A Quick Reference Guide for Parents

- Please keep your child home from school if he or she has one of the conditions or illnesses listed below.
- Report your child's absence to their school and consult their healthcare provider.
- Most of the conditions and illnesses are reportable to the Health Department during outbreaks only. Illnesses noted (*) are reportable for single cases

Conjunctivitis (Pink-eye)

Children who have pink or red eyes with white or yellow discharge- often with matted eyelids after sleep and eye pain or redness of the eyelids or skin surrounding the eye may have Purulent Conjunctivitis. They should be **excluded from school** while symptomatic or until 24 hours after antibiotic treatment. A medical note is required to return to school.

Children with pink eyes who have a clear, watery discharge without fever, eye pain, or eyelid redness **do not need** to be kept home.

Fifth Disease (Erythema infectiosum)

The primary symptom of this illness is a rash, characterized by "slapped face" appearance and there is no specified exclusion for cases. Pregnant women and immune-compromised persons should seek medical advice.

Head Lice

Children should be **excluded from school** if they are experiencing head scratching and **live lice or nits** are present. The parent must bring the child to be examined in order to return to school.

Hepatitis A*

Children should be excluded until one week after the onset of jaundice or illness.

.Influenza-Like-Illness Children with fever, cough and/or sore throat should be excluded until symptoms resolved.

Measles*

Children with fever, reddened eyes, runny nose, cough, dusky-red blotchy rash on day 3 or 4, should be **excluded until 4** days after onset of rash.

Meningitis*

Bacterial A/iral - Children experiencing high fever, headache, and stiff neck should be excluded until recovered. 'Bacterial Meningitis is immediately reportable to Health Department

Mononucleosis

Exclusion recommended until a medical note to return to school and/or resume physical activities is required.

Mumps'

Initially excluded. Children may return 5 daysafter the onset of parotid gland swelling.

Pertussis*

Children should be **excluded until 5 days of appropriate antibiotic therapy**, with a note from the healthcare provider.

Rubella (German Measles)* Initially excluded. Child should remain at home until 6 days after onset of rash, with a note from the healthcare provider.

Scabies

Children with this condition should remain out of school until 24 hours after application of appropriate scabicidal treatment has been completed.

Staphylococcal or streptococcal skin infections, (includes MRSA) Exclude children from school whose lesions cannot be covered. If lesion can be covered exclude from contact sports only. Impetigo- May return 24 hours after treatment started, but areas/sores must remain covered.

Streptococcal pharyngitis (strep throat)

Children can return to school 24 hours after starting antibiotic treatment if there is no fever.

Tinea Capitis (Ringworm of the scalp) Children must be excluded from school until an oral antifungal treatment is initiated.

Tinea Corporis (Ringworm of the body) Children should be excluded from school until an oral or topical antifungal treatment is initiated, unless the affected area can be completely covered.

Tuberculosis³

Children with this condition must **be excluded from school** until the local health department and treating physician state that the student is noninfectious.

Varicella (Chickenpox)*

Children should be excluded from school until all lesions have dried and crusted (usually 7 days/1 week after the onset of the rash).

Varicella Herpes Zoster (Shingles)

Keep children home who have lesions/sores/blisters that cannot be covered. Child may return to school once all lesions are dried/crusted.

If you have any questions about this list, please contact your child's school nurse or the Pinellas County School Health Services department at 727-588-6320.