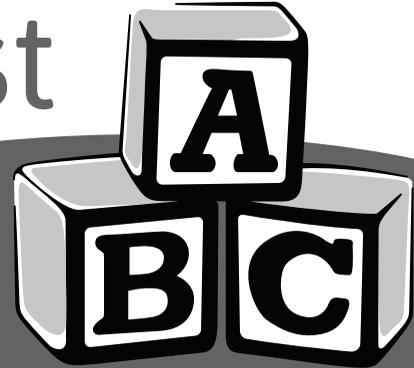


Updated January 31, 2014

# Childcare Exclusion List



This also serves as the **School Exclusion List** for kindergarteners (K3, K4, and K5) and medically fragile students in grades 1-12.

*If you think that your child has an illness that can be spread to others, please keep him or her home from school or out-of-home childcare. Contact your doctor or clinic.*

Children with the following conditions do not have to be excluded from school or out-of-home childcare, **if they feel well enough to participate in regular activities:**

- Canker Sores
- Chronic Hepatitis B or C
- Colds or coughs, without fever or other signs of illness
- Cold Sores
- Croup
- Disease spread by mosquitos: Malaria, West Nile Virus
- Diseases spread by ticks: Babesiosis, Ehrlichiosis, Lyme Disease, Rocky Mountain Spotted Fever, Tularemia
- Ear Infection
- Fifth Disease
- HIV infection
- MRSA, if child is only a carrier
- Pinworms
- Rash without fever or behavior change
- Roseola, once the fever is gone
- Thrush
- Urinary Tract Infection
- Warts, including Molluscum contagiosum
- Yeast Diaper Rash

## Help your child stay healthy and ready to learn.

We hope that your child never has to miss school or childcare because of illness or disease. The best protection from disease is prevention. You can help prevent many illnesses by making sure your child receives immunizations, and by making sure your child washes his or her hands often.

## Dear Parents:

Exclusion Lists indicate for which illnesses a child must be kept out of school or out-of-home childcare. This is called exclusion. The lists also indicate what notes are needed for children to return to school or childcare after certain illnesses.

### The information in this brochure applies to:

- All children in out-of-home childcare,
- All students in 3, 4, and 5-year-old kindergarten, and
- Medically fragile students in 1st through 12th grades. Medically fragile students are those students with special health care needs and/or developmental delays who require close assistance with feeding or personal hygiene activities. You and your child's school will determine if your child is considered medically fragile.

If you have any questions about the **Childcare Exclusion List**, please contact your child's school or your local health department.

## Questions to Ask When Your Child is Sick:

1. Does your child's illness keep him/her from comfortably taking part in activities?  Y  N
2. Does your sick child need more care than the staff can give without affecting the health and safety of other children?  Y  N
3. Could other children get sick from being near your child?  Y  N

**If the answer to any of these questions is "Yes," please keep your child out of school or childcare.**

## When should sick children stay home from school?

If your child feels too sick to go to school, or has one of the conditions on this form, please keep her home.

### Does my child need to stay home when he just has a cold?

Most children with mild colds who have no fever and who feel well enough to go to school do not need to stay home. Most colds spread in the 1-3 days before children show symptoms such as a runny nose or slight cough.

### Does my child need to be out of school if she has pinkeye?

It is helpful to think of pinkeye like the common cold. It can be spread to others, but it usually clear up without medicine. The best way to keep a child from spreading pinkeye is to encourage good handwashing. If your child has pinkeye and a fever or severe eye pain, she needs to see a health care provider.

### How long will my child need to stay home if he is sick?

The inside of this brochure explains how long children should stay home after they become ill with excludable conditions.

### Would my child have to stay out of school if she was not sick?

Sometimes children will also have to stay home from school if they are exposed to some diseases that are preventable by vaccines. Your school or DHEC will discuss this with you.

### What does my child need to come back to school?

The list inside this brochure shows whether a **medical note** or **parent note** is required for your child to return to school after exclusion for illness.

### What about other activities like sports or PE?

Students with illnesses spread by close contact, like lice, scabies, shingles, or staph or strep skin infections, may not be allowed to participate in some sports or physical education activities.

# Childcare Exclusion List: A Quick Reference for Parents

## **Bronchiolitis or RSV**

Keep children with **bronchiolitis** or **RSV** home while they have a fever or are too sick to play with other children.

## **Chicken Pox / Varicella**

Children with chicken pox may return with a **parent note** once all of the sores and blisters are dried & scabbed over. If there are no scabs, the child may return when no new sores appear for 24 hours.

## **Cytomegalovirus (CMV)**

A health care provider must clear a child with CMV to return to school or childcare.

**Diarrhea:** For most kinds of diarrhea (defined as 3 or more loose stools in 24 hours):

**Children should stay home** until diarrhea stops for 24 hours, or until a doctor clears the child to return to school. Your child can return with a **parent note**.

Children must have a **medical note** to return to school after having diarrhea that contains blood or mucus.

Students who can use the restroom or whose stools are contained in diaper-type underwear do not have to be out of school if the diarrhea is known to be from a non-contagious condition, or if the diarrhea continues after the child completes antibiotics for a diarrhea-causing illness.

A medically fragile child or child who needs help with using the bathroom may need to be out of school if her condition makes it hard for her caretakers to keep the classroom clean.

## **Diarrhea from Diagnosed Infections**

**Campylobacter, Giardia, Norovirus, Rotavirus, and most types of Salmonella:** Children may return with a **parent note** after diarrhea stops for 24 hours.

**E. coli:** for the most severe type of *E. coli*, students of any age must be out of school until the diarrhea stops and 2 lab tests taken at least 24 hours apart test negative for **E. coli O157:H7**. A doctor must clear the child to return to school.

**Salmonella Typhi (Typhoid fever):** Children with Typhoid fever must be out of school until the diarrhea stops and 3 lab tests taken at least 24 hours apart test negative for *Salmonella Typhi*. A doctor must clear the child to return to school.

**Shigella:** Students of any age must be out of school until the diarrhea stops and a lab test is negative for *Shigella*. A doctor must clear the student to return to school.

## **Fever By Itself**

**Infants under 4 months old:** Keep home for rectal temperature (taken in the bottom) 101 or higher.

**Children over 4 months old:** Keep your child home for a fever 101 or higher by mouth, 100 or higher if taken

under the arm, or 102 or higher if taken in the bottom.

Children can return with a **parent note** when the fever is gone.

## **Fever with Rash, Behavior Change or Other Symptoms**

Take your child to a doctor or clinic for any fever if he or she also has signs of severe illness such as a rash, change in behavior, earache, vomiting, confusion, sore throat, or irritability. A **medical note** is required to return.

## **Flu / Influenza or Influenza-Like Illness (ILI)**

A student with the flu will be excluded for a fever of 100° F with cough and/or sore throat until he is fever free for at least 24 hours, without any fever medicines.

## **German Measles / Rubella / 3 Day Measles**

Keep your child home until 7 days after rash starts. He may return with a **medical note**.

## **Hand, Foot, and Mouth Disease**

Students with hand, foot, and mouth disease should be out of school while they have fever, excessive drooling, difficulty swallowing, or are too sick to do routine school activities.

## **Head Lice**

Children with crawling lice or nits (eggs) ¼ inch or closer to the scalp may be sent home at the end of the day, if head-to-head contact with other children can be avoided. Otherwise, they may be excluded immediately.

Your child may return with a **parent note** after her first treatment with a school-approved lice-removal product, if there are no active lice crawling on your child's head.

The school or center should check your child 7 days after treatment for any newly hatched crawling lice. If any are present, your child will have to be re-treated for lice in order to come back to school or childcare.

## **Hepatitis A / Yellow Jaundice**

Children with acute hepatitis A may return with a **medical note** 1 week after the start of the jaundice.

## **HIB (Haemophilus influenzae Type B)**

Students with proven HIB infection need to be out of school until a health care provider clears the student to return.

## **Impetigo**

If your child has dry, honey-colored crusty sores that can be covered, he will be sent home at the end of the school day. If the sores are weepy, oozing or wet, or cannot be covered and kept dry, the child will be sent home immediately.

He may return after receiving antibiotics for 24 hours, if the sores have stopped oozing and are starting to get smaller, or if the sores can be covered completely with a watertight dressing. A **parent note** is needed to return to school.

## **Measles / Red Measles / 10 Day Measles**

Children with measles can return with a **medical note** 4 days after the rash begins, if they have no fever and feel well enough to participate in regular school activities.

## **Meningitis**

A student with signs of meningitis (high fever, rash, stiff neck) must remain out of school until a health care provider says that the student may return.

## **Mononucleosis (Mono)**

Your child's physician will decide when your child is well enough to come back to childcare or school.

## **Mouth Sores inside the mouth**

Children with sores inside the mouth, who also drool, should stay home until their health care provider says that the sores are not contagious. A **medical note** is required.

## **Mumps**

Children with mumps can return with a **medical note** 5 days after the beginning of swelling.

## **Pinkeye / Conjunctivitis**

Children with pinkeye do not have to stay home unless there is a recommendation from the health department or the child's health care provider. A child with pinkeye should see a health care provider if she has fever or severe eye pain.

## **Rash**

Students who have a rapidly spreading rash or a rash with fever or behavior change are excluded from school immediately. A **medical note** is required to return.

## **Ringworm**

Children with **ringworm of the scalp** must remain out of school from the end of the day until they have begun treatment with a *prescription oral antifungal medication*. Your child may return with a **medical note**.

Children with **ringworm of the body** do not have to be out of school or childcare, as long as the affected area stays completely covered by clothing. Treatment is recommended.

## **Scabies**

Children with scabies should be out of school until treatment/medication has been applied. A **medical note** is required to return.

## **Shingles**

Keep children home who have shingles sores or blisters that cannot be covered. Your child may return with a **parent note** once the sores are dried or scabbed.

## **Skin Infections from Staph or Strep (includes MRSA) or Herpes Gladiatorum**

Students may attend if the sores are covered with clothes or dressings, and if the drainage does not come through clothes or dressing.

## **Stomach Ache (Severe) or Abdominal Pain**

A child with severe stomach pain for 2 hours or more should see a health care provider, especially if the child has a fever.

## **“Strep Throat” / Streptococcal Pharyngitis**

Your child with “Strep Throat” can return to school with a **medical note** 24 hours after starting antibiotics, if there is no fever.

## **Sty (or Styte)**

A child with a draining/oozing sty that cannot be covered should remain home until the draining stops.

## **Tuberculosis (TB)**

A child with active TB should be kept home until the doctor treating the TB writes a **medical note** that says that the child is no longer contagious.

## **Vomiting**

A child who has vomited 2 or more times in 24 hours should stay home until the vomiting stops, unless she is known not to be contagious.

## **Whooping Cough / Pertussis**

Children with whooping cough can return to school with a **medical note** after completing 5 days of prescribed antibiotics, unless directed otherwise by DHEC or your school nurse.

*If your child has not received immunizations to protect against diseases like Measles, Mumps, German Measles, or Chickenpox, he or she may need to be out of school if there are cases of these conditions in the school. Your school nurse will provide more information if there is an exposure or outbreak.*



South Carolina Department of Health  
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[www.scdhec.gov/health/disease/exclusion.htm](http://www.scdhec.gov/health/disease/exclusion.htm)