fender, a deadline they are rushing to meet, their child's occasional problems at school (but not our children), and so on.

Because it is short term, acute stress doesn't have enough time to do the extensive damage associated with long-term stress. However, overdoing on short-term stress can lead to psychological distress, tension headaches, upset stomach, and other symptoms.

### The most common symptoms are:

- emotional distress--some combination of anger or irritability, anxiety, and depression;
- muscular problems including tension headache, back pain, jaw pain, and the muscular tensions that lead to pulled muscles, tendon and ligament problems;
- stomach, gut and bowel problems such as heartburn, acid stomach, flatulence, diarrhea, constipation, and irritable bowel syndrome;

- continued acute stress leads to elevation in blood pressure, rapid heartbeat, sweaty palms, heart palpitations, fear, confusion, anger, dizziness, migraine headaches, cold hands or feet, shortness of breath, and chest pain.

Acute stress can happen in anyone's life; it is highly treatable and manageable; don't let it take over your life. Smile, laugh, tell someone, reward yourself (chocolate is good), think positive!!!!

*MedlinePlus*, ©1995-2010, The Patient Education Institute, Inc.

American Psychological Association, *The Stress Solution* by Lyle H. Miller, Ph.D., and Alma Dell Smith, Ph.D.



# Teens and Drug Use...

by Barbara Ramsay, RN, MHA  
West Lincoln Elementary School

School Nurses are in a field bombarded with information on a daily basis. We seek current and accurate information to help students make healthy lifestyle decisions. The **National Institute on Drug Abuse** published 11 Shocking Facts about Teens and Drug Use. These facts state:

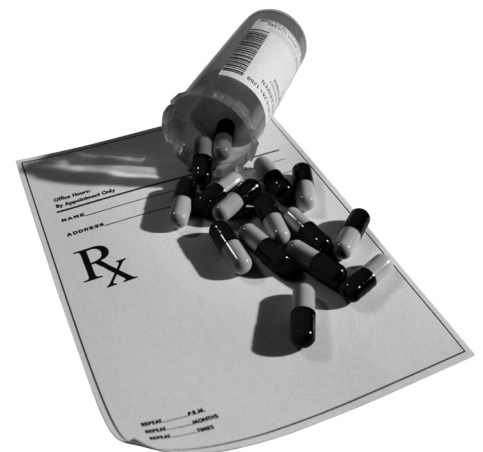
1. Alcohol kills 6.5 times more youth than all other illicit drugs combined.
2. Traffic crashes are the greatest single cause of death for all persons age 6-33. About 45% of these fatalities are alcohol related crashes.
3. More than 60% of teens said that drugs were sold, used or kept at their school.
4. Crystal meth has become the most dangerous drug problem of small town America. Kids between 12 and 14 that live in smaller towns are 104% more likely to use meth than those who live in larger cities.
5. Youth who drink alcohol are 50 times more likely to use cocaine than young people who never drink alcohol.
6. About 64% of teens (12-17) who have abused pain relievers say they got them from friends or relatives, often without their knowledge.
7. While rates of illicit drug use are declining, the rate of prescription drug use remains high. 15.4% of HS seniors reported non-medical use of at least one prescription medication within the past year.
8. In 2008, 1.9 million youth between the ages of 12 to 17 abused prescription drugs.



9. Around 28% of teens know a friend or classmate who has used ecstasy, with 17% knowing more than one user.
10. By the 8th grade, 52% of adolescents have consumed alcohol, 41% have smoked cigarettes, and 20% have used marijuana.
11. Teenagers whose parents talk to them regularly about the dangers of drugs are 42% less likely to use drugs than those whose parents don't, yet only a quarter of teens report having these conversations.

**Tom Riley, spokesman for the Office of National Drug Control Policy states,** "teen use of illegal drugs is actually down." But Janet Kornblum of USA Today tells us it is easier for a typical teen to get his hands on prescription drugs than a six-pack of beer. According to the 13th annual survey on attitudes about drug abuse from the National Center on Addiction and Substance Abuse (CASA) at Columbia University, Over the Counter drugs are the new "party" drugs among teens (especially the younger teens). More teens now say it's easier for them to acquire prescription drugs (usually powerful painkillers) than it is to buy beer. Their main source of drugs such

as OxyContin, Percocet, Vicodin and Ritalin: "the medicine cabinet," says Elizabeth Planet, director of special projects for CASA. "Another big source of these drugs is their friends." CASA president Joseph Califano says, "These parents are passive pushers by not taking care of their drugs." Many youth believe these medications are safer than street drugs because they are prescribed. Ralph Lopez, a New York pediatrician who specializes in teens and a clinical professor of Pediatrics at the Weill Medical College of Cornell University states that drugs such as Vicodin can be detrimental to the still-developing teenage brain and can impair judgment in people who are already prone to mistakes in judgment.



ment. The drug increases the risk for accidents, sexual activity and the use of more drugs. Many experts recommend locking up drugs. But the best way to prevent drug abuse is good old-fashioned parenting, says Planet and others.

**An interview with Officer Robert Norton, the South East High School Resource Officer** updates us on recent legislative changes that have criminalized the possession and sale of K2 and consequently the use of K2 had dropped significantly in the Lincoln area. Use of Musinex D, Adderal, Coricedon cough medication, hydrocodone, Xanax are all medications to have on our radar screen for youth abuse, as well as spray paint for huffing and the use of alcohol and marijuana. Bath Salts are now in the news as the latest new threat. Officer Norton recommended parental involvement and guidance as the best deterrent to

adolescent. Drug use. "Parents talking with the students about the consequences of driving and making decisions under the influence of drugs and parents being vigilant are most effective." Norton went on to say, once the school nurse detects a potential problem, documentation such as increased heart rate, increased B/P, pupil dilation, nystagmus, tremors, increased respiration rates and unusual "odors" are very important.

The American Association of Poison Control Centers issued a press release Jan. 18th, 2011 **raising the alarm**



**about toxic substances marketed as 'Bath Salts'** and said states are beginning to take action. The products increases blood pressure and heart rate, causes agitation, hallucinations, extreme paranoia and delusions. Bath Salts contain powerful stimulants methedrone and methylenedioxypropylone, also called MDPV, and there have been scattered reports across

the country of drug-induced deaths, accidental overdose or suicide. Most patients calling the Poison Control centers have snorted the substances but they can also be smoked, injected or mixed with water as a beverage. In at least one incident, the substance was injected into the individual's veins. This is the latest designer drug marketed as something not for

human consumption and is still legal to be sold in the U.S. The same chemicals in the so-called 'bath-salts' have also been sold as plant food, pond scum cleaner, and insecticide. They come with gentle-sounding names like

Ivory Wave and Vanilla Sky. Louisiana, Florida, North Dakota and West Virginia have banned or outlawed the chemicals. Other states are beginning to take similar steps. People can easily buy these bath salts at any age. They are available on the internet, corner stores and truck stops for \$20.00. Parents should be especially cautious and monitor any usage in their area.

Jeffrey Baldwin, professor of pharmacy practice and pediatrics at the University of Nebraska Medical Center in Omaha states "If you take the very worst of some of the other drugs--LSD and Ecstasy with their hallucinogenic, delusional type properties; PCP with extreme agitation, superhuman strength and combativeness, as well as the stimulant properties of cocaine and meth--if you take all the worst of those and put them all together this is what you get."

Federal regulation of the product can take time. They are studying and researching the abuse data to determine if the compounds warrant scheduling. The Department of Health and Human Services is also involved in determining how regulations will be implemented.

**"More teens now say it's easier for them to acquire prescription drugs (usually powerful painkillers) than it is to buy beer."**



## In the Spotlight

**Jamie Klein, RN, BSN**  
*School Nurse Beattie, Human  
 Zeman*



I am a Lincoln native. I grew up here with my parents, one brother and one sister. I grew up attending Lincoln Public Schools as Jamie Feerhusen. I was a Sheridan Shark, an Irving Aardvark and a Southeast Knight. I have great memories from my time as a student at LPS. Some memories that stand out are the big tractor tires you could leap frog over at Sheridan, Irving dances, and the “new” Prash center at Southeast. Teachers that I remember well: Mr. Kastle, Mr. Dougherty, Miss Roscoe and Mrs. Kitt. Mr. Nelson was my Anatomy and Physiology teacher at Southeast and to him I give credit for breaking me out of my academic shell, giving me new confidence, and sparking my interest in Science. Most days I kept busy playing volleyball, basketball and track. I played softball all summer long!



I attended college and played softball at Nebraska Wesleyan. I was a biology and nursing major there for two years. After finishing my pre-nursing requirements I attended Bryan Memorial School of Nursing for two years and received my Registered Nurse diploma in 1996. One month after graduating I married my husband Joe.

Shortly after getting married we moved to Sioux Falls, SD where I worked for a cardiologist. After having a beautifully spirited daughter in 1998 and an amazingly kindhearted son in 2001, I worked very part time teaching anatomy and physiology at a community college and childbirth education classes at the hospital. During my visits back to Lincoln with my kids I would often visit my mom at Meadowlane Elementary. She was their health technician for 18 plus years. My visits to my mom, and Marcia Jones, the school nurse sparked an interest in school nursing.

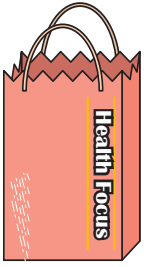
We moved back to Lincoln in 2002 and were happy to be back home closer to family and friends. I worked part time at Lincoln Pediatric Group as a triage nurse for 6 years. We had another wonderful son in 2004 and in 2007 adopted our youngest high spirited son from Alaska. Our experience with adopting a baby from another culture and spending a month in Alaska with a newborn while my husband and kids were in Nebraska, was a life changing and wonderful experience.

In order to pursue a career in school nursing I completed my Bachelor of Science degree in Nursing through UNMC in Omaha, in 2009. I started working part time at LPS at the end of 2009. This year is my first year full time. This year I have the privilege of working at Beattie, Zeeman and Humann elementary schools. Balancing my time among them has been one of my biggest challenges. I enjoy getting to know students and their families. I feel the most rewarding part of school nursing is seeing students achieve more than they thought they could (in school) after meeting their medical needs and concerns.

My favorite past time is spending time with my kids and attending their many activities. We enjoy spending time with family, snow skiing, camping, scrapbooking, cooking and traveling together. A good portion of the year, my time is

spent coaching my daughter’s 14 and under Lincoln Swingers fast pitch softball team. Many of the girls I started coaching when they were 8-10 years old. It is very rewarding to see them improve, reach goals and be successful. I am hopeful that the positive role models and life lessons that I experienced growing up has given me the ability to give these same gifts back to my kids, students and players today.

**“I feel the most rewarding part of school nursing is seeing students achieve more than they thought they could in school after meeting their medical needs and concerns.”**



## Gayle's Grab Bag

### Time and Attendance (TAS) Payroll Adjustments

Payroll has made some small adjustments to TAS to make it more user friendly. You do not need to highlight the entire week when editing a single day or two in the week. You can just click on that day or enter that day in the "To and From" and then edit it. This makes it easier so you don't have to scroll down to the day you want to edit and then have to keep scrolling down to the day you are editing every time you make a change.

I would like to take this time to thank everyone for their efforts in doing their TAS. Great job, keep up the good work. I think it has become a lot easier now that people are getting used to how to use it and edit their time. Remember absences that are known in advance (even the day before) need to be entered in Sub Finder whether or not you need a sub. All nurses need to send in a Request for Leave form into us any time they want time off. As always, please let me know if there is any way I can help you with your TAS.

I wish everyone a joyous holiday season, filled with fun, relaxation and special times with family and friends to cherish.

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## Under the Microscope

### Keeping tabs on what's new

#### New Employees

**Cherie Birkel**, Zeman Health Technician

**Andrea Briley**, Substitute RN

**Jodi Derks**, Substitute RN

**Sharon Fusco**, Substitute RN

**Connie Nelson**, Substitute RN

#### Assignment Changes

**Melisse' Ebeler**, Sub LPN to Treatment Nurse

## Nursing Humor

### It's hard to live with a nurse because...

- 1) When you forget to flush the toilet, you get a complete analysis with a plan on how to correct any noted problems.
- 2) Thanksgiving dinner comes in pre-cut small pieces because she doesn't want to have to perform the Heimlich maneuver and be reminded of work on the only holiday she's had off in years.
- 3) You've been awakened from a dead sleep in the middle of the night to find her shaking you because your breathing patterns were a little too close to a Cheyne-Stokes rhythm.

Credit: Dartmouth-Hitchcock Medical Center - Lebanon, NH



## Community Information

**Free Blood Pressure Screening**  
Offered by **Nebraska Heart Institute**  
@ Westfield-Gateway Shopping Mall  
Located in the Mall near the Inf. Desk  
**When:** 2nd & 4th Thurs. of each month  
**Time:** 7:30-9:30am

**Journal Star Recycling**  
402-473-2695  
[Journalstar.com/recycle](http://Journalstar.com/recycle)

**Saint Elizabeth Regional Med. Cntr. East Tower, Lower Level**  
**Course: Pre-Diabetes – 12/17/2011**  
For the person who has been told they have pre-diabetes or a touch of diabetes or a little diabetes. Lectures given by a diabetes educator, exercise specialist and a dietitian.

**Instructor(s):** Pam Wollenburg, Kristi Eden  
**Date:** Sat. 12/17 **Time:** 9-12 noon.  
**Price:** \$15.00

**KWANZA** – a celebration of family, community and culture.  
**Where:** Malone Community Center  
2032 U Street

**When:** Thurs. Dec 29, 2011

**Time:** 5-7pm  
Includes a Health Fair, Candle lighting/  
Speakers

Please encourage families to attend.

**Food Bank of Lincoln**  
4840 Doris Blair Circle  
Lincoln, Ne 68504-1465

1/2 mile north Superior, on N. 48th

[www.lincolnfoodbank.org](http://www.lincolnfoodbank.org)

–Has list of food distribution sites.

–Need Assistance?

–Pantries and kitchens in Lincoln

–Lincoln Resource List

–Neighborhood Food Program

–Lincoln Senior Meals Inf.

–Summer feeding sites for children 1-18.

#### Referral Agencies in Lincoln

**Food Net:** Ph. 402-416-6197

(daily food distributions).

**Friendship Home:** 402-437-9302

(Emergency help for abused mother s and children).

**Gathering Place:** 402-476-7398

(Free dinners Mon-Fri.

no questions asked).

**General Assistance:** 402-441-3095

(Help with utilities, etc).

**Good Neighbor Center:** 402-477-4173

(Food, clothing, counseling).

Call for appt.

**Community Action Partnership:** 402-441-4515

Help with utilities etc.

**El Centro de las Americas:** 402-474-3950

At Malone Community Center.

Various programs and assistance.

**Health & Human Services:** 402-471-7000

Help with utilities, SNAP, economic assistance, etc.