

Child Illness Policy

Should your child develop one or more of the following symptoms or conditions while at Carle Auditory Oral School, we will contact the parent/guardian to arrange for your child to be picked up. Your child must be picked up as soon as possible. If we are not able to reach a parent/guardian within 15 minutes, we will begin contacting emergency pick – up persons. Please be sure to inform us who will be picking up your child, even if you have listed them as authorized to pick up your child.

Fever: Temperature of 101 F orally.
Temperature of 100 F axillary (under the arm)

May return when: Fever free (non-medicated) for 24 hours

Vomiting: You will be notified after your child has vomited. Your child *must* go home.

May return when: Free from vomiting for 24 hours *Unless vomiting is a known side effect of a prescribed medication

Diarrhea: 1 episode while in attendance (no chronic bowel syndrome or *known side effect of prescribed medication)

May return when: Free from diarrhea for 24 hours *Unless diarrhea is a known symptom of a medically diagnosed condition or is a known side effect of prescribed medication

Conjunctivitis (pink eye): Unusual tearing, redness of eyelid lining, irritation followed by swelling and/or discharge

May return when: Note from physician stating the child does not have conjunctivitis or 24 hours after antibiotic treatment has been initiated.

Skin rashes: Yellowish, unusual or persistent rash, severe itching of body or scalp, potentially infectious skin patches that are crusty, dry, scabbed, weepy or gummy

May return when: Note from physician that child is not contagious or condition has been resolved.

Impetigo: Blistery rash that when blisters are open, produce a thick, golden yellow discharge that dries, crusts and adheres to the skin.

May return: 24 hours after treatment has begun and there is no longer discharge.

Head lice: Tiny insects that live primarily on the head and scalp that appear as tiny white or dark ovals and are especially noticeable on the back of the neck and around the ears.

May return when: Lice and nit free. Student must report to school office for head check before returning to class.

Chicken Pox: Low grade fever, vesicular rash (blister-like rash or bumps)

May return when: Child's blisters must be completely scabbed.

Strep throat: Severe sore throat, fever, headache and swollen glands.

May return: 24 hours after antibiotic treatment has begun.

RSV (Respiratory Syncytial Virus): Infection of the upper and lower respiratory tract ranging from a cold to serious respiratory illness.

May return when: Note from physician that condition has been resolved.

Breathing: Difficult, labored or rapid breathing (over 60 breaths per minute), severe wheezing (especially in infants under 6 months old)

Note: In the event of a respiratory emergency, the child will be taken to Carle Foundation Hospital for evaluation and/or treatment.

May return when: Note from physician that condition has been resolved.

If your child displays any combination of the following symptoms, the teacher may contact you. Then you can best decide treatment for your child.

- Nose: Stuffy, runny nose, watery eyes
- Throat: Sore throat or trouble swallowing
- Non-specific: Exhibits unusual behavior such as cranky, less active, cries more, loss of appetite, generally uncomfortable, severe headache, or stomach ache

Child is being sent home for _____ . Parent Signature: _____

Child may return when _____ . Staff Signature: _____

Date: _____ Time: _____