

# ***All information provided by Hildebrandt Learning Centers through their Parent's Handbook***

## **Child Illness Policy**

### **Symptoms**

Click on the appropriate link below for a table of symptoms, causes and when to seek medical advice for your child.

[Respiratory](#)

[Skin](#)

[Gastrointestinal](#)

[Genital/Urinary](#)

[Specific Conditions](#)

### **A Reminder**

It is usually a good idea to call or consult a pediatric health provider early in the course of an illness. The pediatric health provider will help you determine how sick the child is and what treatment can be given.

For specific symptoms and conditions, the tables listed above will give you detailed information. Use the tables to look up what you know: symptoms or specific condition. The table tells you the cause, when to exclude your child from the child care center, when to ask for medical advice, and when to re-admit a child to care. ***Remember . . . use your good judgment in dealing with your sick child.***

All policies and procedures listed in this Child Illness Policy must be adhered to by all parents. Failure to do so may cause an interruption in your child care services or termination of your Parent Contract. All parents are required to sign and date the Acknowledgment of Receipt of the Child Illness Policy, a copy of which will be maintained in your child's file.

### **\*\*Disclaimer\*\***

The major of the information detailed above and all the information supplied in the tables on symptoms and conditions were prepared by the Early Childhood Committee of the Pennsylvania Chapter of the American Academy of Pediatrics.

For additional information on any illness listed in this Child Illness Policy, you may contact the Pennsylvania Chapter of the American Academy of Pediatrics at 1-800-24-ECELS.

***Remember, use your good judgment in dealing with your sick child.***

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## **Child Illness Policy**

### **Respiratory Symptoms**

Colds

Earaches

Eyes

Sore Throat

Wheezing

Other & Notes

#### **Cold** (see note 2)

**What you see:** runny, stuffy nose; scratchy throat; coughing; sneezing; watery eyes; fever (see note 1)

**Causes:** viruses: rhinovirus; coxsackievirus; influenza; adenovirus; parainfluenza; respiratory syncytial virus; enterovirus; mycoplasma; early stage of many other viral infections

**Exclude and/or Seek Medical Advice:** fever (see note 1) and behavior change; child looks or acts very ill; child has difficulty breathing; see GI symptoms for colds accompanied by vomiting, diarrhea or stomachache; cold symptoms are accompanied by blood-red or purple rash not associated with injury

**Readmit when all the criteria listed below are met:** child with continuing fever and behavior change has been seen by physician who says child may return; child no longer appears ill; child has no difficulty breathing; GI symptoms gone

#### **Earaches** (see note 3)

**What you see:** fever, pain; difficulty hearing; "blocked ears"; drainage from ears

**Causes:** bacteria; viruses

**Exclude and/or Seek Medical Advice:** fever (see note 1) and behavior change; child looks or acts very ill; drainage from ear; pain lasting more than 3 days

**Readmit when all the criteria listed below are met:** child with continuing fever and behavior change has been seen by physician who says child may return; child no longer appears ill; child has been medically evaluated and care plan is being followed

#### **Eyes: Pink Eye, Conjunctivitis** (see note 3)

**What you see:** watery eyes; mucus in eyes; red/pink eyes' itchy eyes' painful eyes' eyelid redness

**Causes:** viruses; bacteria; blocked tear ducts

**Exclude and/or Seek Medical Advice:** child is too uncomfortable to participate; discharge is thick and white or yellow; eyelid is very swollen/discolored

**Readmit when all the criteria listed below are met:** child feels well; if discharge is thick and white or yellow, w4 hours after treatment is started

## **Sore Throat** (see note 5)

**What you see:** scratchy, painful throat; difficulty swallowing; white patches on throat/tonsils; spots on throat/tonsils; red throat/tonsils; large tonsils; enlarged lymph nodes in neck; fever, stomachache; drooling

**Causes:** viruses; bacteria — strep throat — diphtheria in unimmunized individuals; haemophilus - influenzae type b

**Exclude and/or Seek Medical Advice:** fever (see note 1) and behavior change; child looks or acts very ill; child is unable to swallow anything; excessive drooling; sore throat is accompanied by blood-red or purple rash not associated with injury

**Readmit when all the criteria listed below are met:** child with continuing fever and behavior changes has been seen by physician who says child may return; able to swallow; if strep is documented, after 24 hours of antibiotics

## **Wheezing** (see note 6)

**What you see:** difficulty breathing; "whistling" sound during breathing

**Causes:** asthma; bronchiolitis; viruses; foreign body

**Exclude and/or Seek Medical Advice:** fever (see note 1) and behavior change; child looks or acts very ill; child who has never wheezed before; difficulty breathing

**Readmit when all the criteria listed below are met:** child with continuing fever and behavior change has been seen by physician who says child may return; child no longer appears ill; child has no difficulty breathing

## **Other & Notes**

Adenovirus, Allergies, Bronchiolitis, Coxsackievirus, Croup, Fifth Disease, Influenza, Tuberculosis (TB) — see Specific Conditions

### **NOTES for Respiratory Symptoms:**

1. A child with a fever is defined as a child with:
  - an oral temperature of 101 F or greater or
  - a rectal temperature of 102 F or greater or
  - an axillary (armpit) temperature of 100 F or greater or
  - an aural (ear) thermometer reading that is equal to the oral or rectal temperatures
2. The concentration of viruses is highest two to three days before the child shows any symptoms.
3. Ear infections are very common in children between the ages of 6 - 36 months. They commonly follow colds. The pain is from the stretched eardrum. Sometimes children may have an ear infection without pain. They sometimes rub or tug their ears, have trouble hearing, or grind their teeth.
4. Conjunctivitis is usually associated with an upper respiratory infection. Most of these types are watery. For the watery type the child need not be excluded. If there is a lot of mucus or discharge, the cause is more likely to be bacterial. Allergy can also cause conjunctivitis with watery, red eyes.
5. Sore throats can be caused by viruses or bacteria. They are spread by respiratory secretions or by hand-mouth contact.
6. Wheezing is caused by narrowing of the lower respiratory tract. The narrowing can be caused by muscle spasm, swelling or mucus. As the air moves through the narrowed space, it sounds like whistling or whoosing.

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## **Child Illness Policy**

### **Skin Symptoms**

**Cold Sores    Diaper Rash    Hives    Insect Bites    Undiagnosed Rash    Others & Notes**

#### **Cold Sores**

**What you see:** fever; painful small, fluid-filled blisters on mouth, gums or on lips

**Causes:** herpes virus

**Exclude and/or Seek Medical Advice:** Fever (see note 1) and behavior change; unable to participate; oozing open lesions/unable to be covered; drooling

**Readmit when all the criteria listed below are met:** Child with continuing fever and behavior change has been seen by physician who says child may return; able to participate; no drooling and no oozing sores

#### **Diaper Rash**

**What you see:** redness, scaling, pimples, sores, cracking of skin in diaper region

**Causes:** combination of irritation by rubbing of skin by stool or urine in warm, moist diapers; secondary infection with yeast or bacteria.

**Exclude and/or Seek Medical Advice:** oozing lesions from skin infection (impetigo)

**Readmit when all the criteria listed below are met:** if infected, 24 hours after treatment begins

#### **Hives**

**What you see:** red, blotchy, itchy raised skin rash with central clearing and no blisters; may come and go over time

**Causes:** allergic reaction to foods, insect bites, medicines

**Exclude and/or Seek Medical Advice:** if accompanied by difficulty breathing

**Readmit when all the criteria listed below are met:** able to participate

#### **Insect Bites**

**What you see:** itchy red pimples with raised skin around site; usually on exposed surface; bites often clumped in groups

**Causes:** mosquitos, fleas, bedbugs, flies

**Exclude and/or Seek Medical Advice:** difficulty breathing; infection of bites

**Readmit when all the criteria listed below are met:** if infected, 24 hours after treatment

## Undiagnosed Rash

**What you see:** any other skin rash

**Causes:** many causes, usually viral

**Exclude and/or Seek Medical Advice:** fever (see [note 1](#)) and behavior change; unable to participate; oozing/open wound; rash not healing; difficulty breathing; blood-red color or bruising not associated with injury; joint pain

**Readmit when all the criteria listed below are met:** child with continuing fever and behavior change has been seen by physician who says child may return; able to participate

## Other & Notes

Cellulitis, Eczema, Impetigo, Lice, Poison Ivy, Ringworm, Scabies — see [Specific Conditions](#)

### Note for Skin Symptoms:

1. A child with a fever is defined as a child with:
  - an oral temperature of 101 F or greater or
  - a rectal temperature of 102 F or greater or
  - an axillary (armpit) temperature of 100 F or greater or
  - an aural (ear) thermometer reading that is equal to the oral or rectal temperatures

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## Gastrointestinal Symptoms

### Diarrhea

### Stomachache/Abdominal Pains

### Vomiting

### Other & Notes

#### Diarrhea (see note 2)

**What you see:** excess of liquid in stools; five or more stools in an 8-hour period or an increased number of stools compared to the child's normal pattern, and with increased stool water and/or decreased form

**Causes:** infection — viruses, bacteria, parasites; food intolerance; medications; disease of the bowel

**Exclude and/or Seek Medical Advice:** bloody or black stool; no urine output for 8 hours; abdominal pain; increased number of stools, watery or unformed stool not contained in diaper/toilet; fever (see note 1) and behavior change; mucus in stools; child appears ill; jaundice — yellow skin or eyes

**Readmit when all the criteria listed below are met:** if not yet toilet trained, when stool is contained within diaper and stool frequency and consistency improves so child no longer has infectious diarrhea as judged by normal stools or the decision of a health professional; if toilet trained, must be accident-free for one day; for diarrhea due to shigella, salmonella, or giardia, when child has had treatment for 24 hours and has been cleared for readmission by the child's pediatric health provider; child with continuing fever and behavior change has been seen by physician who says child may return.

#### Stomachache, Abdominal Pain

**What you see:** pain

**Causes:** infection; bleeding in the bowel; blockage in the bowel; food intolerance

**Exclude and/or Seek Medical Advice:** severe pain that causes the child to double up or scream; abdominal pain after injury; bloody or black stools; no urine output for 8 hours; refusal to eat or drink; vomiting; diarrhea; child appears ill; red or purple rash; jaundice — yellow skin or eyes; fever (see note 1) and behavior change

**Readmit when all the criteria listed below are met:** when pain resolves; child with continuing fever and behavior change has been seen by physician who says child may return.

#### Vomiting

**What you see:** abdominal pain; digested/undigested stomach contents

**Causes:** infection; blockage of the bowel; bleeding in the bowel

**Exclude and/or Seek Medical Advice:** vomiting more than twice in 24 hours; no urine output in 8 hours; refusal to eat or drink; green/bloody vomitus; abdominal pain; bloody/black stools; headache; child appears ill; jaundice — yellow skin or eyes; recent history of head injury; fever (see note 1) and behavior change

**Readmit when all the criteria listed below are met:** when vomiting resolves; child with continuing fever and behavior change has been seen by physician who says child may return.

## Other & Notes

Campylobacter; Cryptosporidiosis; Giardiasis; Hepatitis A; Hepatitis B; Rotavirus; Salmonellosis; Shigellosis — see Specific Conditions

1. A child with a fever is defined as a child with:
  - an oral temperature of 101 F or greater or
  - a rectal temperature of 102 F or greater or
  - an axillary (armpit) temperature of 100 F or greater or
  - an aural (ear) thermometer reading that is equal to the oral or rectal temperatures
2. Any child who develops uncontrolled diarrhea (that cannot be contained by the child's diaper or use of the toilet) while attending child care shall be removed from the facility by calling the child's parent or legal guardian. While waiting to leave the facility, the child shall not be permitted to have contact with other children in the facility. When removal to a supervised, separate area is not possible, the child should be kept as comfortable as possible with the group, with as little contact as possible with the other children until the child leaves the facility.

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## **Child Illness Policy**

### **Genital/Urinary Symptoms**

#### **Genital Problems**

#### **Urinary Problems**

#### **Notes**

### **Genital Problems**

**What you see:** redness, itching; discharge — yellow, white, brown, odor, pain with urination

**Causes:** rubbing or contact with irritants; nonspecific vaginitis (see note 2); infection (see note 3) foreign body

**Exclude and/or Seek Medical Advice:** Not necessary

### **Urinary Problems**

**What you see:** burning/pain on urination; fever, diarrhea; back/flank/abdominal pain; foul smelling urine; cloudy urine; frequent urination; dribbling; a child usually toilet-trained wets him/herself; red/tea colored urine

**Causes:** infection (see note 4); kidney disease (see note 5); injury to kidney

**Exclude and/or Seek Medical Advice:** exclude for urinary signs associated with any of the following:

- fever (see note 1) and behavior change
- child appears ill
- child has had injury to the abdomen
- no urination for 8 hours
- red/tea colored urine (see note 5)

**Readmit when all the criteria listed below are met:** child with continuing fever and behavior change has been seen by physician who says child may return; child no longer ill

### **Notes**

1. A child with a fever is defined as a child with:
  - an oral temperature of 101 F or greater or
  - a rectal temperature of 102 F or greater or
  - an axillary (armpit) temperature of 100 F or greater or
  - an aural (ear) thermometer reading that is equal to the oral or rectal temperatures
2. Non-specific vaginitis is an irritation of the vaginal area common in preschool aged girls. Wearing tight pants, using soap to wash around the vagina, using bubble bath, or nylon underwear may cause it or make it worse.
3. If a sexually transmitted disease is suspected, contact the local Department of Health.
4. Urinary tract infections (UTI) are bacterial infections of the kidneys and/or the urinary bladder. They are not contagious and a child with a UIT may go to child care if able to participate.
5. More serious kidney diseases indicated by red or tea colored urine require a pediatric health provider's evaluation.

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## Child Illness Policy Specific Condition Symptoms

A B C E F G H I L M P R S T Other Notes

### A

#### Adenovirus

**What you see:** fever, runny nose, cough, sore throat, watery eye/pink eye, vomiting, diarrhea

**Causes:** adenovirus; spread by person-to-person contact, airborne particles, fecal/oral route and hand contact with mucous membranes of eyes, nose and mouth

**Exclude and/or Seek Medical Advice:** fever (see note 1) and behavior changes; unable to participate

**Readmit when all the criteria listed are met:** child with continuing fever and behavior change has been seen by physician who says child may return; able to participate

#### Allergies

**What you see:** runny nose, itchy and/or watery eyes, wheezing (asthma); diarrhea; hives, eczema

**Causes:** certain foods; grasses/trees; weeds; dust; molds; insect bites, insect stings; drugs; animal products; cold air; exercise

**Exclude and/or Seek Medical Advice:** unable to participate; sudden onset of allergic reaction (such as hives and/or wheezing)

**Readmit when all the criteria listed are met:** able to participate

#### Asthma

**What you see:** difficulty breathing; working hard to breathe; cough

**Causes:** pollens, molds, dust, animals, tobacco smoke, odors, sprays, exercise, weather change, wood smoke, cleaners, chemicals, air pollutants, viral infections

**Exclude and/or Seek Medical Advice:** unable to participate; the child is still breathing fast or hard after receiving asthma medicine; the child looks or acts very ill

**Readmit when all the criteria listed are met:** able to participate

# B

## Bronchiolitis

**What you see:** wheezing; difficulty breathing

**Causes:** respiratory syncytial virus and sometimes other viruses spread by direct or close contact with infected droplets

**Exclude and/or Seek Medical Advice:** fever (see [note 1](#)) and behavior change; unable to participate; difficulty breathing/feeding; if culture is positive for respiratory syncytial virus and there are infants younger than 3 months of age in center

**Readmit when all the criteria listed are met:** child with continuing fever and behavior change has been seen by physician who says child may return; able to participate

## Bronchitis

**What you see:** cough after a cold that lasts more than 2 weeks

**Causes:** irritation and swelling of the large air tubes in the chest

**Exclude and/or Seek Medical Advice:** fever (see [note 1](#)) and behavior change; unable to participate

**Readmit when all the criteria listed are met:** child with continuing fever and behavior change has been seen by physician who says child may return; able to participate; physician determines child does not have whooping cough (pertussis)

# C

## Campylobacter

**What you see:** bloody diarrhea; vomiting/abdominal pain; fever; convulsions

**Causes:** campylobacter jejuni spread by contaminated food or direct contact with infected animals or people (see [note 2](#))

**Exclude and/or Seek Medical Advice:** see “When to exclude” for [Gastrointestinal Symptoms — Diarrhea](#) (see [note 5](#))

**Readmit when all the criteria listed are met:** See “When to readmit” for [Gastrointestinal Symptoms — Diarrhea](#)

## Cellulitis

**What you see:** red, warm, tender, swelling of any body part, often at the site of an injury or cut

**Causes:** bacterial infection spread by contact of bacteria with an opening in the skin

**Exclude and/or Seek Medical Advice:** fever (see [note 1](#)) and behavioral change; pain at site; increasing swelling; unable to participate

**Readmit when all the criteria listed are met:** under treatment; able to participate

## Chicken Pox

**What you see:** fever; runny nose; cough; rash (pink bumps, blisters and scabs)

**Causes:** varicella-zoster virus; spread by person-to-person contact and airborne droplets

**Exclude and/or Seek Medical Advice:** as soon as suspected (see notes 5, 6, 8)

**Readmit when all the criteria listed are met:** 6 days after onset of rash or sooner if all lesions are crusted and dry

## Coxsackievirus (hand, foot and mouth syndrome)

**What you see:** fever sore throat; runny nose, cough; tiny blisters in mouth, on palms of hands, and soles of feet/sore muscles; stomachache, diarrhea; pink eye

**Causes:** coxsackievirus spread by fecal/oral and respiratory routes

**Exclude and/or Seek Medical Advice:** fever (see note 1) and behavior change; unable to participate

**Readmit when all the criteria listed are met:** child with continuing fever and behavior change has been seen by physician who says child may return; able to participate

## Croup

**What you see:** barking cough; noisy/difficulty breathing; hoarseness; fever; difficulty feeding; also may have cold symptoms

**Causes:** several types of viruses; rarely bacteria; spread by droplets of respiratory secretions; occasionally allergies

**Exclude and/or Seek Medical Advice:** fever (see note 1) and behavioral change; unable to participate; difficulty with breathing and/or feeding

**Readmit when all the criteria listed are met:** child with continuing fever and behavior change has been seen by physician who says child may return; able to participate; breathing with little or no trouble

## Cryptosporidiosis

**What you see:** diarrhea, abdominal pain; fever; poor appetite, weight loss

**Causes:** cryptosporidium spread by infected water, animals and person-to-person

**Exclude and/or Seek Medical Advice:** See "When to exclude" for [Gastrointestinal Symptoms — Diarrhea and Abdominal Pain](#)

**Readmit when all the criteria listed are met:** See "When to readmit" for [Gastrointestinal Symptoms — Diarrhea and Abdominal Pain](#)

## Cytomegalovirus

**What you see:** often no symptoms; fever, swollen glands; fatigue, jaundice (yellowing of the skin and whites of eyes)

**Causes:** cytomegalovirus; spread by person-to-person contact with body fluids

**Exclude and/or Seek Medical Advice:** fever (see note 1) and behavior change; unable to participate

**Readmit when all the criteria listed are met:** child with continuing fever and behavior change has been seen by physician who says child may return; able to participate

## E

### Eczema

**What you see:** dry, scaling, itching, red patches especially on neck, arms and legs (may be anywhere)

**Causes:** underlying skin condition often inherited which is aggravated by contact with certain substances and dryness

**Exclude and/or Seek Medical Advice:** unable to participate; oozing lesion from skin infection (impetigo)

**Readmit when all the criteria listed are met:** If infected, 24 hours after treatment began.

## F

### Fifth disease

**What you see:** headache; body aches; sore throat; fever; chills; rash (on face with a slapped cheek appearance; "lacy" pattern over body. May come and go over weeks to months); fatigue

**Causes:** parvovirus B19 spread by respiratory secretions

**Exclude and/or Seek Medical Advice:** fever (see [note 1](#)) and behavior change; unable to participate

**Readmit when all the criteria listed are met:** child with continuing fever and behavior change has been seen by physician who says child may return; able to participate; after the rash appears

## G

### Giardiasis

**What you see:** diarrhea; gas; distended belly; poor appetite; weight loss

**Causes:** giardia lamblia, a germ that infects the intestine and is spread via the feces; spread by fecal/oral contact

**Exclude and/or Seek Medical Advice:** See "When to exclude" for [Gastrointestinal Symptoms/Diarrhea](#) (see notes 4, 5)

**Readmit when all the criteria listed are met:** See "When to readmit" for [Gastrointestinal Symptoms/Diarrhea](#)

# H

## Haemophilus Influenzae type b (Hib) infections

**What you see:** fever; lethargy; poor feeding; vomiting; irritability; stiff neck; rapid onset in difficulty breathing and swallowing; warm, red, swollen joints; cough; warm, red/purple area of skin (especially cheeks or eyes)

**Causes:** haemophilus influenzae type b bacteria spread by person-to-person contact and airborne droplets

**Exclude and/or Seek Medical Advice:** As soon as expected (see notes 5, 6, 7)

**Readmit when all the criteria listed are met:** child with continuing fever and behavior change has been seen by physician who says child may return; able to participate; if Health Department recommends giving medicine to exposed children and staff, they may return after receiving medication

## Hepatitis A

**What you see:** fever; jaundice (yellowing of the skin and whites of the eye); loss of appetite, nausea; weakness; dark brown urine; young children may show few or none of these symptoms

**Causes:** hepatitis A virus spread by fecal/oral contact

**Exclude and/or Seek Medical Advice:** As soon as expected (see notes 5, 6, 7)

**Readmit when all the criteria listed are met:** 1 week after onset of illness, after immune globulin has been administered to appropriate children and staff as directed by Health Dept.

## Hepatitis B

**What you see:** fever; jaundice (yellowing of the skin and whites of the eye); loss of appetite, nausea; joint pain; rash; weakness; young children may show few or none of these symptoms

**Causes:** hepatitis B virus spread by blood, sexual contact, less often, saliva, contact with open sores

**Exclude and/or Seek Medical Advice:** fever (see note 1) and behavior change; unable to participate; weeping skin lesions that cannot be covered; biting or scratching behavior; bleeding problems (see notes 5, 6, 7)

**Readmit when all the criteria listed are met:** child with continuing fever and behavior change has been seen by physician who says child may return; able to participate; skin lesions that are dry or covered

## Herpes Simplex

**What you see:** fever; painful, small, fluid filled blisters on mouth, gums, lips

**Causes:** herpes virus

**Exclude and/or Seek Medical Advice:** fever (see note 1) and behavior change; unable to participate; weeping skin lesions that cannot be covered; drooling

**Readmit when all the criteria listed are met:** child with continuing fever and behavior change has been seen by physician who says child may return; able to participate; no drooling or exposed open sores

## HIV (AIDS Virus)

**What you see:** failure to grow and develop well; enlarged lymph nodes; swelling of salivary glands, frequent infections of many types including pneumonia, diarrhea and thrush

**Causes:** human immunodeficiency virus spread by blood and sexual contact

**Exclude and/or Seek Medical Advice:** fever (see note 1) and behavior change; unable to participate; weeping skin lesions that cannot be covered; bleeding problems

**Readmit when all the criteria listed are met:** child with continuing fever and behavior change has been seen by physician who says child may return; able to participate; skin lesions that are dry or covered

## I

### Impetigo

**What you see:** red, cracking, oozing blister-like pimples or circular scaling rash; often occurs on face but may be anywhere

**Causes:** bacterial infection spread by contact with infected people or contaminated surfaces

**Exclude and/or Seek Medical Advice:** as soon as suspected

**Readmit when all the criteria listed are met:** 24 hours after treatment is begun

### Influenza

**What you see:** fever; chills; headache; sleepiness; muscle aches; cough; sore throat; nausea; vomiting; nasal congestion; abdominal pain

**Causes:** influenza virus spread by direct contact or contact with articles recently touched by an infected person and by airborne droplets

**Exclude and/or Seek Medical Advice:** fever (see note 1) and behavior change; unable to participate

**Readmit when all the criteria listed are met:** child with continuing fever and behavior change has been seen by physician who says child may return; able to participate

## L

### Lice

**What you see:** lice (sesame seed size insects) on scalp or hair shaft; nits (eggs) deposited on hair shaft near scalp especially top of head, behind ears, nape of neck

**Causes:** head louse, spread by direct contact with infected people or with their combs, brushes, hats

**Exclude and/or Seek Medical Advice:** as soon as suspected (see notes 5, 6, 7)

**Readmit when all the criteria listed are met:** 24 hours after treatment is begun and all nits have been removed - may want to continue head checks for 10-14 days to ensure no new hatching of nits

# M

## Measles

**What you see:** fever; cough; runny nose; watery eyes/pink eye; rash (brownish red and blotchy - begins on face and spreads down body); white spots in mouth (Koplik spots)

**Causes:** measles virus spread by direct contact with infectious droplets or airborne particles

**Exclude and/or Seek Medical Advice:** as soon as suspected (see notes 5, 6, 7)

**Readmit when all the criteria listed are met:** 6 days after onset of rash

## Meningitis

**What you see:** fever; lethargy; poor feeding; vomiting; irritability; headache; stiff neck

**Causes:** many types of viruses and bacteria spread by contact with people, animals, insects or surfaces contaminated by the virus or bacteria

**Exclude and/or Seek Medical Advice:** as soon as suspected (see notes 5, 6, 7)

**Readmit when all the criteria listed are met:** child with continuing fever and behavior change has been seen by physician who says child may return; able to participate; if Health dept. recommends giving medicine to exposed children and staff, they may return after receiving medication.

## Mononucleosis

**What you see:** fever; sore throat; fatigue; swollen lymph nodes

**Causes:** Epstein-Barr virus close personal contact

**Exclude and/or Seek Medical Advice:** fever (see note 1) and behavior change; unable to participate

**Readmit when all the criteria listed are met:** child with continuing fever and behavior change has been seen by physician who says child may return; able to participate

## Mumps

**What you see:** fever; swelling of 1 or more salivary glands (especially at the angle of the jaw); earache; headache

**Causes:** mumps virus spread by direct contact with virus onto mucous membranes

**Exclude and/or Seek Medical Advice:** as soon as suspected (see notes 5, 6, 7)

**Readmit when all the criteria listed are met:** nine days after onset of swelling

## P

### Pertussis (Whooping Cough)

**What you see:** runny nose; coughing spells; vomiting

**Causes:** bordetella pertussis bacteria spread by close contact with airborne droplets from someone with the disease

**Exclude and/or Seek Medical Advice:** as soon as suspected (see notes 5, 6, 7)

**Readmit when all the criteria listed are met:** three weeks after onset of cough or after 5 days of proper antibiotic therapy

### Pneumonia

**What you see:** cough; rapid breathing; unable to participate

**Causes:** bacterial or viral infection of the lungs

**Exclude and/or Seek Medical Advice:** as soon as suspected

**Readmit when all the criteria listed are met:** able to participate

### Poison Ivy

**What you see:** itchy, red rash with blisters on exposed surfaces (history of exposure within 3 days)

**Causes:** contact with chemicals found in rhus plants: poison oak, poison ivy, poison sumac

**Exclude and/or Seek Medical Advice:** unable to participate; oozing lesions from skin infection (impetigo)

**Readmit when all the criteria listed are met:** If infected, 24 hours after treatment

## R

### Ringworm

**What you see:** skin: reddish scaling circular patches with raised edges and central clearing or light or dark (non-red) patches involving the face and upper trunk or cracking, peeling of skin between toes; scalp - redness, scaling of scalp with broken hairs or patches of hair loss

**Causes:** fungus infection spread by contact with infected humans, animals or surfaces touched by infected individuals

**Exclude and/or Seek Medical Advice:** as soon as suspected

**Readmit when all the criteria listed are met:** 24 hours after treatment is begun - oral medication given to treat scalp, cream given to treat skin

## Roseola

**What you see:** usually in a child under 24 months, fever for 3 or 4 days, followed by a rash for 1-2 days

**Causes:** human herpesvirus 6 method of spread is probably contact with infected secretions

**Exclude and/or Seek Medical Advice:** fever (see note 1) and behavior change; unable to participate

**Readmit when all the criteria listed are met:** child with continuing fever and behavior change has been seen by physician who says child may return; able to participate

## Rotavirus

**What you see:** vomiting; diarrhea; may have cough, runny nose; low-grade fever

**Causes:** virus - transmitted by feces or possibly airborne particles

**Exclude and/or Seek Medical Advice:** see "When to exclude" for [Gastrointestinal Symptoms - Vomiting/Diarrhea](#)

**Readmit when all the criteria listed are met:** see "When to readmit" for [Gastrointestinal Symptoms - Vomiting/Diarrhea](#)

## Rubella

**What you see:** red rash; joint pain; enlarged lymph nodes; sometimes no symptoms

**Causes:** virus spread by direct contact or infected droplets

**Exclude and/or Seek Medical Advice:** as soon as suspected (see notes 5, 6)

**Readmit when all the criteria listed are met:** 7 days after onset of rash

# S

## Salmonellosis

**What you see:** diarrhea; abdominal pain; constipation; fever; fatigue; poor appetite

**Causes:** bacteria spread by contact with contaminated food, surfaces, water, person-to-person, contact with infected animals

**Exclude and/or Seek Medical Advice:** see "When to exclude" for [Gastrointestinal Symptoms - Vomiting/Diarrhea](#) (see notes 5, 9)

**Readmit when all the criteria listed are met:** see "When to readmit" for [Gastrointestinal Symptoms - Vomiting/Diarrhea](#)

## Scabies

**What you see:** extremely itchy red bumps or blisters in a thread like line, commonly between fingers/toes but can appear anywhere; very varied appearance in young children

**Causes:** mites, spread by person-to-person contact

**Exclude and/or Seek Medical Advice:** as soon as suspected (see note 3)

**Readmit when all the criteria listed are met:** 24 hours after treatment is begun

## Scarlet Fever

**What you see:** fever, rash, red, bumpy tongue (like a strawberry)

**Causes:** bacteria - streptococcus spread by direct contact with droplets of respiratory secretions

**Exclude and/or Seek Medical Advice:** as soon as suspected (see note 3)

**Readmit when all the criteria listed are met:** 24 hours after antibiotic treatment is begun

## Streptococcus

**What you see:** sore throat; skin infections (impetigo); other tissue infections

**Causes:** bacteria - streptococcus spread by direct contact with droplets of respiratory secretions

**Exclude and/or Seek Medical Advice:** as soon as suspected (see note 3)

**Readmit when all the criteria listed are met:** 24 hours after antibiotic treatment is begun

## Shigellosis

**What you see:** diarrhea; fever; headache; convulsions; abdominal pain; bloody stool; mucus in stool

**Causes:** bacteria spread by oral contact with fecal contaminated surfaces; person-to-person contact; houseflies that fly from feces to food

**Exclude and/or Seek Medical Advice:** see "When to exclude" for **Gastrointestinal Symptoms - Diarrhea**; if shigella is found in the stool; any child with diarrhea in a facility where someone has had shigella (see note 5)

**Readmit when all the criteria listed are met:** see "When to readmit" for **Gastrointestinal Symptoms - Diarrhea**; when child is on medication and 3 stool cultures are negative

# T

## Thrush

**What you see:** white patches in the mouth

**Causes:** yeast

**Exclude and/or Seek Medical Advice:** no need to exclude

## Tuberculosis (TB)

**What you see:** often no symptoms; cough; fever; weight loss

**Causes:** mycobacterium tuberculosis spread by inhaling droplets coughed into the air by infected adult

**Exclude and/or Seek Medical Advice:** an adult who is diagnosed with active infection with cough, fever; unable to participate (see note 5)

**Readmit when all the criteria listed are met:** after treatment begins; fever gone and health official states person is non-infectious

## Other Diagnoses

Consult a pediatric health provider or the local health department.

### Notes for Specific Conditions

1. A child with a fever is defined as a child with:
  - an oral temperature of 101 F or greater or
  - a rectal temperature of 102 F or greater or
  - an axillary (armpit) temperature of 100 F or greater or
  - an aural (ear) thermometer reading that is equal to the oral or rectal temperatures
2. Campylobacter is a bacterium that lives inside farm animals, mostly poultry. It spreads by eating improperly cooked poultry, contaminated water and unpasteurized milk. It also can be spread by contact with fecal material from infected animals or people.
3. Tell parents and staff if a case occurs.
4. If there is a Giardia outbreak, try to identify and treat all infected family members, child care workers and children who have symptoms. Treatment of carriers without symptoms is not helpful in controlling outbreaks.
5. Notify parents, staff and local health department if a case occurs.
6. This is a vaccine preventable disease.
7. Contact your pediatric health provider. Sometimes these diseases may be prevented by either medication or injection if you or your child has been exposed.
8. High risk contacts (such as those with abnormal immune systems who have not had chicken pox) may need to receive an injection (Varicella-Zoster Immune Globulin) within 96 hours after exposure.
9. Salmonella is a type of bacterium. Many species of salmonella have been identified which can cause disease. *Salmonella typhi* causes typhoid fever and is found only in humans. It is spread by contact with feces of infected persons. The other salmonella species live inside livestock and pets. They are spread by eating contaminated food, water or milk or by contact with infected animals. If *Salmonella typhi* is found in a staff member or in a child enrolled in a child care center, all children and staff members should have stool cultures. All infected people should be excluded and should contact their health provider. (Those infected may be readmitted when three consecutive stool cultures are negative and when diarrhea readmit parameters have been met.) If a salmonella species other than *Salmonella typhi* is found in the stool of a staff member or child, exclusion is based on "when to exclude" for **Gastrointestinal Symptoms - Diarrhea**. Those infected with other salmonella species may be readmitted when diarrhea readmit parameters have been met.

***Remember, use your good judgment in dealing with your sick child.***