



ILLNESS POLICY

It is recommended that a child be kept home or should be sent home if he/she displays any of the following symptoms:

- Temperature** – Any child with an elevated temperature of 101° or higher is excluded until there is no presence of fever for 24 hours.
- Vomiting** - Child is excluded until there is no presence of fever and no vomiting for 24 hours.
- Diarrhea** - Child is excluded until symptoms have disappeared.
- Conjunctivitis (Pinkeye)** - Child is excluded until he/she is on medication for 24 hours with no discharge.
- Hand, Foot & Mouth Disease** – Child is excluded until all blisters have opened and dried, with no open sores in mouth and no presence of fever.
- Fifth Disease** - Child is excluded until no fever is present and he/she can comfortably participate in the program.
- Impetigo** - Child is excluded until blisters are gone, rash is dry and he/she has been on medication at least 24 hours.
- Chickenpox** - Child is excluded until blisters have formed scabs, no presence of fever, and he/she can comfortably participate in the program.
- RSV (Respiratory Syncytial Virus)** - Child is excluded until he/she can comfortably participate in all activities and does not require a level of care that would jeopardize the health and safety of others in the classroom.
- Strep Throat / Scarlet Fever** - Child is excluded until he/she has been on medication and had no fever for 24 hours.
- Head Lice** - Child is excluded until he/she has been treated with lice-specific medicated shampoo, rinse, or lotion and is free of nits. He/She must be checked daily for 10 days for evidence of new infection.
- Ringworm** - Child is excluded until treatment from pediatrician has begun and infected area begins to shrink.
- Thrush** – Child is excluded until he/she has been on an antibiotic for at least 24 hours.

Please keep in mind that this is only a guideline. If we feel that your child cannot fully participate in the program, you will be notified to pick him/her up.

For any unexplained rashes, complaints or ailments, parents will be notified. Parents are asked to report when they know that a child has been exposed to a contagious disease for the protection of others, especially pregnant mothers. Please see management for detailed descriptions of the above-named ailments.

Parent / Guardian Name (please print): _____

Parent / Guardian Signature: _____ Date: ___ / ___ / _____