

Dear Parent/ Guardian, Your child was sent home today due to a health concern. Please use the following guidelines to determine when your child may return to school. Temporary exclusion from school is required to prevent the spread of infection to the other students and staff.

IF YOUR CHILD HAS: THEN KEEP HOME UNTIL: 1. Cold, Cough or Flu* 24 hours illness free, doctor's note required to return to school 2. Vomiting* 24 hours illness free, and is eating again 3. Fever* 72 hours fever free, and not receiving any medication to reduce a fever (like Tylenol or Motrin) 4. Diarrhea* No diarrhea for 24 hours 5. Rash Doctor's note required to return to school 6. Broken Bones, Sprains, etc. Doctor's note required detailing restrictions 7. Hospitalization/Surgery, etc. Doctor's note detailing restrictions 8. Chickenpox 6 days after rash breaks out, and when all lesions are scabbed 9. Conjunctivitis (pink eye) Can return 24 hours after the start of an antibiotic treatment 10. Fifth Disease Can return when child feels well enough 11. Hand Foot and Mouth Disease Can return to school when the fever is gone and the blisters (coxsackie virus) are healed 12. Head Lice Can return to school after treatment 13. Skin Infection Can return 24 hours after the start of an antibiotic treatment with infected area covered (Impetigo, Staph, MRSA, etc.) 14. Pertussis 5 days after the start of antibiotic treatment 15. Pinworms Can return after the treatment has started 16. Ringworm Can return after the treatment has started 17. Roseola Can attend when child feels well enough 18. Scabies Keep child home until treatment is completed **19.** Strep Throat or Scarlet Fever Can return 24 hours after the start of an antibiotic treatment Student Name: _____ Date: _____ Classroom #_____ Date: _____ Reason sent home # Time sent home _____am /pm Thank you for your cooperation, School Nurses * doctor's note required to return to school Revised 4/21