National School Health Screening Guideline 2024

National School Health Screening Guideline Taskforce

| Name Entity | Job title | Entity |
|------------------------------|---|--|
| Dr. Suad Al Awar | Family medicine Consultant | Ministry of Health and Prevention |
| Dr. Latifa Al Awadhi | Pediatric specialist | Ministry of Health and Prevention |
| Dr. Hayat Ahmed Mohamed | Family medicine Consultant | Ministry of Health and Prevention |
| Ayyat Mohammed Al Blooshi | Medical Technician | Ministry of Health and Prevention |
| Shaikha Bakhit Al Shamsi | Medical Technician | Ministry of Health and Prevention |
| Dr. Sumaya Mohamed AlBlooshi | Director of Nursing Department | Emirates Health Services |
| Dr. Haifa Hannawi | Director of Dental Services | Emirates Health Services |
| Sara Saleh Buali | Head of Public Health Services | Emirates Health Services |
| Anelia Bouwer | Nursing care policy specialist | Emirates Health Services |
| Dr. Ather Sajjad Jafri | Consultant Child Psychiatrist | Emirates Health Services |
| Dr. Noura Juma | Pediatric Dentist | Emirates Health Services |
| Maryam Saif Alsuwaidi | School Health Focal Point | Emirates Health Services |
| Dr. Mousa Mahmoud Marashdeh | Head of Policies and Standards Department of Dental Services | Emirates Health Services |
| HE Dr. Omniyat Al Hajeri | Executive Director Community Health Sector | Abu Dhabi Public Health Center |
| Dr. Mariam Al Wahedi | Director of the Community Health Department | Abu Dhabi Public Health Center |
| Dr. Huda Al Shemeili | Section Head Community Health | Abu Dhabi Public Health Center |
| Mariam Al Mansoori | Section head | Abu Dhabi Public Health Center |
| Dr. Hamda Al Remeithi | Genetic personal protection senior specialist | Abu Dhabi Public Health Center |
| Dr. Hessah Al Hameli | Partnerships Specialist | Abu Dhabi Public Health Center |
| Dr. Huda Qasem Al Faqeeh | Health Center Manager – GP Dentist | Ambulatory Healthcare Service |
| Dr. Ibtehal Abbas Makki | Family medicine specialist | Dubai Health |
| Dr. Maha Akram Abdo | Family medicine specialist | Dubai Health |
| Sana Easa Belal Naser | Acting Head of the school Health Section | Dubai Health |
| Dr. Fatima Hassan | General practitioner | Dubai Health |
| Dr. Khawla Belhoul | Senior Director - Dental Services | Dubai Health |
| Sultan Al Shehhi | Head of the Medical and Curative Services section | Ministry of Community & Development |
| Mona Rashid AlMazrouqi | Project Manager / Physiotherapist PODs | Ministry of Community & Development |
| Fatema Mohammed Alkhatri | Nursing Care Policy Specialist Student Wellbeing- Division Director | Ministry of Community & Development |
| Dr. Mona Alameri | | Department of Education and Knowledge – Abu Dhabi |

Table of Contents

Content Page Number

1. Abbreviations

2. Definitions

3. Introduction

- 3.1 Objectives of the guideline
- 3.2 Scope of the guideline
- 3.3 Inclusion criteria

4. School health screening requirement

- 4.1 Student health file
- 4.2 Parental/guardian consents
- 4.3 Students Of Determination
- 4.4 Health education

5. Annual school health screening assessment

- 5.1 History
- 5.2 Growth assessment
- 5.3 Vision screening
- 5.4 Immunization

6. Specific school health screening assessment

- 6.1 Physical examination
 - 6.1.1 Scoliosis screening
- 6.2 Hearing screening
- 6.3 Oral health
 - 6.3.1 Oral health promotion programs
 - 6.3.2 Supervised toothbrushing programs
 - 6.3.3 Fluoride varnish programs
 - 6.3.4 Dental check-up
 - 6.4 Mental health screening
 - 6.4.1 Attention Deficit Hyperactivity Disorder (ADHD)
 - 6.4.2 Depression
- 6.5 Smoking screening
- 6.6 Investigations (complete Blood count)

Table of Contents

Content Page Number

7. Documentation & reporting data

8. Roles & responsibilities

- 8.1 Schools (Governments & privates)
- 8.2 Focal point at Health Authority
- 8.3 School nurses
- 8.4 Teachers
- 8.5 Parents/guardians
- 8.6 Physicians
- 8.7 Students

9. Key Performance Indicators (KPI)

9.1 Focal points at Health Authority

10. Appendix

Appendix 1: Medical history form

Appendix 2: School health screening consent form

Appendix 3: School Screening Tests Scheduled

by grade.

Appendix 4: Physical exam form

Appendix 5: Body mass index (BMI) screening process

for school nurse

Appendix 6: ADHD screening (SNAP-IV 18questionnaire)

Appendix 7: Depression screening (PHQ-questionnaire)

Appendix 8: Ministry of health and prevention school

health guide lessons list

11. References

1. Abbreviation

| Tawas | Abbreviation |
|-------|--------------|
| Term | Appreviation |
| | |

| Ministry of health & prevention |
|--|
| Body Mass index |
| Patient Health Questionnaire-9item |
| Attention deficit hyperactivity disorder |
| Complete blood count |
| |

2. Definition

| Torm | Definition |
|------|------------|
| Lerm | Dellillion |

| School health services | Services provided by a healthcare workers |
|------------------------|--|
| | to students enrolled in the school, either |
| | within school clinics or in a health care |
| | facilities. |

| Affiliated health care facility | Health care center / hospital that has a contract with school to do the school |
|---------------------------------|--|
| | health screening services. |

Students of determination (SOD) people with disabilities as every person who suffers from a complete or partial, permanent, or temporary deficiency or impairment in his physical, sensory,

mental, communication, educational, or psychological abilities, to the extent that limits the ability to meet his normal requirements like his non-disabled

counterparts.

Acknowledgement

The development of this clinical guideline would not have been possible without the support, contributions, and expertise of many individuals and organizations.

Firstly, we would like to express our deepest gratitude to the members of the guideline development panel, whose dedication, expertise, and hard work have been invaluable in the creation of this document. Special thanks to [Panel Member], [Panel Member 2], [Panel Member 3], and [Panel Member 4] for their leadership and insightful contributions.

We are particularly grateful to our clinical experts and practitioners, [Expert 1], [Expert 2], and [Expert 3], for their thorough reviews and valuable feedback, which have greatly enhanced the quality and relevance of this guideline.

Lastly, we thank our colleagues from ministry of community development and ADEK for their ongoing support and encouragement. Their collaboration and dedication to improving clinical practice have been a source of inspiration

Dr. Hussain Al Rand The Assistant Undersecretary for the Public Health Sector Ministry of Health and Prevention

3. Introduction

School health screening plays an important part in identifying health conditions that can affect a child's long-term health and wellbeing. Early detection, diagnosis, and intervention can prevent complication, improve the overall health of every student, and enable school children to reach their full potential.

The UAE government has given the health of school children the utmost care and recognizes the importance of early detection and intervention in identifying potential health and developmental issues in school children. As part of their efforts, the UAE has implemented comprehensive national school health screening to address these concerns.

The National school health screening is provided for school children from KG1-Grade 12 in government and private schools. The service includes history taking, comprehensive physical examination, provision of immunization, investigation, screening for hearing, oral, vision, scoliosis, depression, and attention deficit hyperactive disorder (ADHD) as well as health education. Furthermore, documentation, appropriate referral, follow-up care and reporting of screening results are included.

The school health screening consists of two types of assessments: an annual school assessment conducted by an assigned school nurse within the school's clinic, and a specific school assessment conducted by a health care worker within the school clinic or in the healthcare facility.

To ensure students receive high-quality screening based on reliable evidence, it is necessary to have a school health screening schedule, proper documentation, and reporting of results to the relevant health authority. Additionally, clinical care pathways should be established to provide healthcare professionals with supplementary guidance.

3.1 Objectives of the Guideline

- To detect early any health or developmental issues enabling timely intervention and support for students.
- To provide a consistent, clear approach and pathway for school health screening in UAE.
- 3. To standardize quality of health care for all students.
- 4. To have base-line national data on the outcome of the health screening among students.

3.2 Scope of the Guideline

This guideline applies to:

- A licensed health care provider in UAE performs school health screenings in the clinics at schools, primary care centers, or affiliated health care facilities.
- All students in schools.
- All government and private schools.

3.3 Inclusion criteria

- All students in UAE aged 4 years and above (KG1 Grade 12).
- Students of determination who are fully integrated in public and private schools.

4. School Health Screening Requirements

- All school clinics and affiliated health care facilities must implement the national guideline of school health screening and adopt procedures for documenting, reporting, referral, and a follow-up plan.
- All healthcare professionals involved in providing school health screening must conduct the screening for students according to the national guideline.
- School health screenings must be conducted within a certain timeframe based on the national guidelines.
- Parents or guardians must be informed of any suspected health issues identified through screening tests or observations by school personnel.

4.1 Student health file

- Student health file must include a copy of a valid ID card, parental/ guardian consent forms, vaccination card, medical history form, medical reports if required, referral form and results of screening tests.
- A medical history form must be distributed to all parents/guardians for completion and signature annually. (Appendix 1).
- If a student has a health file from a previous school, the school nurse should inform the school administration to retrieve it

4.2 Parental / guardian consents

- School health screening consent form must be signed by the parent/guardian (Appendix 2).
- Immunization consent forms must be signed by the parent/guardian for the required age as per the national immunization program. (refer to national immunization quideline).
- If parents/ guardians decline screening via a consent form, their decision will be respected after the importance of the screening has been clearly explained to them.

4.3 Students of Determination (SOD), who are fully integrated into public and private schools.

- It's the school's responsibility to ensure that all Students of Determination are screened.
- Students of Determination should be provided with support to enable them to be enrolled in the school health screening.
- A Students of Determination team at school will collaborate with school nurses to decide how each student of determination will take part in the screening process.
 Students who are unable to screen with confidence, regardless of their level of severity, must be referred to medical care for the needful screening.
- Students can be exempted from screening if they have been recently screened and have got an updated medical report with relevant screening.
- A teaching assistant or special education teacher may assist certain students of determination in participating in the screenings successfully, but she/he should not lead the student to the answers.
- In Case where the screening of students is not possible due to certain disabilities, school nurse shall inform parent/ guardian about required screening and give a referral letter to seek the required screening.
- The school nurse should maintain contact with the parent /guardian to verify if the student has received medical care, document it, and request a medical note from the healthcare provider.

3.4 Health Education

- The school nurse should provide health education to all students in groups or individually as
 well as during any visit to the school clinic on topics including (nutrition, physical activity,
 preventing injuries, smoking prevention, and oral health).
- Refer to Ministry of health and prevention school health guide lessons list. (Appendix 9)
- Educational organizations must inform the related educational/ health authority about any planned health promotion events and campaigns that may be arranged by private authorities.
- Organized schools' campaigns/events by public and/or private health entities must use only the approved materials during their campaigns.
- · All events must be recorded by the school nurse.

5. Annual school health screening assessment

5.1 History

- The medical history should be obtained and updated by parent/ guardian through the student medical history form at the time of enrollment and then annually.
- If the medical history of the student turn to be positive for any medical condition (e.g.: diabetes, bronchial asthma, allergies, ...etc.) A medical report should be requested and attached in the student health file.
- If a student joins the screening for the first time, all catch-up screening tests must be done.

5.2 Growth Assessment

- All students should be examined for height, weight, and BMI annually by the school nurse.
- The measurements of height, weight, and BMI should be plotted in the WHO chart (Z-score). (Appendix 6).
- If a growth issue is detected, the parent/ guardian should be notified and given a referral letter by the school nurse to seek medical care.
- The school nurse should maintain contact with the parent /guardian to verify if the student has received medical care, document it, and request a medical note from the healthcare provider.

5.3 Vision Screening

- Vision screening must be conducted annually by a trained school nurse or optometrist. This includes the following:
 - Assess distance visual acuity and observing eye movements during the screening, such as squinting, rubbing eyes, or leaning forward.
 - Explain to the students how to respond correctly to the figures on the displayed chart.
 - o Document the visual acuity and eye movement during the screening.
- Vision screening must be conducted annually by a trained school nurse or optometrist. This includes the following:
 - o The distance for the visual acuity screening must be 6 meters or 3 meters with mirror.
 - o Each eye should be tested individually while the other eye is covered.
 - If the student wears glasses or contact lenses, screen with glasses, or contact lenses in place.
 - Eye chart (Snellen chart) is used for the screening.
 - For special cases, it is recommended to have special cards with animal pictures or some common objects.
 - Color vision screening is recommended for grade 5 students (optional).
- Results to be recorded in the student's health file and compared with previous years reading.
- If positive findings were detected, parents/ guardian should be informed and receive a referral letter by school nurse to seek medical care.
- The school nurse should maintain contact with the parent /guardian to verify if the student has received medical care, document it, and request a medical note from the healthcare provider.

5.4 Immunization

- Vaccination status of all students should be checked at the time of enrolment and annually.
- All vaccination should be up to date according to the national immunization guidelines. (refer to national immunization guidelines)

6. Specific school health screening assessment according to age or grade

6.1 Physical examination

- A comprehensive physical examination should be conducted by a licensed physician in the school clinics or affiliated health care facility (Appendix 4).
- The comprehensive physical examination must be conducted for students at KG1, Grade 1, Grade 5, Grade 9 and should be completed within the first semester of the academic year.
- The medical history, growth parameters, vital signs and laboratory results must be reviewed by the physician.
- Blood pressure must be measured and plotted in the chart (Appendix 5).
- Depression screening should be performed by a physician for grade 9 students during the physical examination using PHQ-9 questionnaire (Appendix 8).
- The examination of genitalia will be excluded from the physical examination of student due to privacy reasons. A referral letter will be provided by the school nurse for this examination to be conducted in a healthcare facility with the presence of parents.
- Positive findings in the physical examination of a student should be discussed with the parent/ guardian and a referral letter should be provided.
- The school nurse should maintain contact with the parent /guardian to verify if the student has received medical care, document it, and request a medical note from the healthcare provider.

6.1.1 Scoliosis screening

- During the physical examination, scoliosis screening shall be conducted for each female student in the fifth grade and each male student in the ninth grade.
- The screening must be performed by the physician accompanied by the school nurse in an enclosed area for privacy.
- Female student must be examined by a female doctor only along with the female nurse.
- The screening must be explained to all students prior to the screening.
- During the physical exam, the student will be asked to face his/her back to the
 examiner. The student's back will be examined from behind with the student standing
 upright. The student will be asked to bend forward so that the examiner can screen for
 abnormal curvature of the backbone (Forward Bending Test).
- If positive findings were detected, parents/ guardian should be informed and receive a referral letter to seek medical care.
- The school nurse should maintain contact with the parent /guardian to verify if the student has received medical care, document it, and request a medical note from the healthcare provider.

6.2 Hearing screening

- Hearing screenings must be conducted as follows:
 - Mandatory for Grade 1 students
 - o Recommended for Grade 3 and Grade 5 students

- o performed using an audiometer.
- o Conducted by a trained school nurse or a specialized technician.
- o Results must be recorded in the student's health file.
- If positive findings were detected, parents/ guardian should be informed and receive a referral letter by school nurse to seek medical care.
- The school nurse should maintain contact with the parent /guardian to verify if the student has received medical care, document it, and request a medical note from the healthcare provider.
- If no audiometer is available at school, parents and guardians will receive an advice letter to seek medical care for hearing screening.
- The school nurse should maintain contact with the parent /guardian to verify if the student has been screened for hearing, document it, and request a medical note from the healthcare provider.

6.3 Oral Health

6.3.1 Oral health promotion programs.

- Target group 1: Kindergarten students (KG 1 and KG 2)
- Target group 2: Grade 1, 2 and 3
- Approved oral health promotion materials must be unified and approved by all health authorities (Appendix 10).
- Trained and privileged school nurses must provide oral health promotion to target groups using the approved materials.
- Organized schools' campaigns/events by public and/or private dentists must use only the unified approved materials during their campaigns.

6.3.2 Supervised toothbrushing programs

- Target group: Kindergarten students (KG 1 and KG 2)
- KG 1 and KG 2 students must perform once a day wet/dry toothbrushing during their school time.
- Health authority must train related school staff (teachers/assistants) who will supervise the students during toothbrushing activity.
- Toothbrushing programs supply can be provided by the students themselves or sponsored whenever possible.
- Regular fluoridated toothpaste must be used with no less than 1000 ppm.

6.3.3 Fluoride varnish programs

- Target group: Grade 1, 2 and 3
- Fluoride varnish must be applied 1-2 times a year for the target group.
- Fluoride varnish must be applied by a dentist or trained/privileged healthcare worker.
- Fluoride varnish supply for public schools must be provided by related health authority.
- Fluoride varnish supply for private schools must be provided by affiliated health care facilities .
- Fluoride varnish campaigns run by the private sector must be reviewed and approved by related health authorities.

6.3.4 Dental check-up (Recommended)

- Target group: Grade 1 students
- Timing: During the academic year of grade 1
- Full clinical and radiographic dental examination must be in a clinical set-up.
- Parents will receive an advice letter from a school nurse to visit the dental clinic for checkup at grade one.
- The school nurse should maintain contact with the parent /guardian to verify if the student has received oral care, document it, and request a medical note from the healthcare provider

6.4. Mental Health Screening

6.4.1 Attention Deficit Hyperactivity Disorder ADHD

- The Grade 1 class teacher should refer students showing symptoms of ADHD to the school nurse for screening.
- The school nurse provides SNAP-IV 18 questionnaire for attention deficit hyperactivity disorder (ADHD) (Appendix 7).
- The questionnaire must be completed by both the class teacher and the parent/guardian, with one copy for each.
- The school nurse must collect and interpret the findings.
- The screening is considered positive if one of the two filled questionnaires scored positive either from class teacher or parent/guardian.
- If positive findings were detected, parent/ guardian should be informed and receive a referral letter by school nurse to seek medical care.
- The school nurse should maintain contact with the parent /guardian to verify if the student has received medical care, document it, and request a medical note from the healthcare provider.

6.4.2 Depression

- Students in grade 9 must be screened for depression by a physician using PHQ-9 questionnaire during the physical examination (Appendix 8).
- Positive findings of the student should be discussed with the parent/ guardian and a referral letter should be provided. This discussion may include school psychologist, school counselor or social worker.
- Confidentiality must be maintained.
- The school nurse should maintain contact with the parent /guardian to verify if the student has received medical care, document it, and request a medical note from the healthcare provider.

6.5 Smoking screening

- Identify the smoking status of all students over the age of 10 as follows:
 - o during every school clinic visit by school nurse.
 - o during history taking and physical examinations by the physician.
- If there is a history of smoking, the student should be counseled and encouraged to quiet.
- If the student is willing to quiet guide to smoking cessation clinic.

6.6 Investigations (Complete Blood Count)

- Complete blood count should be performed for all students at grade 1 and for female students at grade 9 (mainly for anemia).
- If a CBC test was performed at a licensed healthcare facility within the last three months, the results can be considered valid. Parents/ guardians must submit the CBC results to the school prior to the scheduled screening.
- Blood samples should be collected in the school clinic or at a healthcare facility after obtaining consent from the parent /guardian.
- Blood test result must be documented in the student health file.
- If positive findings were detected, parent/ guardian should be informed and receive a referral letter by school nurse to seek medical care.
- The school nurse should maintain contact with the parent /guardian to verify if the student has received medical care, document it, and request a medical note from the healthcare provider.

7. Documentation and reporting data

- School Health screening findings should be recorded accurately in the student health file by the school nurse and the physician.
- parent/ guardian of the referred cases should be requested to provide a medical report/recommendation from the physician/specialist and to be attached in the student health file.
- Statistics of the school health screening and key performance indicators must be reported to the concerned health authority periodically.
- The concerned health authorities need to update the Ministry of Health & Prevention annually with the statistics and key performance indicators.

8. Roles and Responsibilities

8.1 Schools (Government & Private):

- All schools must:
 - Comply with federal and local laws and regulations.
 - Assign a full-time school nurse according to the criteria of the concerned health authority.
 - Maintain a clean and safe physical environment in the clinic.
 - o Refrain students who are unwell from attending school.
 - Support the school nurses in adhering to national guidelines for school health screenings and student care. Assist in gathering medical history and obtaining parent or guardian consent, while ensuring the confidentiality, privacy, and security of student information.
 - Establish policies and procedures to communicate with parent/ guardian for the transfer of students to the health care facility in cases of emergency.

8.2 Focal point at Health Authority

- Follow up on the implementation of national programs and activities related to school health.
- Providing data, statistics and indicators related to school health to MOHAP.

8.3 School nurses:

- All school nurses must be licensed in UAE and have the necessary training and skills to deliver the school health screening.
- Communicate with parents/ guardians to update the medical history of the students annually and make sure to have a copy of a valid ID, health card and vaccination card of all students.

- If a student has a health file from a previous school, the school nurse should notify the school administration to obtain the old health file.
- If a student has a health file from a previous school, the school nurse should inform the school administration to retrieve it.
- · Review and update the student health file.
- · Conduct the screening for students according to the guidelines within a specific timeframe.
- Refer students with positive screening results by preparing a referral letter and informing their parent/ guardian.
- Give health education to students during any visit to the school clinic and when required (refer to Ministry of health and prevention school health guide lessons list Appendix 8).
- Collect and report the statistics & KPI s from the school health screenings to the concerned health authority.
- The confidentiality of students must be maintained.

8.4 Teachers:

- · Refer the students in case of developing any health concerning symptoms to the school nurse.
- observe signs and symptoms of ADHD among the class students and inform the school nurse.
- Complete the ADHD questionnaire (using SNAP-IV 18 questionnaire) when requested.
- · The confidentiality of students must be maintained.

8.5 Parents/guardians:

- Read, fill in, and sign the student medical history form.
- Provide a copy of student's valid ID card, vaccination card, and a medical report in case of having any medical condition.
- Sign the consent form for the school health screening and vaccination.
- Provide and update the correct parent/ guardian information with two contact numbers for emergencies.
- In case of positive results, referral letter will be given, and it is parents/guardians responsibility to follow up with medical provider for further assessment & update school nurse about the assessment with a medical report/note.

8.6 Physicians:

- All healthcare professionals must be licensed in UAE and have the necessary training and skills to deliver the school health screening.
- Conduct the screening for students according to the guidelines within a specific timeframe.
- Refer students with positive screening results according to specialty needed by preparing a referral letter and informing their parent/ guardian.
- · Record the screening results in the student health file.
- Provide counseling for students and parent/ guardian when required.

8.7 Students:

- Participate in school health screening.
- · Cooperate with the school nurse and follow the instructions.
- · Attend the health education sessions.
- · Report to the teacher and nurse in case of developing any symptoms.

9. Key Performance Indicators

| КРІ | Definition | Equation | Targeted Level | Results | Respon sibility |
|---|--|--|-------------------|---------|--|
| Participation rate of student in school health screening (KG1, G1, G5, G9) | The number of students who participated in the school screening from the total number of school students in specific grade. (KG1, G1, G5, G9) | Number of students participated in the school screening / total number of school students in specific grade. (KG1, G1, G5, G9) | Annual 85% | | |
| 2. Percentage of positive screening test findings in any of screening component (BMI, hearing, vision, 7 anemia, depression, and ADHD screening) | Number of students with positive screening test findings from the total number of screened school students in any of screening component (BMI, hearing, vision, oral, anemia, depression, and ADHD screening) | (The number of students with positive screening test findings / the total number of screened school students in any of screening component (BMI, hearing, vision, oral, anemia, depression, and ADHD screening)) *100 | N/A | | |
| 3. Referral rate of students with abnormal screening | The number of referred students with positive findings from the total number of students with positive findings | (The number of referred students with positive findings / the total number of students with positive findings) *100 | 100% | | |
| Percentage of positive screening test for depression | The number of students with positive screening for depression from the total number of screened students | (The number of students get positive screening for depression / the total number of screened students) *100 | N/A | | FOCAL POINT FROM |
| 5. Percentage of positive screening test for ADHD | The number of students with positive screening for ADHD from the total number of students in grade | (The number of students get positive screening for ADHD / the total number of students in grade 1) *100 | N/A | | HEALTH AUTHO RITIES THEN TO MOHAP |
| 6. Percentage of positive screening test for anemia | The number of students with positive screening for anemia from the total number of screened students | (The number of students with positive screening for anemia / the total number of screened students) *100 | N/A | | |
| 7. Number of abnormal BMI Z score * Obese > +3 * Overweight +2 - +3 * Thinness < -2 | The number of students with abnormal BMI Z score interpretation results | Number Appendix 5 | N/A | | |
| 8. Participation rate in supervised toothbrushing programs (KG 1 and KG 2 students) | Number of students who participated from the total number who have the consent to participate | Numerator: number of students who participated Denominator: total number of students who have the consent to participate | 85% | | |
| 9. Participation rate in fluoride varnish programs. (Grade 1,2, and 3 students) | Number of students who participated from the total number who have the consent to participate | Numerator: number of students who participated Denominator: total number of students who have the consent to participate | 85% | | |

10. Focal Points at Health Authorities

| Type of Schools | Concerned health authority | |
|--|--------------------------------|--|
| Government schools all over the UAE | Emirates Heath Services | |
| Private schools in Sharjah, Ajman, | Emirates Health Services | |
| Umm Al Quwain | Emirates Health Services | |
| Ras Al Khaimah and Fujairah | | |
| Abu Dhabi private & government schools | Abu Dhabi Public Health Center | |
| Dubai private schools | Dubai Health Authority | |

11. Appendix

Appendix 1: Medical history form

Appendix 2: School health screening consent form

Appendix 3: School Screening Tests Scheduled by grade.

Appendix 4: Physical exam form

Appendix 5: Blood pressure chart

Appendix 6: Body mass index (BMI) screening process for school nurse

Appendix 7: ADHD screening (SNAP-IV 18 questionnaire)

Appendix 8: Depression screening (PHQ-9 questionnaire)

Appendix 9: Ministry of health and prevention school health guide lessons list

Appendix 10: Oral health promotion

Dear parent/ Guardian:

If Yes. what is it?

Student Medical History Form

Student No.:

| | indly fill this form about the medi nswer is Yes, please provide us with | · | answeri | ng Yes | or No. If any |
|-------------------------------|---|------------------------|--------------|---------|---------------|
| Stud Date Guar Relig | ents Data: ent's Name: of Birth: dian's Name | School: Relation to | Stı den | it: | Class: |
| | ent's / guardian's Contact: | A | _ | | Charact. |
| | ate: City: . e phone NO.: | | | | |
| | ired documents: | attached | | | |
| - | mirates ID copy | _ | NT - 1 | _ | |
| | accination card copy | Yes □ Yes □ | No l No l | | |
| - lı | nsurance card copy | Yes 🗆 | Nol | | |
| No. | Health Cor | ncerns | Yes | No | Commen |
| 1. | Does the students have any allergy or sensitivity to medications/food/etc. please mention it if any | | | | |
| 2. | Does the students suffer from any c | ardiac problems? | | | |
| 3. | Is the student Diabetic? | | | | |
| 4. | Does the student have hypertension? | | | | |
| 5. | Is the student asthmatic? | | | | |
| 6. | Does the student suffer from any renal problem? | | | | |
| 7. | Did the student suffer from recurrent urinary tract infections? | | | | |
| 8. | Does the student suffer from epilepsy/ seizures? | | | | |
| 9. | Is the student suffering from G6PD deficiency? | | | | |
| 10. | Does the student have any chronic blood disease? (Thalassemia, Anemia, Hemophilia etc.) | | | | |
| 11. | Does the student suffer from Recurrent epistaxis (nasal bleeding)? | | | | |
| 12. | Does the student have any skin problems? | | | | |
| 13. | Does the student have any eye (ophthalmology) problems? (visual disturbances)? | | | | |
| 14. | Any previous surgical procedures done? | | | | |
| 15. | Any previous admissions to hospital? please mention | | | | |
| 16. | Is the student using any hearing /visual/walking/aids? | | | | |

| 17. | Did the student ever get mumps, measles, chicken pox? | | |
|-----|--|--|--|
| 18. | Does the student suffer from any psychiatric/ behavioral problems? | | |
| 19. | Does the student have any other chronic conditions? | | |

| If the student has any health problem, kindly answer the following questions: - |
|---|
| Type of problem /disease & date of onset: |
| When was the last attack: |
| Name of hospital or health center where the student is getting treatment / follow up: |
| Name of treating physician: |
| Long term medication used by the student: |
| Name of Medication: Dose & frequency: |
| Medication recommended in case of emergency: |
| Dietary Recommendations: |
| Physical activity Recommendations: |
| Recommendations for the school nurse during the school hours: |
| |
| |
| |
| |
| Parent's/Guardian's Name & Signatures |

Note:

Kindly attach the medical report including the treatment plan at school with this form & send it back to the school nurse with the student.

Thank You

نموذج الموافقة على إجراء الفحص الطبى لطلاب المدارس

SCHOOL HEALTH SCREENING CONSENT FORM

The School Student Screening aims to assess the health status of students 4 years of age and older in order to detect health problems early. The school health screening consists of: specified screening according to the school stage for the Kg1, Grade 1, Grade 5, and Grade 9. And the annual health screening for students in all grades.

The Annual screening is performed by a school nurse in the school clinic and consists of: checking the body mass index, and vision screening. School nurse will also review student's medical record and vaccination status and will give health promotion appropriate to student age.

The specific screening delivered by a healthcare provider team (physician, nurse and medical technician) which consists of medical history taking, checking the body mass index, measuring blood pressure, vision and hearing test, physical examination, blood test and supervised tooth brushing program & fluoride varnish. Physician will also review students medical record and vaccination status and health education will be given. Students in Grade1 are expected to be screened for ADHD, if necessary. And Grade 9 students will be screened for depression by a physician.

Kindly note that the physical examination carried out by the doctor in Grade 1 will not include an examination of the genitalia, in order to preserve the privacy of the student, so the parent/guardian should go to the nearest health center to conduct this examination due to its importance.

After the school screening, any student with abnormal test results will receive a referral letter to his/her parents/guardian, directing them to take the student to an appointment with a specialist doctor.

The data collected will be used by governmental health authorities in the country to establish the disease pattern in the society and assist in the planning of national health initiatives. Note that all data will be dealt with confidentially and the personal information will be kept private.

I, (------), the undersigning guardian of the student (-------), have received sufficient information about the screening and the purpose of conducting this screening for my child, and therefore I Agree, to conduct the tests that have been mentioned. I further agree to be contacted in the future if necessary, by the school nurse to follow up on my child's medical diagnosis and treatment and to send a copy of the report with my child.

| Disagree, p | lease mention | the reason: | |
|-------------|---------------|-------------|--|
|-------------|---------------|-------------|--|

Required Documents:

Coby of Emirates ID (front and back)

A recent photograph of the student.

School Name: _____Grade/Section: _____ Guardian 's Signature: _____

Contact Number:

Date: _____

يهدف الفحص الطبى لطلبة المدارس إلى تقييم الحالة الصحية للطلاب الذين يبلغون من العمر 4 سنوات فما فوق من أجل الكشف عن المشكلات الصحية مبكرًا. يتكون الفحص المدرسي من: اختبار الفحص المحدد حسب المرحلة الدراسية للروضة الأولى وللصف الأولى، والخامس، والتاسع. واختبار الفحص السنوي للطلاب في كافة الصفوف.

الفحص السنوي يقوم به ممرض المدرسة في العيادة المدرسية ويتكون من فحص مؤشر كتلة الجسم، وفحص النظر. سيقوم ممرض المدرسة أيضًا بمراجعة السجل الطبي للطالب وحالة التطعيم وسيقدم تثقيفاً صحياً مناسبًا لعمر الطالب.

الفحص المحدد حسب المرحلة الدراسية والذي يقوم به فريق من مقدمي الرعاية الصحية (طبيب ومرحم قبل من مقدمي الرعاية الصحية (طبيب ومرحمة وفقي من مقدمي والمرحمة وفقياس ضغط الدم، واختبار الرؤية والسمه، كما وسيتم إجراء الفحص السريري مع فحص الدم وبرنامج الأشراف على تقريش الاسنان ووضع الفلورايد. سيقوم الطبيب أيضنا بمراجعة السجل الطبي للطلاب وحالة التطعيم وسيتم إعطاء ثقيف صحى مناسب لعمر الطالب. من المتوقع أن يتم فحص الطلاب في الصف الأول عن فرط الحركة وتشتت الانتباه إن لأزم الأمر، كما وسيتم الفحص عن الاكتناب لطلاب الصف التاسع بواسطة الطبيب.

كما يرجى العلم بأن الفحص السريري الذي يقوم به الطبيب في الصف الأول لن يشمل فحص الجهاز التناسلي وذلك حفاظاً على خصوصية الطالب، لذا على ولي الأمر التوجه إلى أقرب مركز صحي لإجراء هذا الفحص لأهميته.

بعد الفحص المدرسي، سيتلقى أي طالب لديه نتائج فحص غير طبيعية رسالة تحويل إلى والديه / الوصى عليه، وذلك لتوجيههم لأخذ موعد الطالب مع أحد الأطباء المختصين.

إن كافة البيانات المتعلقة بنتائج الفحوصات المدرسية سيتم استخدامها من قبل الجهات الصحية الحكومية بالدولة لدراسة نمط الأمراض في المجتمع، بهدف المساعدة في التخطيط للمبادرات الصحية الوطنية، علما بأن جميع هذه البيانات سيتم التعامل معها بسرية تامة مع المحافظة على خصوصية المعلومات الشخصية.

| براء الفحوصات التي تم ذكرها. كما أوافق على أن يتم الاتصال بي في المستقبل إذا لزم الأمر | على إج |
|--|--------|
| ممرضة المدرسة لمتابعة التشخيص الطبي والعلاج لابني وإرسال نسخة من التقرير معه. | من قبل |
| | |
| | |
| اِفق، يرجى ذكر السبب: | غير مو |

المستندات المطلوبة:

صورة من بطاقة هوية الإمارات (الأمام والخلف)

صورة شخصية حديثة للطالب

| سم المدرسة | الصف |
|----------------|------|
| وقيع ولي الأمر | |
| قِم التواصلقم | |

التاريخ ______

| Grade | KG 1 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 |
|------------------------------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Medical history | V | V | | V | V | | | V | √ | V | V | | $\sqrt{}$ |
| ВМІ | $\sqrt{}$ | | | $\sqrt{}$ | $\sqrt{}$ | | $\sqrt{}$ | $\sqrt{}$ | $\sqrt{}$ | $\sqrt{}$ | | | |
| Vision | $\sqrt{}$ | | $\sqrt{}$ | |
| Hearing | | √ | | | | | | | | | | | |
| Physical Examinatio n* | V | V | | | | V | | | | V | | | |
| Depression screening* | | | | | | | | | | | | | |
| ADHD screening ** | | V | | | | | | | | | | | |
| Complete blood count | | $\sqrt{}$ | | | | | | | | √ (F) | | | |
| Smoking screening *** | | | | | | √ | √ | V | $\sqrt{}$ | V | √ | √ | √ |
| Oral health | | ∘ √ | | | | | | | | | | | |

^{*}Physical examination includes BP, screening for scoliosis and screening for depression

^{**}Screening for ADHD done for selected cases (recommendation by teacher)

^{***}Identify the smoking status of all students over age 10 years on every visit and at the time history taking and physical examination by the physician.

[•] Supervised tooth brushing program for target group 1: KG1 and KG2

V Recommended dental checkup for grade 1 student.

o Fluoride varnish program for target group 2: grade 1,2,3.

| Student name: | Date of birth: |
|---|-----------------|
| | Date of biltin. |
| | |
| Student Emirate ID: | |
| | Grade: |
| Dhysical Eveninetics | Findings |
| Physical Examination History | Findings |
| History | |
| | |
| General Appearance | |
| | |
| Vir. 10: | |
| Vital Signs: | |
| Body temperature | |
| • Pulse | |
| Blood pressure | |
| Respiratory rate | |
| respiratory rate | |
| | |
| Skin, Hair | |
| | |
| HEENT (Head, Eye, Ear, Nose, Throat) * | |
| TILLINI (Head, Lye, Lai, Nose, Hilloat) | |
| | |
| Heart | |
| | |
| | |
| Chest | |
| Clest | |
| | |
| Abdomon / Homis | |
| Abdomen/ Hernia | |
| | |
| Musculoskeletal system (scoliosis) | |
| , , , | |
| | |
| Impression/ Diagnosis | |
| | |
| Referral (Yes/No) | |
| neterral (respire) | |
| | |
| Doctor name: | |
| De stan signatura and stanson | |
| Doctor signature and stamp: | |
| | |
| | |
| | |
| | |

- Appendix 5: blood pressure chart for children
- What is the definition of HTN?
 - o High blood pressure is defined as average systolic BP and/or diastolic BP >/= 95th percentile for age, gender and height on more than 3 occasions.
 - o Pre-hypertension is defined as SBP and/or DBP between 90th and 95th percentile.
 - o For adolescents, BP readings >/= 120/80 are pre-hypertensive.

Γable 2 − BP levels for girls by age and height percentile

| Blood Pressure | Levels for | Girls by | Age and | Height Pe | ercentile* |
|----------------|------------|----------|---------|-----------|------------|
|----------------|------------|----------|---------|-----------|------------|

| Age | BP | | | | | | | | | Diastolic BP (mmHg) | | | | | | |
|--------|------------|-----|------|--------|----------|----------|------|------|-----|---------------------|---------|---------|----------|------|------|--|
| (Year) | Percentile | | F | ercent | ile of H | leight - | | | | P | ercenti | le of H | leight - | + | | |
| | 1 | 5th | 10th | 25th | 50th | 75th | 90th | 95th | 5th | 10th | 25th | 50th | 75th | 90th | 95th | |
| 1 | 50th | 83 | 84 | 85 | 86 | 88 | 89 | 90 | 38 | 39 | 39 | 40 | 41 | 41 | 42 | |
| | 90th | 97 | 97 | 98 | 100 | 101 | 102 | 103 | 52 | 53 | 53 | 54 | 55 | 55 | 56 | |
| | 95th | 100 | 101 | 102 | 104 | 105 | 106 | 107 | 56 | 57 | 57 | 58 | 59 | 59 | 60 | |
| | 99th | 108 | 108 | 109 | 111 | 112 | 113 | 114 | 64 | 64 | 65 | 65 | 66 | 67 | 67 | |
| 2 | 50th | 85 | 85 | 87 | 88 | 89 | 91 | 91 | 43 | 44 | 44 | 45 | 46 | 46 | 47 | |
| | 90th | 98 | 99 | 100 | 101 | 103 | 104 | 105 | 57 | 58 | 58 | 59 | 60 | 61 | 61 | |
| | 95th | 102 | 103 | 104 | 105 | 107 | 108 | 109 | 61 | 62 | 62 | 63 | 64 | 65 | 65 | |
| | 99th | 109 | 110 | 111 | 112 | 114 | 115 | 116 | 69 | 69 | 70 | 70 | 71 | 72 | 72 | |
| 3 | 50th | 86 | 87 | 88 | 89 | 91 | 92 | 93 | 47 | 48 | 48 | 49 | 50 | 50 | 51 | |
| | 90th | 100 | 100 | 102 | 103 | 104 | 106 | 106 | 61 | 62 | 62 | 63 | 64 | 64 | 65 | |
| | 95th | 104 | 104 | 105 | 107 | 108 | 109 | 110 | 65 | 66 | 66 | 67 | 68 | 68 | 69 | |
| | 99th | 111 | 111 | 113 | 114 | 115 | 116 | 117 | 73 | 73 | 74 | 74 | 75 | 76 | 76 | |
| 4 | 50th | 88 | 88 | 90 | 91 | 92 | 94 | 94 | 50 | 50 | 51 | 52 | 52 | 53 | 54 | |
| | 90th | 101 | 102 | 103 | 104 | 106 | 107 | 108 | 64 | 64 | 65 | 66 | 67 | 67 | 68 | |
| | 95th | 105 | 106 | 107 | 108 | 110 | 111 | 112 | 68 | 68 | 69 | 70 | 71 | 71 | 72 | |
| | 99th | 112 | 113 | 114 | 115 | 117 | 118 | 119 | 76 | 76 | 76 | 77 | 78 | 79 | 79 | |
| 5 | 50th | 89 | 90 | 91 | 93 | 94 | 95 | 96 | 52 | 53 | 53 | 54 | 55 | 55 | 56 | |
| | 90th | 103 | 103 | 106 | 106 | 107 | 109 | 109 | 66 | 67 | 67 | 68 | 69 | 69 | 70 | |
| | 95th | 107 | 107 | 108 | 110 | 111 | 112 | 113 | 70 | 71 | 71 | 72 | 73 | 73 | 74 | |
| | 99th | 114 | 114 | 116 | 117 | 118 | 120 | 120 | 78 | 78 | 79 | 79 | 80 | 81 | 81 | |
| 6 | 50th | 91 | 92 | 93 | 94 | 96 | 97 | 98 | 54 | 54 | 55 | 56 | 56 | 57 | 58 | |
| | 90th | 104 | 105 | 106 | 108 | 109 | 110 | 111 | 68 | 68 | 69 | 70 | 70 | 71 | 72 | |
| | 95th | 108 | 109 | 110 | 111 | 113 | 114 | 115 | 72 | 72 | 73 | 74 | 74 | 75 | 76 | |
| | 99th | 115 | 116 | 117 | 119 | 120 | 121 | 122 | 80 | 80 | 80 | 81 | 82 | 83 | 83 | |
| 7 | 50th | 93 | 93 | 96 | 96 | 97 | 99 | 99 | 55 | 56 | 56 | 57 | 58 | 58 | 56 | |
| | 90th | 106 | 107 | 108 | 109 | 111 | 112 | 113 | 69 | 70 | 70 | 71 | 72 | 72 | 73 | |
| | 95th | 110 | 111 | 112 | 113 | 115 | 116 | 116 | 73 | 74 | 74 | 75 | 76 | 76 | 77 | |
| | 99th | 117 | 118 | 119 | 120 | 122 | 123 | 124 | 81 | 81 | 82 | 82 | 83 | 84 | 84 | |
| 8 | 50th | 95 | 95 | 96 | 98 | 99 | 100 | 101 | 57 | 57 | 57 | 58 | 59 | 60 | 60 | |
| | 90th | 108 | 109 | 110 | 111 | 113 | 114 | 114 | 71 | 71 | 71 | 72 | 73 | 74 | 74 | |
| | 95th | 112 | 112 | 114 | 115 | 116 | 118 | 118 | 75 | 75 | 75 | 76 | 77 | 78 | 78 | |
| | 99th | 119 | 120 | 121 | 122 | 123 | 125 | 125 | 82 | 82 | 83 | 83 | 84 | 85 | 86 | |
| 9 | 50th | 96 | 97 | 98 | 100 | 101 | 102 | 103 | 58 | 58 | 58 | 59 | 60 | 61 | 61 | |
| | 90th | 110 | 110 | 112 | 113 | 114 | 116 | 116 | 72 | 72 | 72 | 73 | 74 | 75 | 75 | |
| | 95th | 114 | 114 | 115 | 117 | 118 | 119 | 120 | 76 | 76 | 76 | 77 | 78 | 79 | 79 | |
| | 99th | 121 | 121 | 123 | 124 | 125 | 127 | 127 | 83 | 83 | 84 | 84 | 85 | 86 | 87 | |
| 10 | 50th | 98 | 99 | 100 | 102 | 103 | 104 | 105 | 59 | 59 | 59 | 60 | 61 | 62 | 62 | |
| | 90th | 112 | 112 | 114 | 115 | 116 | 118 | 118 | 73 | 73 | 73 | 74 | 75 | 76 | 76 | |
| | 95th | 116 | 116 | 117 | 119 | 120 | 121 | 122 | 77 | 77 | 77 | 78 | 79 | 80 | 80 | |
| | 99th | 123 | 123 | 125 | 126 | 127 | 129 | 129 | 84 | 84 | 85 | 86 | 86 | 87 | 88 | |

Table 2 - BP levels for girls by age and height percentile

| Age | BP | | S | Systolic | BP (m | mHg) | | | | D | iastolic | BP (m | mHg) | | |
|---------|------------|-----|------|----------|----------|----------|----------|------|-----|------|----------|----------|---------|------|-----|
| (Year) | Percentile | | ← P | ercent | ile of H | leight - | → | | | ← P | ercent | ile of H | eight - | • | |
| 22 57,0 | 1 | 5th | 10th | 25th | 50th | 75th | 90th | 95th | 5th | 10th | 25th | 50th | 75th | 90th | 95t |
| 11 | 50th | 100 | 101 | 102 | 103 | 105 | 106 | 107 | 60 | 60 | 60 | 61 | 62 | 63 | 60 |
| | 90th | 114 | 114 | 116 | 117 | 118 | 119 | 120 | 74 | 74 | 74 | 75 | 76 | 77 | 7 |
| | 95th | 118 | 118 | 119 | 121 | 122 | 123 | 124 | 78 | 78 | 78 | 79 | 80 | 81 | 8 |
| | 99th | 125 | 125 | 126 | 128 | 129 | 130 | 131 | 85 | 85 | 86 | 87 | 87 | 88 | 8 |
| 12 | 50th | 102 | 103 | 104 | 105 | 107 | 108 | 109 | 61 | 61 | 61 | 62 | 63 | 64 | 6 |
| | 90th | 116 | 116 | 117 | 119 | 120 | 121 | 122 | 75 | 75 | 75 | 76 | 77 | 78 | 7 |
| | 95th | 119 | 120 | 121 | 123 | 124 | 125 | 126 | 79 | 79 | 79 | 80 | 81 | 82 | 8 |
| | 99th | 127 | 127 | 128 | 130 | 131 | 132 | 133 | 86 | 86 | 87 | 88 | 88 | 89 | 9 |
| 13 | 50th | 104 | 105 | 106 | 107 | 109 | 110 | 110 | 62 | 62 | 62 | 63 | 64 | 65 | 6 |
| | 90th | 117 | 118 | 119 | 121 | 122 | 123 | 124 | 76 | 76 | 76 | 77 | 78 | 79 | 7 |
| | 95th | 121 | 122 | 123 | 124 | 126 | 127 | 128 | 80 | 80 | 80 | 81 | 82 | 83 | 8 |
| | 99th | 128 | 129 | 130 | 132 | 133 | 134 | 135 | 87 | 87 | 88 | 89 | 89 | 90 | 9 |
| 14 | 50th | 106 | 106 | 107 | 109 | 110 | 111 | 112 | 63 | 63 | 63 | 64 | 65 | 66 | 6 |
| | 90th | 119 | 120 | 121 | 122 | 124 | 125 | 125 | 77 | 77 | 77 | 78 | 79 | 80 | 8 |
| | 95th | 123 | 123 | 125 | 126 | 127 | 129 | 129 | 81 | 81 | 81 | 82 | 83 | 84 | 8 |
| | 99th | 130 | 131 | 132 | 133 | 135 | 136 | 136 | 88 | 88 | 89 | 90 | 90 | 91 | 9 |
| 15 | 50th | 107 | 108 | 109 | 110 | 111 | 113 | 113 | 64 | 64 | 64 | 65 | 66 | 67 | 6 |
| | 90th | 120 | 121 | 122 | 123 | 125 | 126 | 127 | 78 | 78 | 78 | 79 | 80 | 81 | 8 |
| | 95th | 124 | 125 | 126 | 127 | 129 | 130 | 131 | 82 | 82 | 82 | 83 | 84 | 85 | 8 |
| | 99th | 131 | 132 | 133 | 134 | 136 | 137 | 138 | 89 | 89 | 90 | 91 | 91 | 92 | 9 |
| 16 | 50th | 108 | 108 | 110 | 111 | 112 | 114 | 114 | 64 | 64 | 65 | 66 | 66 | 67 | 6 |
| | 90th | 121 | 122 | 123 | 124 | 126 | 127 | 128 | 78 | 78 | 79 | 80 | 81 | 81 | 8 |
| | 95th | 125 | 126 | 127 | 128 | 130 | 131 | 132 | 82 | 82 | 83 | 84 | 85 | 85 | 8 |
| | 99th | 132 | 133 | 134 | 135 | 137 | 138 | 139 | 90 | 90 | 90 | 91 | 92 | 93 | 9 |
| 17 | 50th | 108 | 109 | 110 | 111 | 113 | 114 | 115 | 64 | 65 | 65 | 66 | 67 | 67 | 6 |
| | 90th | 122 | 122 | 123 | 125 | 126 | 127 | 128 | 78 | 79 | 79 | 80 | 81 | 81 | 8 |
| | 95th | 125 | 126 | 127 | 129 | 130 | 131 | 132 | 82 | 83 | 83 | 84 | 85 | 85 | 8 |
| | 99th | 133 | 133 | 134 | 136 | 137 | 138 | 139 | 90 | 90 | 91 | 91 | 92 | 93 | 90 |

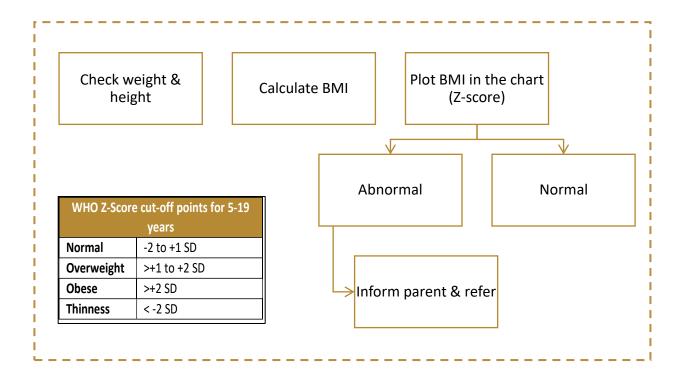
Table 1 – BP levels for boys by age and height percentile

Blood Pressure Levels for Boys by Age and Height Percentile*

| Age | BP | | 5 | ystolic | Bb (m | mHg) | | | Diastolic BP (mmHg) | | | | | | |
|--------|------------|-----|------|---------|----------|----------|------|------|---------------------|------|---------|---------|---------|------|----|
| (Year) | Percentile | | P | ercent | ile of H | leight - | œ. | | | ← P | ercenti | le of H | eight - | • | |
| | 1 | 5th | 10th | 25th | 50th | 75th | 90th | 95th | 5th | 10th | 25th | 50th | 75th | 90th | 95 |
| 1 | 50th | 80 | 81 | 83 | 85 | 87 | 88 | 89 | 34 | 35 | 36 | 37 | 38 | 39 | 3 |
| | 90th | 94 | 95 | 97 | 99 | 100 | 102 | 103 | 49 | 50 | 51 | 52 | 53 | 53 | 5 |
| | 95th | 98 | 99 | 101 | 103 | 104 | 106 | 106 | 54 | 54 | 55 | 56 | 57 | 58 | 5 |
| | 99th | 105 | 106 | 108 | 110 | 112 | 113 | 114 | 61 | 62 | 63 | 64 | 65 | 66 | 6 |
| 2 | 50th | 84 | 85 | 87 | 88 | 90 | 92 | 92 | 39 | 40 | 41 | 42 | 43 | 44 | 4 |
| | 90th | 97 | 99 | 100 | 102 | 104 | 105 | 106 | 54 | 55 | 56 | 57 | 58 | 58 | 5 |
| | 95th | 101 | 102 | 104 | 106 | 108 | 109 | 110 | 59 | 59 | 60 | 61 | 62 | 63 | 6 |
| | 99th | 109 | 110 | 111 | 113 | 115 | 117 | 117 | 66 | 67 | 68 | 69 | 70 | 71 | 7 |
| 3 | 50th | 86 | 87 | 89 | 91 | 93 | 94 | 95 | 44 | 44 | 45 | 46 | 47 | 48 | 4 |
| | 90th | 100 | 101 | 103 | 105 | 107 | 108 | 109 | 59 | 59 | 60 | 61 | 62 | 63 | 6 |
| | 95th | 104 | 105 | 107 | 109 | 110 | 112 | 113 | 63 | 63 | 64 | 65 | 66 | 67 | 6 |
| | 99th | 111 | 112 | 114 | 116 | 118 | 119 | 120 | 71 | 71 | 72 | 73 | 74 | 75 | 7 |
| 4 | 50th | 88 | 89 | 91 | 93 | 95 | 96 | 97 | 47 | 48 | 49 | 50 | 51 | 51 | 5 |
| | 90th | 102 | 103 | 105 | 107 | 109 | 110 | 111 | 62 | 63 | 64 | 65 | 66 | 66 | 6 |
| | 95th | 106 | 107 | 109 | 111 | 112 | 114 | 115 | 66 | 67 | 68 | 69 | 70 | 71 | 7 |
| | 99th | 113 | 114 | 116 | 118 | 120 | 121 | 122 | 74 | 75 | 76 | 77 | 78 | 78 | 7 |
| 5 | 50th | 90 | 91 | 93 | 95 | 96 | 98 | 98 | 50 | 51 | 52 | 53 | 54 | 55 | 5 |
| | 90th | 104 | 105 | 106 | 108 | 110 | 111 | 112 | 65 | 66 | 67 | 68 | 69 | 69 | 7 |
| | 95th | 108 | 109 | 110 | 112 | 114 | 115 | 116 | 69 | 70 | 71 | 72 | 73 | 74 | 7 |
| | 99th | 115 | 116 | 118 | 120 | 121 | 123 | 123 | 77 | 7B | 79 | 80 | 81 | 81 | 8 |
| 6 | 50th | 91 | 92 | 94 | 96 | 98 | 99 | 100 | 53 | 53 | 54 | 55 | 56 | 57 | 5 |
| | 90th | 105 | 106 | 108 | 110 | 111 | 113 | 113 | 68 | 68 | 69 | 70 | 71 | 72 | 7 |
| | 95th | 109 | 110 | 112 | 114 | 115 | 117 | 117 | 72 | 72 | 73 | 74 | 75 | 76 | 7 |
| | 99th | 116 | 117 | 119 | 121 | 123 | 124 | 125 | 80 | 80 | 81 | 82 | 83 | 84 | 8 |
| 7 | 50th | 92 | 94 | 95 | 97 | 99 | 100 | 101 | 55 | 55 | 56 | 57 | 58 | 59 | 5 |
| | 90th | 106 | 107 | 109 | 111 | 113 | 114 | 115 | 70 | 70 | 71 | 72 | 73 | 74 | 7 |
| | 95th | 110 | 111 | 113 | 115 | 117 | 118 | 119 | 74 | 74 | 75 | 76 | 77 | 78 | 7 |
| | 99th | 117 | 118 | 120 | 122 | 124 | 125 | 126 | 82 | 82 | 83 | 84 | 85 | 86 | 8 |
| 8 | 50th | 94 | 95 | 97 | 99 | 100 | 102 | 102 | 56 | 57 | 58 | 59 | 60 | 60 | 6 |
| | 90th | 107 | 109 | 110 | 112 | 114 | 115 | 116 | 71 | 72 | 72 | 73 | 74 | 75 | 7 |
| | 95th | 111 | 112 | 114 | 116 | 118 | 119 | 120 | 75 | 76 | 77 | 78 | 79 | 79 | 8 |
| | 99th | 119 | 120 | 122 | 123 | 125 | 127 | 127 | 83 | 84 | 85 | 86 | 87 | 87 | 8 |
| 9 | 50th | 95 | 96 | 98 | 100 | 102 | 103 | 104 | 57 | 58 | 59 | 60 | 61 | 61 | 6 |
| | 90th | 109 | 110 | 112 | 114 | 115 | 117 | 118 | 72 | 73 | 74 | 75 | 76 | 76 | 7 |
| | 95th | 113 | 114 | 116 | 118 | 119 | 121 | 121 | 76 | 77 | 78 | 79 | 80 | 81 | 8 |
| | 99th | 120 | 121 | 123 | 125 | 127 | 128 | 129 | 84 | 85 | 86 | 87 | 88 | 88 | 8 |
| 10 | 50th | 97 | 98 | 100 | 102 | 103 | 105 | 106 | 58 | 59 | 60 | 61 | 61 | 62 | 6 |
| | 90th | 111 | 112 | 114 | 115 | 117 | 119 | 119 | 73 | 73 | 74 | 75 | 76 | 77 | 7 |
| | 95th | 115 | 116 | 117 | 119 | 121 | 122 | 123 | 77 | 78 | 79 | 80 | 81 | 81 | 8 |
| | 99th | 122 | 123 | 125 | 127 | 128 | 130 | 130 | 85 | 86 | 86 | 88 | 88 | 89 | 90 |

Table 1 - BP levels for boys by age and height percentile

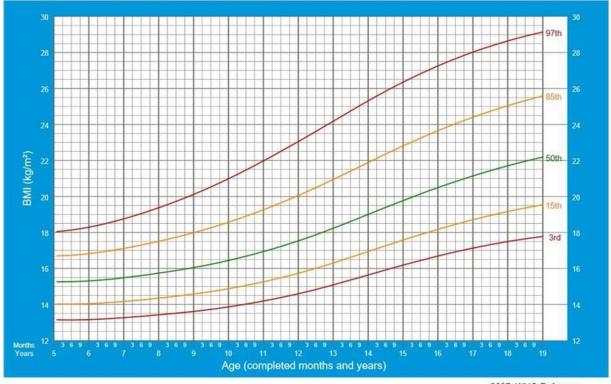
| Age | BP | | 5 | Systolic | BP (m | mHg) | | | | D | iastolio | BP (m | mHg) | | |
|--------|------------|-----|------|----------|----------|----------|------|------|-----|------------|----------|----------|---------|------|------|
| (Year) | Percentile | | ← F | ercent | ile of H | leight - | • | | | ← P | ercent | ile of H | eight - | • | |
| | Ţ | 5th | 10th | 25th | 50th | 75th | 90th | 95th | 5th | 10th | 25th | 50th | 75th | 90th | 95tl |
| 11 | 50th | 99 | 100 | 102 | 104 | 105 | 107 | 107 | 59 | 59 | 60 | 61 | 62 | 63 | 63 |
| | 90th | 113 | 114 | 115 | 117 | 119 | 120 | 121 | 74 | 74 | 75 | 76 | 77 | 78 | 78 |
| | 95th | 117 | 118 | 119 | 121 | 123 | 124 | 125 | 78 | 78 | 79 | 80 | 81 | 82 | 82 |
| | 99th | 124 | 125 | 127 | 129 | 130 | 132 | 132 | 86 | 86 | 87 | 88 | 89 | 90 | 90 |
| 12 | 50th | 101 | 102 | 104 | 106 | 108 | 109 | 110 | 59 | 60 | 61 | 62 | 63 | 63 | 64 |
| | 90th | 115 | 116 | 118 | 120 | 121 | 123 | 123 | 74 | 75 | 75 | 76 | 77 | 78 | 79 |
| | 95th | 119 | 120 | 122 | 123 | 125 | 127 | 127 | 78 | 79 | 80 | 81 | 82 | 82 | 83 |
| | 99th | 126 | 127 | 129 | 131 | 133 | 134 | 135 | 86 | 87 | 88 | 89 | 90 | 90 | 91 |
| 13 | 50th | 104 | 105 | 106 | 108 | 110 | 111 | 112 | 60 | 60 | 61 | 62 | 63 | 64 | 64 |
| | 90th | 117 | 118 | 120 | 122 | 124 | 125 | 126 | 75 | 75 | 76 | 77 | 78 | 79 | 78 |
| | 95th | 121 | 122 | 124 | 126 | 128 | 129 | 130 | 79 | 79 | 80 | 81 | 82 | 83 | 83 |
| | 99th | 128 | 130 | 131 | 133 | 135 | 136 | 137 | 87 | 87 | 88 | 89 | 90 | 91 | 9 |
| 14 | 50th | 106 | 107 | 109 | 111 | 113 | 114 | 115 | 60 | 61 | 62 | 63 | 64 | 65 | 65 |
| | 90th | 120 | 121 | 123 | 125 | 126 | 128 | 128 | 75 | 76 | 77 | 78 | 79 | 79 | 80 |
| | 95th | 124 | 125 | 127 | 128 | 130 | 132 | 132 | 80 | 80 | 81 | 82 | 83 | 84 | 8 |
| | 99th | 131 | 132 | 134 | 136 | 138 | 139 | 140 | 87 | 88 | 89 | 90 | 91 | 92 | 9 |
| 15 | 50th | 109 | 110 | 112 | 113 | 115 | 117 | 117 | 61 | 62 | 63 | 64 | 65 | 66 | 66 |
| | 90th | 122 | 124 | 125 | 127 | 129 | 130 | 131 | 76 | 77 | 78 | 79 | 80 | 80 | 8 |
| | 95th | 126 | 127 | 129 | 131 | 133 | 134 | 135 | 81 | 81 | 82 | 83 | 84 | 85 | 88 |
| | 99th | 134 | 135 | 136 | 138 | 140 | 142 | 142 | 88 | 89 | 90 | 91 | 92 | 93 | 90 |
| 16 | 50th | 111 | 112 | 114 | 116 | 118 | 119 | 120 | 63 | 63 | 64 | 65 | 66 | 67 | 67 |
| | 90th | 125 | 126 | 128 | 130 | 131 | 133 | 134 | 78 | 78 | 79 | 80 | 81 | 82 | 82 |
| | 95th | 129 | 130 | 132 | 134 | 135 | 137 | 137 | 82 | 83 | 83 | 84 | 85 | 86 | 8 |
| | 99th | 136 | 137 | 139 | 141 | 143 | 144 | 145 | 90 | 90 | 91 | 92 | 93 | 94 | 9 |
| 17 | 50th | 114 | 115 | 116 | 118 | 120 | 121 | 122 | 65 | 66 | 66 | 67 | 68 | 69 | 7 |
| | 90th | 127 | 128 | 130 | 132 | 134 | 135 | 136 | 80 | 80 | 81 | 82 | 83 | 84 | 8 |
| | 95th | 131 | 132 | 134 | 136 | 138 | 139 | 140 | 84 | 85 | 86 | 87 | 87 | 88 | 88 |
| | 99th | 139 | 140 | 141 | 143 | 145 | 146 | 147 | 92 | 93 | 93 | 94 | 95 | 96 | 97 |



BMI-for-age BOYS

5 to 19 years (percentiles)



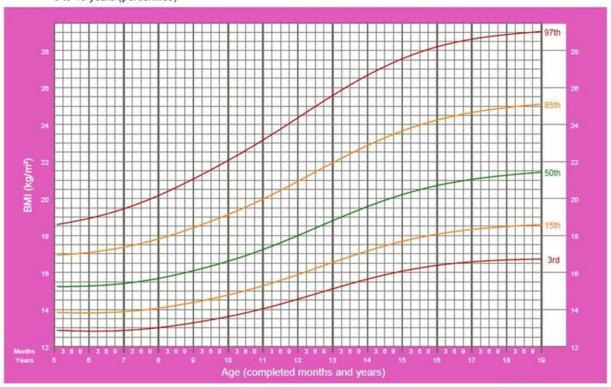


2007 WHO Reference

BMI-for-age GIRLS

5 to 19 years (percentiles)





2007 WHO Reference

| | Questions | Not at all | Just a little | Quite a bit | Very much |
|----------------------|--|------------|---------------|-------------|-----------|
| | Often fails to give close attention to details or makes careless mistakes in schoolwork or tasks | | | | |
| | Often has difficulty sustaining attention in tasks or play activities | | | | |
| | 3. Often does not seem to listen when spoken to directly | | | | |
| Inattention symptoms | 4. Often does not follow through on instructions and fails to finish schoolwork, chores, or duties | | | | |
| tion s) | Often has difficulty organizing tasks and activities | | | | |
| Inatten | Often avoids, dislikes, or reluctantly engages in tasks requiring sustained mental effort | | | | |
| | 7. Often loses things necessary for activities (e.g., toys, school assignments, pencils or books | | | | |
| | 8. Often is distracted by extraneous stimuli | | | | |
| | 9. Often is forgetful in daily activities | | | | |
| | 10. Often fidgets with hands or feet or squirms in seat | | | | |
| | 11. Often leaves seat in classroom or in other situations in which remaining seated is expected | | | | |
| toms | 12. Often runs about or climbs excessively in situations in which it is inappropriate | | | | |
| symp | 13. Often has difficulty playing or engaging in leisure activities quietly | | | | |
| Hyperactive symptoms | 14. Often is "on the go" or often acts as if "driven by a motor" | | | | |
| Нуре | 15. Often talks excessively | | | | |
| | 16. Often blurts out answers before questions have been completed | | | | |
| | 17. Often has difficulty awaiting turn | | | | |
| | 18. Often interrupts or intrudes on others (e.g., butts into conversations/ games | | | | |

The SNAP-IV 18-item scale is an abbreviated version of the Swanson, Nolan, and Pelham (SNAP) Questionnaire (Swanson, 1992; Swanson et al., 1983). Items from the DSM-IV criteria for attention-deficit/hyperactivity disorder (ADHD) are included for the two subsets of symptoms: Inattention (items 1–9) and Hyperactivity/Impulsivity (items 10– 18).

Symptom severity is rated on a 4-point scale. Responses are scored as follows:

- Not at all = 0
- Just a little = 1
- Quite a bit = 2
- Very much = 3

The scores in each of the two subsets (inattention, and hyperactivity/impulsivity) are totaled. A suggested scoring guideline is below:

Questions 1 – 9: Inattention Subset

- < 13/27 = Symptoms not clinically significant
- 13 17 = Mild symptoms
- 18 22 = Moderate symptoms
- 23 27 = Severe symptoms

Questions 10 – 18: Hyperactivity/Impulsivity Subset

- <13/27 = Symptoms not clinically significant
- 13 17 = Mild symptoms
- 18 22 = Moderate symptoms
- 23 27 =Severe symptoms

If desired, the average rating for each subset can be calculated by totaling the scores for the items in the subset and dividing by the number of items. The average can be compared with cut-off scores suggestive of ADHD reported in the literature.

| PATIENT | HEALTH (| DUESTION | NAIRE-9 (PHQ- | -9) |
|---|------------|--------------|-------------------------|------------------|
| Over the last 2 weeks, how often have you been bothered by the following problems | Not at all | Several days | More than half the days | Nearly every day |
| 1.Little interest or pleasure in doing thing | 0 | 1 | 2 | 3 |
| 2.Feeling down, depressed or hopeless | 0 | 1 | 2 | 3 |
| 3.Trouble falling or staying asleep, or sleeping too much? | 0 | 1 | 2 | 3 |
| 4.Feeling tired or having little energy? | 0 | 1 | 2 | 3 |
| 5.Poor appetite or overeating? | 0 | 1 | 2 | 3 |
| 6.Feeling bad about yourself — or that you are a failure or have let yourself or your family down? | 0 | 1 | 2 | 3 |
| 7.Trouble concentrating on things, such as reading the newspaper or watching television? | 0 | 1 | 2 | 3 |
| 8.Moving or speaking so slowly that other people could have noticed? Or so fidgety or restless that you have been moving a lot more than usual? | 0 | 1 | 2 | 3 |
| 9.Thoughts that you would be better off dead, or thoughts of hurting yourself in some way? | 0 | 1 | 2 | 3 |

Interpretation:

A PHQ-9 score ranges from 0-27.

Scoring 0-4 points = negative screening, 5-9 points = mild depression, 10-14 points = moderate depression, 15-19 points= moderately severe depression, and 20 or more points= Very severe depression.

| لأولى | الدروس الخاصة بالدليل التثقيفي المدرسي المرحلة الأولى | | | | | | | | | | | |
|--------------------------------------|--|---------------|--------------------------------|---|--|--|--|--|--|--|--|--|
| المواضيع الاخرى | التدخين | النشاط البدني | التغذية | مواضيع الدروس المرحلة الدراسية | | | | | | | | |
| شرب الماء | | لنلعب معاً | 5 يومياً | مرحلة الروضة | | | | | | | | |
| تعرف على السكري من النوع الاول | كيف أقول لا للتدخين 1 | لنلعب معاً 2 | مشروباتي حلوة وصحية | | | | | | | | | |
| نظافة الاسنان | | | 5 يومياً 2 | المرحلة الأولى | | | | | | | | |
| غسل اليدين | | | 5 يوميا 2 | (الصف الأول وحتى الصف | | | | | | | | |
| الجهاز التنفسي | | | غذائه الصدء | الخامس) | | | | | | | | |
| الاسعافات الأولية | | | غذائي الصحي الوجبات السريعة | | | | | | | | | |

| الدروس الخاصة بالدليل التثقيفي المدرسي المرحلة الثانية | | | | | |
|---|--------------------------|---------------------------|--------------------------------|--|--|
| المواضيع الاخرى | التدخين | النشاط البدني | التغذية | مواضيع الدروس المرحلة الدراسية | |
| البلوغ عند الذكور | كيف أقول لا للتدخين 2 | الرياضة عادة و سعادة 2 | الإضطرابات الغذائية 1 | المرحلة الثانية (الصف السادس وحتى الصف التاسع) | |
| البلوغ عند الاناث | | | تعرف على البطاقة الغذائية 1 | | |
| تعرف على مرض السكري | | | تسوق بذكاء 1 | | |
| | | | سريع وصحي | | |
| | | | كيف أختار المنتجات الصحية؟ | | |
| | | | طبقي الصحي | | |
| | | | مشروباتي صحية أم سكرية؟ 1 | | |

الدروس الخاصة بالدليل التثقيفي المدرسي المرحلة الثالثة

| المواضيع الاخرى | التدخين | النشاط البدني | التغذية | مواضيع الدروس المرحلة الدراسية |
|------------------------|------------------|---------------------------|--------------------------------|---|
| الرضاعة الطبيعية | التدخين و أضراره | الرياضة عادة و سعادة 2 | تسوق بذكاء 2 | |
| تعرف على مرض السكري | | | تعرف على البطاقة الغذائية 2 | |
| صحة أسرتي | | | هل وزني مثالي؟ | |
| | | | البروتينات وبناء العضلات | المرحلة الثالثة (الصف العاشر وحتى الثاني عشر) |
| | | | صحتي في غذائي | |
| | | | الإضطرابات الغذائية 2 | |
| | | | مشروباتي، صحية أم سكرية؟ | |

| الدروس المشتركة بين المرحلة الثانية والثالثة | | | | |
|--|--|--|--|--|
| ما هو التنمر؟ | | | | |
| شرب الماء | | | | |
| الاسعافات الأولية 2 | | | | |
| عزز مناعتك بالتطعيمات | | | | |
| المواد المخدرة | | | | |

11. References

- School students screening and preventive services guideline (2015) – Ministry of health and prevention.
- Kurt Kroenke, Robert L Spitzer, and Janet B W Williams (2001): Validity of a Brief Depression Severity Measure: Journal of General Internal Medicine. 2001 Sep; 16(9): 606–613.
- Spitzer RL, Kroenke K, Williams JBW (1999). Patient Health Questionnaire Study Group. Validity and utility of a self-report version of PRIME-MD: the PHQ Primary Care Study. JAMA. 1999;282:1737–44
- Spitzer RL, Williams JBW, Kroenke K, et al (2000). Validity and utility of the Patient Health Questionnaire in assessment of 3000 obstetric-gynecologic patients: the PRIME-MD Patient Health Questionnaire Obstetrics-Gynecology Study. Am J Obstet Gynecol. 2000;183:759–69
- Kurt Kroenke, Robert L Spitzer, and Janet B W Williams (2001): Validity of a Brief Depression Severity Measure: Journal of General Internal Medicine. 2001 Sep; 16(9): 606–613.
- Spitzer RL, Kroenke K, Williams JBW (1999). Patient Health Questionnaire Study Group. Validity and utility of a self-report version of PRIME-MD: the PHQ Primary Care Study. JAMA. 1999;282:1737–44
- Spitzer RL, Williams JBW, Kroenke K, et al (2000). Validity and utility of the Patient Health Questionnaire in assessment of 3000 obstetric-gynecologic patients: the PRIME-MD Patient Health Questionnaire Obstetrics-Gynecology Study. Am J Obstet Gynecol. 2000;183:759–69
- Rehabilitation, S. F. D. A. (2021). Hearing screening: considerations for implementation. www.who.int. https://www.who.int/publications/i/item/9789240032767
- Schools. (n.d.). Health Promotion Board. https://hpb.gov.sg/schools