### **ILLNESS SUMMARY FOR TEACHERS AND PARENTS**

Health Unit Staff may excuse for the day and the following day as deemed necessary. The Health Coordinator may excuse one additional day if symptoms persist and the school based health staff deem continued exclusion is necessary. Any further absences for the illness must be excused by a Healthcare Provider.

ILLNESS	TIME FROM EXPOSURE TO FIRST SIGN	EARLY SIGNS	EXCLUSION FROM SCHOOL	RESTRICTIONS / REFERRAL
Chicken Pox	2-3 Weeks	Usually slight fever at the time of appearance of red bump eruptions which eventually look like small water filled blisters over red spots found on all parts of the body.	ALL Vesicles must be dry, likely 5-6 days NO NEW red bumps for 24 hours	All suspected Chicken Pox must be referred to a Healthcare Provider.  Pregnant women should contact their provider immediately with exposure.
Common Cold	12-72 hours	Runny nose, chilliness and malaise. Usually no fever, unless complications have developed.	Exclude from school if fever and/or severe symptoms are present. 24 hour symptom free may return.	Referral to Healthcare Provider & Follow Respiratory Illness Guidelines from CDC
COVID-19 AND ITS VARIANTS	VARIES	VARIES	FOLLOW CURRENT KDPH GUIDELINES	EXCLUSION FROM SCHOOL PER KDPH GUIDELINES
Bacterial Meningitis (Reportable)	Varies from 2-10 days-if you have had direct contact with person having meningitis consult your physician.	Sudden onset of headache, fever, nausea, vomiting, stiff neck. Frequently a fine spotted rash appears.	Excluded from school until released by the physician.	NONE-after recovery & released by Healthcare Provider
Cough	Varies related to cause.	Uncontrolled cough, coughing that sounds like "barking," cough that is productivecoughing up colored phlegm, coughing so hard as to induce vomiting, or any cough accompanied by fever or other symptoms of illness.	Exclusion is based on severity, frequency and accompanied symptoms.	Referral to Healthcare Provider if cough is severe or consistent, is productive or causing "barking" or "crowing" sounds.

Diarrhea	Sudden and not related to current known side effects of medication or diagnosed health conditions.	More than one episode of loose, watery stool unless the first episode is severe. Diarrhea can be a sign of infection, food intolerance, medication intolerance or a GI health condition.	Excluded until 24 hours diarrhea free without medication or as deemed necessary by a Healthcare Provider.	Referral to a Healthcare Provider if diarrhea is explosive or accompanied by fever, cramping, pain, or lasts longer than 24 hours.
Ear Pain/Infection	Varies	Complaints of pain, difficulty hearing, or nonverbal cues of holding/cupping or pulling on the ear	Only as deemed necessary by a Healthcare Provider unless accompanied by fever or present with severe pain.	Referral to a Healthcare Provider if eardrums appear abnormal on assessment, with continued complaints or if pain appears extreme.
Fifth's Disease	4-20 days	Characteristic "slapped face appearance" followed in 1-4 days by lace-like rash on trunk and extremities.	Excluded if fever, headache, fatigue or other signs of illness are present. 24 hour symptom free may return.	Referral to healthcare provider if symptoms continue or worsen- Pregnant women should contact their provider immediately with exposure.
Hand Foot Mouth	3-7 days	Low grade fever, blister-like rash on hands, feet and in mouth. May last for 7-10 days.	Exclude from school until a full day (24hr) without fever or if there are open blisters with drainage in/on mouth or hands	Referral to healthcare provider if symptoms continue or worsen
German Measles/Rubella (Reportable)	14-23 days	Slight signs of a cold for 1-2 days followed by a light red rash.	At least 7 days from the appearance of rash and as directed by the Healthcare Provider and the Local Health Department.	Any suspicion of Measles must be referred to a Healthcare Provider for assessment.  Pregnant women should contact their provider immediately with exposure
Head Lice - Pediculosis Capitis	Eggs hatch in a week	Excessive scratching of the scalp Visible crawling bug. White egg (nit) on hair that will not "flick off."	Exclude until all live lice are removed.	Check head frequently for recurrence.
Impetigo	Variable	Small blisters on the skin which later become crusted and contain pus.	Permit school attendance if under treatment and lesions are dry or can be completely covered with no "leaking" or uncontained pus/liquid drainage from the site(s).	Use separate towels and linens.  Must be under care of a Healthcare Provider for antibiotic tx.

Infectious Mononucleosis	30-50 daysSymptomatic contacts should be tested.	Fever, pharyngitis, lymphadenopathy.	As deemed necessary by a Healthcare Provider. Health Unit staff should not exclude unless fever, extreme fatigue, persistent cough and sore throat are present which require further assessment by Healthcare Provider.	Do not donate blood.  May require homebound school services if severe symptoms.
Influenza	1-5 days	Rapid onset with fever, chills, headache, lack of energy, muscle aching sore throat, cough.	fever, no aches/pains, no chills, no sore throat, no	Referral to Healthcare Provider Follow Respiratory Illness Guidelines from CDC
Lyme Disease	3-32 days Transmitted by a deer tick (smaller than a wood tick).	Raised red rash, similar to a bull's eye. Systemic symptoms.	Only if fever or other symptoms of illness are present, which require further assessment by a Healthcare Provider.	Only as deemed necessary by a Healthcare Provider
Measles/Rubeola (Reportable)	7-18 daysRecommend family physician be contacted regarding measles vaccine.	Fever, signs of a cold, cough, conjunctivitis. In 3-4 days a dull red blotchy rash appears.	At least 4 days after the appearance of the rash and as deemed necessary by a Healthcare Provider.	Any suspicion of Measles must be referred to a Healthcare Provider for assessment.  Pregnant women should contact their provider immediately with exposure
	12-25 daysSusceptible contacts should be immunized.	Fever, swelling and tenderness of the gland in front of and below the ears.	Period of acute illness for at least 9 days and as deemed necessary by a Healthcare Provider.	Any suspicion of Mumps must be referred to a Healthcare Provider for assessment. Pregnant women should contact their provider immediately with exposure

Open Wounds of any Cause	N/A	Any open area on the body resulting from a break in the skin. May or may not have drainage, but must be covered by a bandage.	Until the wound can be completely covered with no "leaking" from the bandage resulting in uncontained pus/liquid drainage from the site(s).	Referral to Healthcare Provider should be made for any untreated skin break with drainage, discoloration or signs of infection.
	5-10 days after exposure to the Pertussis bacteria. Is highly contagious.	May start like the common cold with a runny nose or congestion, red watery eyes, cough and fever. Within 7-14 days the cough can become persistent and severe, even causing oxygen levels to drop. Has a "whoop" or gasping between coughs distinctive sound. Coughing may last for weeks to months.	complete antibiotic treatment, and as deemed necessary by the Healthcare Provider and	Referral to Healthcare Provider should be made for any cough that is severe or accompanied by any other signs of illness.
Pink Eye - Conjunctivitis	Usually 24 to 72 hours	Red eyes, discharge from eyes, crusted lids. Cause can be VIRAL, BACTERIAL, CHEMICAL IRRITANT, ALLERGIC OR MECHANICAL (contact lenses, eyelash, etc)	As deemed necessary by Healthcare Provider—if determined contagious—24 hours of medication	All suspicion of conjunctivitis/ "pink eye" must be referred to a Healthcare Provider to determine if it is contagious.  Use separate towels and linens.  Monitor unaffected eye (if only one eye initially) as cross contamination is prevalent.
Rash	N/A	Any unidentified, undiagnosed rash on the skin	Exclusion is dependent on location, extent/severity of rash, itching and student's ability to maintain hand hygiene and if there are any open areas of the skin.	Referral should be made to a Healthcare Provider for any suspicious rash.
Ringworm of the Body	4-10 days—Direct Contacts should consult a Provider.	Flat, spreading, scaly, ring-shaped spots. The margins are usually reddish and elevated.	Permit school attendance if under treatment and area can be completely covered.	Referral to a Healthcare Provider if any rash is suspicious and untreated.

	10-14 days Direct Contacts should consult a Provider.	Flat, spreading, ring-shaped, bald spots on hairy parts of head.	Permit school attendance if under treatment and area can be completely covered	Referral to a Healthcare Provider if any rash is suspicious and untreated.
	2-6 weeks- Direct Contacts should consult a Provider for treatment.	Small, raised, reddened areas or blisters with connecting grayish- white lines. Marked itching. Most commonly found in folds of the skin.	Exclude until 24 hours after first treatment.	Referral to a Healthcare Provider if any rash is suspicious and untreated. Check FREQUENTLY for recurrence.
Shingles	10-21 days	Vesicular lesions on dermatome pain.	Exclude if lesions can NOT be covered. Must be covered at school with no "leaking" or uncontained drainage from the site(s)	Referral to a Healthcare Provider if any rash is suspicious and untreated.  Those who have not had chickenpox should not come in contact with vesicles.
(Scarlet Fever-Sore	1-3 daysSymptomatic contacts should be tested—consult physician	appears within 24 hours.	Excluded from school a minimum 24 hours on medication. Extended exclusion as deemed necessary by the Provider.	Suspected "strep throat" requires referral and testing by a Healthcare Provider
	From 15-50 daysSusceptible contacts should be immunized.	Nausea, vomiting, extreme fatigue, often pain in the upper abdomen followed by jaundice. Mild cases occur without jaundice in children.	Exclude from school until released by the Provider and the Health Department.	Supervised hand-washing after using the toilet and before meals, especially at school.
Viral Hepatitis (B) Serum (Reportable)	45-180 days	Masked onset, loss of appetite, vague abdominal discomfort, nausea, vomiting, often progressing to jaundice.	Exclude from school until released by physician.	Consult a physician.