

Eden Valley-Watkins Schools

IS MY CHILD TOO SICK TO GO TO SCHOOL?

A Comprehensive Guide for Parents

These guidelines are intended to help you decide whether your child is healthy enough to go to school. Keeping ill students at home, encouraging frequent hand washing, and covering coughs protects everyone, including those with fragile immune systems. **If you have questions** – about whether or not your child is healthy enough to come to school, please contact the school nurse at (320) 453-2900, ext. 2135.

Always contact your student's school every day they are absent. Your phone or email message should include: child's name, teacher name or grade, reason for absence, and please include their symptoms (fever, cough, sore throat, ...).

Your child <i>must stay home</i> if they have: <ul style="list-style-type: none"> • Fever of 100 degrees or higher • Vomited • Diarrhea • Rash that is not yet diagnosed 	Your child <i>may return</i> to school: <ul style="list-style-type: none"> • 24 hours after last episode of vomiting or diarrhea • 24 hours fever free, without fever reducing medicine • Feels well enough to participate in school
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ILLNESS	SYMPTOMS	SHOULD MY CHILD <u>STAY HOME</u> ?	HOW IS IT SPREAD?
Bed Bugs	Bites on the skin, especially after sleeping. Blood stains on sheets. Live, crawling bugs particularly in folds or crevices of mattresses or bed frames.	NO. Children and students living in households containing bed bugs do not need to be excluded.	Bed bugs are not transmitted from person to person but spread between residences when they hide and are transported in luggage, furniture, or other items.
Chickenpox <i>Notify the School Nurse, this is a MDH reportable disease.</i>	Rash that begins as red bumps, fever	YES. Until all blisters have dried into scabs; usually by day 6 after the rash began.	By touching the blister fluid or secretions from a person with chickenpox. By coughing or sneezing.
Croup	Runny nose, sore throat, mild cough, and fever. Several days later there may be a dry cough and hoarseness. Rapid breathing or making a noise when taking a breath. The cough may be worse at night.	YES. Until fever is gone (without the use of a fever reducing medicine) and your child is healthy enough for routine activities.	By coughing or sneezing. By touching contaminated hands, objects, or surfaces.

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<u>Diarrhea</u> Or caused by: Campylobacteria Cryptosporidiosis E.Coli Enteroviral Giardiasis Norovirus Rotavirus Salmonellosis Shigellosis	May contain blood and/or mucus; may be accompanied by vomiting, fever, or a stomachache.	YES. Until 24 hours after diarrhea has stopped and/or if your child is not feeling well and/or has diarrhea and needs to use the bathroom so frequently that they cannot focus in school it is best to keep them home until diarrhea is resolved or manageable.	Eating or drinking contaminated beverages or food. By touching hands, objects, or surfaces contaminated with stool or infected pets or farm animals.
<u>Fifth Disease (Parvovirus)</u>	Sore throat or a low-grade fever, rash causing very red cheeks (a “slapped cheek” look), that often begins on the cheeks and moves to the arms, upper body, buttocks, and legs. The rash looks very fine, lacy, and pink	NO. If other rash-causing illnesses are ruled out by a healthcare provider, your child can go to school. Persons with fifth disease are no longer infectious once the rash begins.	By coughing or sneezing. By touching hands, objects, or surfaces contaminated with the virus.
<u>Hand, Foot, and Mouth Disease</u>	Runny nose, low-grade fever, and sometimes a sore throat. A blister-like rash occurs in the mouth. It may be on the sides of the tongue, inside the cheeks, and on the gums.	YES. Until fever is gone and the child is well enough to participate in routine activities (sores or rash may still be present).	By coughing and sneezing. By touching hands, objects, or surfaces contaminated with stool. By touching fluid from the blisters.
<u>Head Lice</u>	Itching of the head and neck; crawling lice, eggs glued to the hair; scratch marks to head or neck	YES. It is school policy that your child must first undergo treatment and start the nit picking (bug removal) process before returning to school.	By head-to-head contact. By sharing personal items that come in contact with the head (combs, hats, etc.). Lice do not jump or fly; they crawl and can fall off the head.
<u>Herpes, Oral</u>	The first time a child is infected there may be blister-like sores inside the mouth and on the gums. Your child may have a fever and be fussy.	NO. However, with a primary internal infection your child may be very uncomfortable and in pain. If they do not have control of their oral secretions, please keep them home until they no longer have sores inside their mouth.	By having direct contact with saliva, commonly by kissing. By touching the fluid from the blisters or sores.
<u>Impetigo</u>	Sores on the skin with a thick golden-yellow discharge that dries, crusts, and sticks to the skin.	YES. Until sores are healed or the person has been treated for at least 24 hours.	By touching the fluid from the sores. By touching contaminated objects (for example clothing, bedding, towels).

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Molluscum Contagiosum	small, pale, shiny, and dome-shaped bumps on the face, body, arms, or legs that are flesh colored, white, or pink and may have a dimple on the top; usually painless and are rarely itchy, red, swollen, or sore	NO. Cover bumps with clothing when there is a possibility that others will come in contact with the skin. If not covered by clothing, cover with a bandage. Activities: Exclude any child with bumps that cannot be covered with a watertight bandage from participating in swimming or other contact sports.	By skin-to-skin contact with an infected person. By using contaminated towels, wash cloths, or equipment. By touching or scratching your bumps and then touching another part of your body.
Mononucleosis	Sore throat, swollen glands, headache, fever, and sometimes a rash. Your child may be very tired.	NO. As long as the child is well enough to participate in routine activities. Sports: Contact sports should be avoided until the child is recovered fully and the spleen is no longer palpable.	By kissing or sharing items contaminated with saliva.
Pertussis (Whooping Cough) <i>Notify the School Nurse, this is a MDH reportable disease</i>	Runny nose, sneezing, mild cough, and possibly fever; explosive bursts of coughing ending in a high pitch whooping sound	YES. Until 5 days after your child starts taking antibiotics. If not treated, your child needs to stay home for 21 days after the cough starts.	By coughing or sneezing. By touching contaminated hands, objects, or surfaces.
Pink Eye	Redness, itching, pain, and drainage from one or both eyes; fever possible	NO. Unless the child has a fever or is not healthy enough to participate in routine activities.	By touching secretions from the eyes, nose, or mouth, hands, objects, or surfaces contaminated with secretions.
Respiratory Infections: Bronchitis, COVID-19, Influenza, Pneumococcal Infection, Pneumonia, RSV <i>Notify the School Nurse, these are MDH reportable.</i>	runny nose, chills, muscle aches, and a sore throat; sneezing, coughing more than usual; fever; vomiting or diarrhea, or a new loss of taste or smell	YES. Until fever is gone (and without the aid of fever reducing medication) for 24 hours, and the child is well enough to participate in routine activities.	By sneezing or coughing. By touching contaminated hands, objects, or surfaces.
Ringworm	Click on link for full symptom description.	YES. For ringworm of the body/feet or scalp keep your child home from childcare and school until treatment has been started. Activities: Limit gym, swimming, and other close contact activities if the lesion cannot be covered or until 72 hours after treatment has begun. Sports: Athletes should follow their health care provider's recommendations and the specific sports league rules.	By touching the infected skin of a person or pet (usually dogs and cats). By sharing or touching contaminated objects like hats, hair brushes, clothing, furniture, shower stalls, swimming pool decks, locker room benches, or floors.

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Roseola	High fever that starts suddenly and lasts for a few days. As the fever breaks, a rash may appear on your child's belly, chest, back, and neck.	YES. Until the fever is gone and other rash illnesses, especially measles, have been ruled out.	By cough or sneezing. By touching the secretions from the nose or mouth.
Rubella (German Measles)	Fever and swollen glands in the area behind the ears and in the neck. There may also be a rash that usually appears first on the face and moves toward the feet.	YES. Until 7 days after the rash appears.	By coughing and sneezing. By touching contaminated hands, objects, or surfaces.
Scabies	Rash of pink bumps or tiny blisters that may itch mostly at night or look only like scratch marks. Common locations: between fingers, around wrists and elbows, armpits	YES. Until 24 hours after treatment begins.	By having a lot of direct contact with the skin of a person with scabies. By sharing bedding, towels, or clothing that was used by a person with scabies.
Shingles <i>Notify the School Nurse, these are MDH reportable.</i>	Severe pain, itching, and numbness along certain nerve pathways, commonly on one side of the body. Followed by red rash and cluster of blisters.	NO. If blisters can be completely covered by clothing or a bandage. If blisters cannot be covered, exclude until the blisters have crusted. Persons with severe, disseminated shingles should be excluded regardless of whether the sores can be covered.	A person must have already had chickenpox disease in the past to develop shingles.
Staph Infection	Infected areas that are red and warm with or without pus. Examples are boils, impetigo, wound infections, and infections of hair follicles.	YES If draining sores cannot be completely covered and contained with a clean, dry bandage.	By touching skin drainage or pus. By touching hands, objects, or surfaces contaminated with secretions from the nose.
Strep Throat Scarlet Fever	(Strep) Fever, red sore throat, swollen glands; headache, stomach pain and vomiting. (Scarlet) fine red rash appears, feels like sandpaper	YES. Until 12 hours after antibiotic treatment begins and the fever is gone. NO. Children who test positive for strep, but do not have symptoms, do not need to be excluded. They are unlikely to spread the infection to other people.	By coughing or sneezing. By touching contaminated hands, objects, or surfaces.
Warts	Common - Dome-shaped and have a rough appearance. See link for further symptoms.	NO.	From person to person by close contact. By touching contaminated objects, such as locker room floors, showers, or pool decks.

Consult your health care provider regarding exclusion guidelines for other infections not described in this manual. Special exclusion guidelines may be recommended in the event of an outbreak of an infectious disease in a childcare setting. Please remember: When you send in a note or call in your child's absence, please state why your child was absent. It helps us monitor illness. Contact the school nurse at (320) 453-2900, ext. 2135 with any questions.