

## **Your child has been exposed to the following:**

### **IMPETIGO**

#### **What You See:**

- Skin sores with a honey- colored scab
- Oozing or drainage from the scab
- Normally found on the face, around the nose and mouth

#### **What to Do:**

- Child needs to be seen by a doctor
- Medication is usually prescribed-follow doctor's treatment plan
- Child and caregivers' hands should be washed frequently

#### **When Can Child Return to School?**

- Child can return 24 hours after the medication is started, or a release is given by a doctor

## **Your child has been exposed to the following:**

### **FIFTH DISEASE**

#### **What You See:**

- Red, lace-like rash on the cheeks, backs of arms, legs, and buttocks
- Fever, headache, and sleepiness

#### **What to Do:**

- Call your child's doctor. The doctor can give advice on treatment and care for your child

#### **When Can Child Return to School?**

- No exclusion unless child meets other exclusion criteria
- If excluded due to presence of other exclusion criteria, resolution of exclusion criteria

## **Your child has been exposed to the following:**

### **CHICKEN POX**

#### **What You See:**

- Itchy, blistery rash with mild fever
- Blisters can appear in clumps usually on the stomach, chest and back
- After several days, blisters scab over

#### **What to Do:**

- Call your child's doctor. The doctor can give advice on treatment and care for your child
- Calamine lotion or baking soda in cool water baths can help reduce itching

#### **When Can Child Return to School?**

- Child should stay home until all the blisters are crusted with no oozing, usually 5-6 days and resolution of exclusion criteria

## **Your child has been exposed to the following:**

### **SCABIES**

#### **What You See:**

- Small red bumps on the skin; usually seen between the fingers, toes and armpits
- Severe itching, worse at night

#### **What to Do:**

- Treatment may be delayed until the end of the day
- Call your child's doctor. The doctor can give advice on treatment and care for your child

#### **When Can Child Return to School?**

- As long as treatment starts before returning the next day, no exclusion is needed

## **Your child has been exposed to the following:**

### **HAND, FOOT and MOUTH DISEASE & HERPANGINA**

#### **What you will see:**

- Fever, small round blisters in the mouth, on the tongue, or inside the cheeks
- Small blisters on the palms of hands, soles of feet, and between fingers and toes
- Child may drool from mouth sores

#### **What to do:**

- Take child to the doctor to confirm diagnosis
- Ask doctor about using over the counter pain or fever medications
- Child and their caregivers should wash hands regularly

#### **When Can Child Return to School?**

- No exclusion unless child meets other exclusion criteria or is excessively drooling with mouth sores
- If excluded due to presence of other exclusion criteria, resolution of exclusion criteria

## **Your child has been exposed to the following:**

### **STREP THROAT**

#### **What you will see:**

- Scratchy, sore throat
- Difficulty swallowing
- Fever
- Enlarged glands in neck

#### **What to do:**

- Child needs to be seen by a doctor
- Take **all** prescribed medicines as scheduled and for as many days as the doctor directed

#### **When Can Child Return to School?**

- Resolution of exclusion criteria and after 24 hours of antibiotic

## **Your child has been exposed to the following:**

### **DIARRHEA (INFECTIOUS)**

#### **Shigatoxin producing E.coli (STEC), Shigellosis, Giardia & Cryptosporidiosis**

#### **What you will see:**

- Frequent and watery stools
- Cramping, belly pain
- Headache, nausea, vomiting, low-grade fever

#### **What to do:**

- Child needs to be seen by a doctor
- Follow medication schedule prescribed by the doctor
- Wash hands thoroughly after using the bathroom and before handling food
- Wash the hands of infant or child after diapering or using the bathroom

#### **When Can Child Return to School?**

- Must follow the discretion of the Public Health Department

## **Your child has been exposed to the following:**

### **DIARRHEA (NON-INFECTIOUS)**

#### **What you will see:**

- Child's bowel movements are more frequent, loose, and watery than usual

#### **What to do:**

- Make sure the child gets plenty of rest and give a diet of clear liquids
- Breastfeeding can continue
- If symptoms continue, fever occurs, or if blood appears in stool, call your doctor
- Child and caregivers should wash their hands regularly

#### **When Can Child Return to School?**

- Child can return when their stool can be contained in their diaper or if the toileted child has no more than 2 loose stools above the normal for that child in 24 hours and resolution of exclusion criteria



## **Your child has been exposed to the following:**

### **FEVER**

#### **What you will see:**

- Increase in body temperature, above normal
- Temperature of 100.4 degrees or above

#### **What to do:**

- Call your doctor if your child is uncomfortable or has a change in behavior
- If a child is under 8 weeks of age and has an armpit temperature of 100 degrees, call your doctor

#### **When Can Child Return to School?**

- Children over 4 months old without signs of illness do not need to be excluded
- If excluded due to presence of other exclusion criteria, resolution of exclusion criteria.

## **Your child has been exposed to the following:**

### **HEPATITIS A**

#### **What you will see:**

- Stomach pain
- Fever
- Skin and whites of eyes may appear yellow

#### **What to do:**

- Child needs to be seen by a doctor immediately

#### **When Can Child Return to School?**

- A release must be given by a doctor
- For Chronic Hepatitis B, no exclusion is necessary unless other exclusion criteria is met, then child may return after resolution of exclusion criteria

## Your child has been exposed to the following:

### HEAD LICE

#### What you will see:

- Lice (bugs) and eggs (nits) in hair near scalp especially on top of head, behind ears, & back of neck
- Itchy scalp

#### What to do:

- Ask for a copy of a **14-Day Head Lice Treatment** handout to help you with directions on what to do
- Use lice pesticide shampoo (preferable treatment method) on **Day 1** of treatment schedule. On **Days 2-7**: Wash with regular shampoo and cream rinse daily, combing hair with a fine-toothed comb while cream rinse is still in the hair. On **Day 8**: Wash with pesticide shampoo again. **Day 9-14**: Wash with regular shampoo and cream rinse daily, combing hair with a fine-toothed comb while cream rinse is still in the hair.

#### When Can Child Return to School?

- Treatment must be given; child's hair is checked the next day (outside the classroom)
- Exclude only if child has not had a medically approved treatment by the time they return.

## **Your child has been exposed to the following:**

### **RINGWORM**

#### **What you will see:**

- Ring shaped, scaly spot on skin or head
- May have a lighter spot on skin or flaky patch of baldness on head
- Raised donut-shaped appearance

#### **What to do:**

- Cover the area to prevent spreading of fungus.
- Ringworm spreads by direct skin to skin contact
- Do not let your child share personal items (combs, brushes, clothing, towels, bedding)
- Dry skin thoroughly after washing & wash bathroom surfaces & toys daily
- Child should not go to swimming pools or play contact sports.
- Cover lesions if possible

#### **When Can Child Return to School?**

- Child may be readmitted after treatment has begun.

## **Your child has been exposed to the following:**

### **PINWORM**

#### **What you will see:**

- Anal itching
- Irritability, sleeplessness, and anal irritation due to scratching
- Worms present in child's stool

#### **What to do?**

- Child must be seen by doctor; doctor will discuss if medication is needed
- Change child's bed linen and underwear daily
- Cut child's fingernails short and discourage scratching
- Clean and vacuum floors of bedrooms and bathrooms
- Frequent hand washing

#### **When can your child go back to Head Start?**

- Doctor must confirm diagnoses and provide a release
- Child can return after treatment and is no longer itching or irritable

## **Your child has been exposed to the following:**

### **MENINGITIS**

#### **What you will see:**

- Fever
- Headache & stiff neck
- Newborns/small infants appear slow or inactive
- Irritable
- Vomiting
- Decreased Appetite

#### **What to do:**

- Child needs to be seen by a doctor immediately

#### **When can your child go back to child care?**

- A release is given by a doctor

## **Your child has been exposed to the following:**

### **RESPIRATORY ILLNESS**

#### **Influenza, Pneumonia, COVID-19 & RSV**

#### **What you will see:**

- Symptoms can worsen rapidly in some children and may include:
  - Rapid breathing, Difficulty breathing, Gasping for breath, Wheezing, Coughing

#### **What to do:**

- Take child to doctor
- Frequent Hand washing
- Avoid contact with an infant or child if you have a cold or fever
- RSV is spread very easily. Touching, kissing, and shaking hands with an infected person can spread RSV.

#### **When can your child go back to child care?**

- When child is fever free for 24 hours without use of a fever reducing medication
- When respiratory symptoms are mild and improving
- Upon resolution of exclusion criteria

## **Your child has been exposed to the following:**

### **COMMON COLD**

#### **What you will see (signs & symptoms):**

- Sore throat
- Runny nose
- Watery eyes
- Sneezing
- Chills
- Sleepy or tired feeling

#### **What to do:**

- Child needs plenty of rest
- Ask doctor about using over the counter pain or fever medications
- Child and those caring for him/her should wash their hands regularly

#### **When can your child go back to Head Start?**

- Child can be at Head Start as long as they do not meet exclusion criteria. Otherwise at the resolution of exclusion criteria.



## **Your child has been exposed to the following:**

### **PINK EYE (CONJUNCTIVITIS)**

#### **What you will see (signs & symptoms):**

- Eyes water
- Whites of eyes are red or pink
- Eyes may be itchy or painful
- There may be creamy or yellow discharge from eyes
- Eyelids may be matted after sleep

#### **What to do:**

- Child must be seen by the doctor
- Frequent Hand Washing
- Clean objects at home that are commonly touched; toys, doorknobs, telephones, cuddle blankets, etc.

#### **When can your child go back to child care?**

- Child does not need to be excluded unless health care provider or public health official recommends exclusion.
- Resolution of all exclusion criteria

## **Your child has been exposed to the following:**

### **CROUP**

#### **What you will see:**

- Loud, barking cough
- Cold symptoms, runny nose, fever

#### **What to do?**

- Frequent Hand washing
- Child needs plenty of rest
- Call doctor if child shows symptoms of dehydration: low urine output, few or no tears, sunken eyes, extreme tiredness

#### **When can your child go back to Head Start?**

- Child can be at Head Start as long as he/she can participate easily and is not producing green or yellow mucus (snot).

**Your child has been exposed to the following:**

## **MONONUCLEOSIS**

### **What you will see (signs & symptoms):**

- Fever
- Sore throat
- Swollen glands
- Sleepy or tired feeling

### **What to do?**

- Child needs plenty of rest
- Ask doctor about using over the counter pain medications
- Keep child hydrated

### **When can you child go back to Head Start?**

- Child does not need to be excluded unless fever is present or if child meets exclusion criteria.
- At the resolution of exclusion criteria

**Your child has been exposed to the following:**

## **PERTUSSIS – WHOOPING COUGH**

### **What you will see (signs & symptoms):**

- Runny or stuffed up nose
- Sneezing
- Coughing-more frequently at night
- Gasping for breath

### **What to do?**

- Child needs to be seen by doctor
- Frequent Hand washing

### **When Can Your Child Return to Head Start?**

- After 5 days of antibiotics and resolution of exclusion criteria

## **Your child has been exposed to the following:**

### **ROTAVIRUS and NOROVIRUS**

#### **What you will see (signs & symptoms):**

- Fever
- Nausea and vomiting
- Belly cramps
- Frequent, watery diarrhea

#### **What to do:**

- Babies and toddlers need to be seen by a doctor
- IV fluids will likely be administered to prevent dehydration
- A vaccine is given to infants at 8 weeks of age in order to prevent the virus

#### **When Can Your Child Return to Head Start?**

- A release must be given by a doctor
- Child must be fever and diarrhea free for 24 hours

## **Your child has been exposed to the following:**

### **BED BUGS**

#### **What you will see**

- Bedbugs are small, flat, wingless insects about the size of an apple seed, their color may look off white, tan, red or brown
- Small bites or a cluster of bites on body, usually in a line. Bites look similar to flea bites.

#### **What to do:**

- Inspect sleeping areas furniture, car seats, ect.
- Place clothing, bedding & curtains in dryer for one hour on high heat followed by washing again and drying on high heat. Use mattress encasements. Vacuum
- Contact your landlord or property manager if applicable.

#### **When Can Your Child Return to Head Start?**

- No exclusion from school
- Cover open bite wounds