

Davis School District Illness Protocol

Temporary exclusion is recommended when:

1. The illness prevents the student from participating comfortably in activities
2. The illness results in a greater need for care than the staff can provide
3. The student has **any** of the following conditions, unless a health professional determines the student's condition does not require exclusion
 - **Fever** - temperature 101 F (oral) or above and *behavior change or other signs and symptoms* (sore throat, rash, earache, vomiting, diarrhea)
 - **Appears to be severely ill**
 - **Marked drowsiness or malaise** (a vague feeling of physical discomfort or uneasiness) as seen early in an illness
 - **Diarrhea** - defined as an unusual number of stools or unusually liquid stools compared to the child's normal pattern
 - **Blood in stools** - not explained by dietary change, medication, or constipation
 - **Vomiting / nausea** - more than 2X in 24 hours, fever with vomiting, green/bloody vomitus; recent history of head injury
 - **Severe abdominal pain**
 - **Less severe abdominal pain** - that continues for more than 2 hours
 - **Mouth sores** with drooling
 - **Rash with fever**
 - **Sore Throat, cold and persistent cough** – a student with a "heavy" cold and hacking cough should be in bed even if there is no fever. A student complaining of sore throat with no other symptoms may attend school. If white spots can be seen in the back of the throat or if fever is present, the student should be home
 - **Any break in the skin in the weeping /oozing stage** – unless protected (covered) and/or diagnosed as noninfectious
 - **Impetigo** - until 24 hours after treatment has started
 - **Streptococcal infection** - (strep throat or other streptococcal infection), until 24 hours after treatment has been started
 - **Head lice** - at the end of the day, then until after the first treatment (Refer to DSD Head Lice Protocol)
 - **Scabies** - until after treatment has been given
 - **Chicken pox** - until all lesions have dried or crusted (about one week after onset of rash)
 - **Pertussis (Whooping cough)** - until 5 days of appropriate antibiotic treatment
 - **Hepatitis A** - until 1 week after onset of illness or jaundice or as directed by licensed medical provider
 - **Measles** – Until 4 days after the onset of rash then the student may return to school
 - **Mumps**- Until 9 days after the onset of parotid gland swelling then student may return to school

Any condition determined by the local health department to be contributing to the transmission of illness during an outbreak

Communicable Disease Bureau, Davis County Health Department and the American Academy of Pediatrics
Reviewed and approved by Davis School District Health and Nursing Services and
Special Education Nursing Services

Conditions That May Not Require Exclusion:

- **Common colds, runny noses** (regardless of color or consistency of nasal discharge), and coughs
- **Yellow, white or watery eye drainage**
- **Rash without fever**
- **MRSA (methicillin-resistant staphylococcus aureus)** – if wound is covered and dry
- **Shingles (herpes zoster caused by varicella)** – if covered and dry
- **Ringworm** (may delay treatment until the end of the day)
- **Thrush** (white spots or patches in the mouth)
- **Fifth disease** (slapped cheek disease, parvovirus B 19) in a child without immune problems
- **HIV** (Human immunodeficiency virus infection), with consideration of risk to the HIV infected student or others - decided on a case-by-case basis by health professionals
- **Measles** – 4 days after onset of rash student may return to school
- **Mumps** – 9 days after onset of parotid gland swelling student may return to school
- **Lice** - if nits present or if treatment has been given after live lice found

Multiple studies have shown that most viruses are spread by children who seem well, which means that exposure happens before symptoms present.

"HAND AND SURFACE HYGIENE CONTINUE TO BE THE BEST WAY TO REDUCE INFECTIONS IN GROUP CARE"

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