






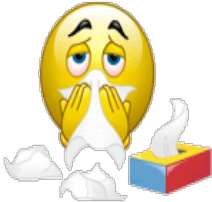


I NEED TO STAY HOME IF..

I HAVE A FEVER	I AM VOMITING	I HAVE DIARRHEA	I HAVE A RASH	I HAVE HEAD LICE	I HAVE AN EYE INFECTION	I HAVE BEEN IN THE HOSPITAL	I HAVE THE FLU
							
TEMPERATURE OF 100.0 F OR HIGHER	WITHIN THE PAST 24 HOURS	WITHIN THE PAST 24 HOURS	BODY RASH WITH ITCHING OR FEVER	ITCHY HEAD, ACTIVE HEAD LICE	REDNESS, ITCHING AND/OR PUS DRAINING FROM EYE	HOSPITAL STAY AND/OR EMERGENCY ROOM VISIT	ACHY BODY, PAIN, TIREDNESS, HEADACHE, DRY COUGH, SORE THROAT, RUNNY NOSE (may have vomiting, diarrhea or fever)

I am ready to go back to school when I am...

Fever free without the assistance of medication for 24 hours (i.e. Tylenol, Motrin, Advil, etc.)	Free from vomiting for 24 hours	Free from diarrhea for 24 hours	Free from rash, itching, or fever. I have been evaluated by my doctor if needed.	Treated with appropriate lice treatment at home.	Free from drainage and/or have been evaluated by my doctor if needed.	Released by my medical provider to return to school.	Released by a medical provider, symptoms are gone.
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A Friendly Reminder: Send a parent's or doctor's excuse for an absence upon the student's return to school.