## **Illness Guidelines**



Students must stay home or will be sent home if:

- 1. The student does not feel well enough to take part in normal school activities (i.e. overly tired, fussy, will not stop crying, etc.).
- 2. The student needs more care than teachers and staff can give and still care for the other students.
- 3. The illness is on this list.

<sup>\*</sup>Remember the best way to prevent the spread of illness is through good hand washing.

SYMPTOMS	MUST STUDENT STAY HOME?	
COLD or MILD RESPIRATORY SYMPTOMS  Stuffy nose with drainage, sneezing, mild cough	No - unless symptoms are severe (i.e. fever, student is not acting normally and/or has trouble breathing, or is unable to take part in normal school activities).	
COUGHING  Note: Students with asthma may be in school - parents to provide an Asthma Health Care Plan and appropriate medication	Yes - if severe, uncontrolled coughing or wheezing, rapid or difficulty breathing and medical attention is necessary.	
DIARRHEA  Frequent, loose, or watery stools compared to student's norm that are not caused by food or medicine	Yes - if student looks or acts sick, is not acting normally, or has diarrhea along with other symptoms (i.e. abdominal pain, vomiting, fever, etc.). Student must stay home until diarrhea/symptoms resolve without the use of medicine or health care provider verifies student is not contagious.	
FEVER	Yes - for temperature of 100.5 F or higher with other symptoms of illness (i.e. rash, sore throat, vomiting, diarrhea, difficulty breathing, etc.) or has behavioral changes or is unable to take part in normal school activities. Student must stay home until fever/symptoms resolve without the use of medicine.	
"FLU-LIKE" SYMPTOMS Temperature of 100.5 or higher with cough, sore throat, tiredness, body aches, vomiting or diarrhea	Yes - student must stay home for at least 24 hours. without the use of medicine that stops fever and other "flu-like" symptoms.	
RASH  Note: Body rash that has been evaluated by a doctor, is not contagious, has no fever and no behavioral changes does not typically need to stay home from school.	Yes - if rash with fever, rash spreads quickly, rash has open weeping wound/lesions, and/or rash is not healing. Student must be evaluated by a health care provider to verify student is not contagious.	
VOMITING Note: If a child has had a recent head injury, vomiting can be a sign of concussion - child should be evaluated by a health care provider.	Yes - if vomited two times in the past 24 hours or has other symptoms in addition to vomiting (i.e. fever, diarrhea, abdominal pain, etc.). Student must stay home until resolved without the use of medicine or health care provider verifies student is not contagious.	

ILLNESS	MUST CHILD STAY HOME?	
CHICKEN POX	Yes - until blisters have dried and crusted (usually 6 days)	
CONJUNCTIVITIS (Pink Eye)	<b>No</b> - unless behavioral changes and unable to take part in normal school activities	
CROUP (see Coughing)	Student should be evaluated by a doctor - may not need to stay home unless not well enough to take part in normal school activities	
FIFTH'S DISEASE (Slap Cheek)	<b>No</b> - the student is no longer contagious once rash appears	
HAND FOOT AND MOUTH DISEASE (Coxsackie Virus)	<b>No</b> - unless the student has mouth sores, is drooling and isn't able to take part is normal school activities	
HEAD LICE or SCABIES	Yes - from end of the school day until after first treatment	
HEPATITIS A	<b>Yes</b> - until 1 week after the start of the illness and when able to take part in normal school activities	
HERPES	<b>No</b> - unless the student has open sores that cannot be covered or is drooling	
IMPETIGO (Staph Skin Infection)	Yes - for 24 hours after starting antibiotics	
RINGWORM	<b>Yes</b> - from end of the school day until after starting treatment. Keep area covered for the first 2 days	
ROSEOLA	<b>Yes</b> - if the student has fever and rash - Student should be evaluated by a doctor for possible treatment	
RSV (Respiratory Syncytial Virus)	No - unless student has acute respiratory symptoms or	
Note: RSV spreads quickly through classrooms.	is unable to take part in normal school activities. Student should be evaluated by a health care provider	
STREP THROAT	<b>Yes</b> - for 24 hours after starting antibiotics and until the student is able to take part in normal school activities	
VACCINE PREVENTABLE DISEASES (Measles,	Yes - until a doctor says the student is no longer	
Mumps, Rubella (German Measles), Pertussis (Whooping Cough)	contagious. Note for Pertussis: 5 days after starting antibiotics	
YEAST (Thrush)	No - follow good hand washing and hygiene practices	

	3 – 6 yrs.	6 – 12 yrs.	12+ yrs.
Heart Rate	65-110	60-95	55-85
Blood	95-110 systolic	100-120 systolic	110-135 systolic
Pressure	60-75 diastolic	60-75 diastolic	65-85 diastolic
Respirations	20-25	14-22	12-18
Pulse	= or > 92%	= or > 92%	= or > 92%
Oximetry			

## References

- American Academy of Pediatrics, American Public Health Association, National Resource Center for Health and Safety in Child Care and Early Education. 2011. Caring for our children: National health and safety performance standards; Guidelines for early care and education programs. 3rd edition. Elk Grove Village, IL.
- American Academy of Pediatrics, Managing Infectious Diseases in Child Care and Schools, 3rd Edition, Elk Grove Village, IL 2013.
- Colorado Department of Public Health and Environment, Communicable Disease Epidemiology Program, *Infectious Disease in Child Care Settings: Guidelines for Schools and Child Care Providers*, Denver, CO, October 2013.
- Children's Hospital Colorado, Illness Policy How sick is too sick? When to keep your child at home from school or Child Care, November 203.
- General vital sign guidelines for students to be in school setting, American Heart Association Guidelines-Pediatric Vital Signs, last editorial review 3/10/08.