



Should I Keep My Child Home From School?

Our goal in giving you these guidelines is to reduce the spread of communicable disease at school and to promote a healthy environment for students attending school. They were created to help you in your decision making process as to whether to send your child to school or to keep your child at home.

Following is a list of common ailments a child may have. If your child is ill, you may want to discuss these problems with your child's pediatrician to determine if an office visit is needed.

Fever If your child has a temperature at 100 degrees or over without medication, they should remain at home. When accompanied by sore throat, nausea, or rash a contagious illness is suspected. He/she must remain at home until fever free for twenty-four hours without medication.

Vomiting & Diarrhea A single episode of vomiting or diarrhea without accompanied fever may not be enough reason to miss school. However, children with watery diarrhea (loose runny stool or cannot get to the bathroom in time) must remain at home until diarrhea free for 24 hours without medication. Children that are vomiting must remain at home for 24 hours once vomiting has subsided. If diarrhea or vomiting is frequent or accompanied by fever, keep the child home and consult your doctor.

Runny Nose & Coughing A minor cold or allergy symptoms (stuffy nose with clear drainage, sneezing, and mild cough) should not be a reason to miss school. If your child's cough is persistent or productive and accompanied by thick or constant nasal drainage, he/she should be kept home.

Sore Throat With Fever Sudden onset of a sore throat accompanied by a fever may indicate a doctor visit. If the doctor diagnoses strep throat, the student must remain home for 24 hours after antibiotic treatment has begun.

Pink Eye (Conjunctivitis) If your child's eyes are mildly red and watery and no other symptoms are present, this may indicate irritation or allergy. However, if your child's eyes are markedly red (including under the eyelids) and accompanied by thick, yellow or green drainage, he/she may have pink eye or conjunctivitis. This condition can be caused by a virus, bacteria, or allergies - only a doctor can determine the cause. Bacterial conjunctivitis is contagious if a child rubs his/her eyes, then touches another student or an object that another student uses, and that student then rubs his/her eyes. For this reason, your child should remain home until treatment has begun or the symptoms are gone.

Rashes Rashes can be caused by many things, a few of which may be contagious. A sudden appearance of a rash over any part of the body with an unknown cause and accompanied by fever or other symptoms should be evaluated by the doctor. However, a rash caused by poison ivy/poison oak is not contagious and is not a reason to miss school. You may always take the student to the school nurse to see if he/she may remain in school or needs to be seen by the doctor.

Ringworm Any circular scaly patch seen along the hairline or in the scalp must be evaluated by a physician as it may be ringworm of the scalp, which is highly contagious. Oral medications are usually the treatment of choice, but your doctor may also recommend a special shampoo or ointment. Your child may return to school after treatment has begun.

Ringworm on the body is very difficult to spread to others, and these children may be present in school as long as the area is covered by a bandage or clothing. You can check with your pharmacist for over the counter treatments for ringworm on the body.

Open Sores If your child has a blister or open sore on the skin that becomes covered with a yellowish crust, it may be contagious. These open sores are often seen around the nose or mouth but could be seen anywhere on the body and need to be evaluated by a doctor. Your doctor will determine when your child can return to school. Any other open areas must be covered.

Lice If your child persistently scratches his head or complains of an itchy scalp, check for pin-point sized grayish white eggs (nits) within $\frac{1}{4}$ inch of the scalp that will not flick off the hair shaft. The louse bug is very small and wingless and the eggs are more easily detected. They are often found behind the ears, along the nape of the neck or on the crown of the head. If you notice these eggs or a live louse, your child must be treated with special shampoo available at drug stores and grocery stores before returning to school. Treatment must be repeated in 7-10 days. Please follow the instructions on the container carefully. Please notify the school nurse if your child is treated for head lice so that she can do appropriate case-finding.

Again, these guidelines are designed to assist in your decision-making process as to whether or not to send your child to school. Your doctor will assist you to determine if your child needs to be seen at an office visit.

Information gathered from:

Communicable Disease Chart for Schools and Child-Care Centers, Texas DSHS

Control of Communicable Diseases in Man—Abram Benenson, editor, American Public Health Association

"Is your child too sick for school?" --Children's Healthcare of Atlanta

Instructions for Pediatric Patients --Your Child's Health, 1991, Barton Scmitt, M.D.

Should you keep your child home from school? --Putnam City Schools

