

GENERAL EXCLUSION GUIDELINES FOR ILL CHILDREN/STAFF

Certain symptoms in children may suggest the presence of a communicable disease. Excluding an ill child may decrease the spread of the disease to others in the child care and school settings. Recommended exclusion varies by the disease or infectious agent. Children with the symptoms listed below should be excluded from the childcare or school setting until symptoms improve, or a healthcare provider has determined that the child can return.

NOTE: It is recommended that child care/preschool providers and schools have policies that are clearly written for excluding sick children and staff. These policies should be placed in the student handbook or on the child care or school website. Parents/guardians and staff should be given, or directed to, these resources at the beginning of each school year or when the child is enrolled or the staff member is hired. This will help prevent problems later when the child or staff member is ill.

Exclude children with any of the following:

Illness: Unable to participate in routine activities or needs more care than can be provided by the child care/school staff.

Fever: Elevation of body temperature above normal when accompanied by behavior changes, stiff neck, difficulty breathing, rash, sore throat, and/or other signs or symptoms of illness; or is unable to participate in routine activities. **Measure temperature before giving medications to reduce fever.** The following temperatures are considered above normal:

- Axillary (armpit) temperature: 99 degrees F or higher.
- Oral temperature: 99.5 degrees F or higher.
- **Rectal** temperature: **100.4** degrees F or higher.
- Ear and temporal (forehead) temperature monitoring is not recommended because of inconsistent and inaccurate results. Each manufacturer may have different temperature ranges, which makes setting standards difficult.

Signs/Symptoms of Possible Severe Illness: Exclude until a healthcare provider has done an evaluation to rule out severe illness when the child is unusually tired, has uncontrolled coughing, unexplained irritability, persistent crying, difficulty breathing, wheezing, or other unusual signs for the child.

Diarrhea: Until 24 hours after diarrhea stops or until a medical exam indicates that it is not due to a communicable disease. Diarrhea is defined as an increased number of stools compared with a child's normal pattern, along with decreased stool form and/or stools that are watery, bloody, or contain mucus.

Vomiting: Until 24 hours after vomiting stops, unless determined to be caused by a noncommunicable condition and the child is not in danger of dehydration.

Mouth Sores with Drooling: Until a medical exam indicates the child may return or until sores have healed.

Rash with Fever or Behavior Change: Until a medical exam indicates these symptoms are not those of a communicable disease that requires exclusion.



Eye Drainage: When purulent (pus) drainage and/or fever or eye pain is present or until a medical exam indicates that a child may return.

Unusual Color of Skin, Eyes, Stool, or Urine: Until a medical exam indicates the child does not have hepatitis. Symptoms of hepatitis include yellow eyes or skin (jaundice), gray or white stools, or dark (tea or cola-colored) urine.

Questions?

Contra Costa County Communicable Disease Programs (925) 313-6740 http://cchealth.org/cd/