Deciding when to keep a sick child out of child care can be difficult. The following questions can help guide your decision:

Will the child be able to comfortably participate in the program’s normal activities? Will the child’s illness require more attention than the staff can give? Will the sick child affect the health and safety of other children?

Remember that if sick children are kept at home, everyone will stay healthier.
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**CONJUNCTIVITIS**

- Itchy, painful eyes, or eyelid redness
- Viruses, bacteria, blocked tear ducts. Watery conjunctivitis is common with allergies or the common cold.

**OTITIS MEDIA**

- Earache, slightly above normal or high temperature, or draining from the ear. Infant may indicate pain by rolling his head, pulling his ear, or becoming irritable.
- Bacteria, viruses

**COMMON COLD**

- Rumpy or stuffy nose, sneezing, watery eyes, sore throat, cough, muscle aches, headaches, vomiting, or diarrhea
- Viruses

**STREPTOCOCCAL PHARYNGITIS**

- Severe sore throat, fever, enlarged lymph nodes, or rash
- Streptococcus bacteria, spread through direct contact with saliva or by sneezing or coughing

**COUGH**

- 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
- Viruses, bacteria or parasites, food intolerance, medications, diseases of the bowel. Contagious types spread by direct contact, especially with faces. Wash hands thoroughly after diapering or toileting!

**DIARRHEA**

- Local irritation and itching in anal area, small, white worms in anal area
- Parasites, the child scratches area, contaminates his fingers, and reinflicts himself and others

**INFECTED FOAMES**

- Red, cracking, oozing, blister-like pimples; circular scaling rash (often on face, but may be anywhere)
- Bacteria, spread by contact with infected people or contaminated surfaces

**RINGWORM**

- On skin: red or dark scaling circular patches with raised edges and central clearing; on scalp: red, scaling rash (often on face, but may be anywhere)
- Fungus infection, spread by contact with infected person, animals, or contaminated surfaces

**LICE**

- Itching, small sores at base of hair, visible lice (very small insect) on scalp or hair, visible nits (eggs) on the hair shaft near scalp
- Head louse, spread by direct contact with infected person or by sharing infected person’s combs, brushes, clothing, or bedding

**SCABIES**

- Intense itching, red bumps or blisters, often in a line and often between fingers and toes
- Mites, spread by direct contact with infected person or with infected person’s clothing or bedding

**CHICKEN POX**

- Fever, chills, headache, rash starting on torso and spreading outward, that develops blisters with the appearance of dew drops
- Virus, spread by direct contact with infected person or by airborne droplets, especially 2 days before rash appears until pox have dried

**RINGWORM**

- Usually occurs in children under 24 months; fever for 3 or 4 days, followed by rash for 1 to 2 days
- Human herpes virus 6, spread through contact with infected secretions

**MENINGITIS**

- Severe headache, high fever, poor feeding, vomiting, delirium, stiff neck and back, coma
- Viruses and bacteria, spread by contact with infected person, animal, insect, or with contaminated surfaces
### COMMON CHILDHOOD ILLNESSES

<table>
<thead>
<tr>
<th>CONJUNCTIVITIS</th>
<th>POSSIBLE SYMPTOMS</th>
<th>CAUSES</th>
<th>ACTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>(pink eye)</td>
<td>Itchy eyes, painful eyes, or eyelid redness</td>
<td>Viruses, bacteria, blocked tear ducts. Watery conjunctivitis is common with allergies or the common cold.</td>
<td>Exclude if child is too uncomfortable to participate, the discharge is thick and white or yellow, or the eye is very swollen or discolored. Readmit 24 hours after antibiotic eye drops have been applied.</td>
</tr>
</tbody>
</table>

| OTITIS MEDIA | Earache, slightly above normal or high temperature, or draining from the ear. Infant may indicate pain by rolling his head, pulling his ear, or becoming irritable. | Bacteria, viruses | Exclude if child has fever, looks or acts very ill, there is discharge from ear, or pain lasts more than 3 days. |

| COMMON COLD | Runny or stuffy nose, sneezing, watery eyes, sore throat, cough, muscle aches, headaches, vomiting, or diarrhea | Viruses | Exclude if child is too ill to participate, has fever, has difficulty breathing; symptoms include blood-red or purple rash not associated with injury. |

| STREPTOCOCCAL PHARYNGITIS | Severe sore throat, fever, enlarged lymph nodes, or rash | Streplococcus bacteria, spread through direct contact with saliva or by sneezing or coughing | Exclude until 24 hours after antibiotic treatment has begun and fever has passed. |

| COUGH | 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 | Viruses, bacteria or parasites, food intolerance, medications, diseases of the bowel. Contagious types spread by direct contact, especially with feces. Wash hands thoroughly after diapering or toileting! | Exclude if stools are bloody or black, there is abdominal pain, no urine output for 8 hours, fever, mucous or stools, child appears ill, eyes or skin appear yellow, or stools are not contained in diaper or bowel. Child may need stool culture to determine cause. Beware of dehydration (no urination, dry mouth, no tears, skin loses elasticity). |

| DIARRHEA | 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 | Viruses, bacteria or parasites, food intolerance, medications, diseases of the bowel. Contagious types spread by direct contact, especially with feces. Wash hands thoroughly after diapering or toileting! | Exclude if stools are bloody or black, there is abdominal pain, no urine output for 8 hours, fever, mucous or stools, child appears ill, eyes or skin appear yellow, or stools are not contained in diaper or bowel. Child may need stool culture to determine cause. Beware of dehydration (no urination, dry mouth, no tears, skin loses elasticity). |

| PINWORM | Local irritation and itching in anal area, small, white worms in anal area | Parasites, the child scratches area, contaminates his fingers, and reinfects himself and others | Exclude until treated. |

| INFECTIGO | Red, cracking, oozing, blister-like pimples; circular scaling rash (often on face, but may be anywhere) | Bacteria, spread by contact with infected people or contaminated surfaces | Exclude until 24 hours after treatment has begun. |

| RINGWORM | On skin: red or dark scaling circular patches with raised edges and central clearing; on scalp: red, scaling of scalp with broken hairs or patches of hair loss | Fungus infection, spread by contact with infected person, animals, or contaminated surfaces | Exclude until 24 hours after treatment has begun. |

| LICE | Itching, small sores at base of hair, visible lice (very small insect) on scalp or hair, visible nits (eggs) on the hair shaft near scalp | Head louse, spread by direct contact with infected person or by sharing infected person’s comb, brushes, clothing, or bedding | Exclude until treated; may need second treatment. Through removal of lice is important to determine successful treatment. |

| SCARIES | Intense itching, red bumps or blisters, often in a line and often between fingers and toes | Milbs, spread by direct contact with infected person or with infected person’s clothing or bedding | Exclude until 24 hours after treatment has begun. |

| CHICKEN POX | Fever, chills, headache, rash starting on torso and spreading outward, that develops blisters with the appearance of dew drops | Virus, spread by direct contact with infected person or by airborne droplets, especially 2 days before rash appears until pox have dried | Exclude until blisters have dried and no new ones have appeared within 48 hours. |

| ROSEOLA | Usually occurs in children under 24 months; fever for 3 or 4 days, followed by rash for 1 to 2 days | Human herpes virus 6, spread through contact with infected secretions | Exclude until fever has passed and rash has subsided. |

| MENINGITIS | Severe headache, high fever, poor feeding, vomiting, delirium, stiff neck and back, coma | Viruses and bacteria, spread by contact with infected person, animal, insect, or with contaminated surfaces | Exclude until physician or health department indicates child may return. |