

## Recommended Exclusion Guidelines for Common Communicable Illnesses

Based on the recommendations of the American Academy of Pediatrics, the Canadian Pediatric Society, the Simcoe Muskoka District Health Unit, Toronto Public Health, and York Region Public Health. Refer to local public health authorities for additional information related to communicable diseases and resources on the management and control of infectious diseases in child care settings. NOTE: Return to care is contingent upon the child being well enough to participate fully.

ILLNESS	RECOMMENDED EXCLUSION GUIDELINES
<b>Chickenpox</b>	Stay home until fever free, feeling well, and able to participate fully. Spots are not a reason to keep child at home as these indicate a stage where those affected are now less contagious than before the illness was recognized.
<b>Common Cold</b>	Stay home until fever free, feeling well, and able to participate fully.
<b>Conjunctivitis</b> (Pink Eye)	Stay home until assessed by a doctor. For <b>bacterial</b> conjunctivitis, stay home until 24 hours after start of antibiotic.
<b>Coxsackie Virus</b> (Hand Foot and Mouth Disease)	May return once fever free and feeling well, regardless of rash, as child is most infectious before illness is recognized.
<b>Croup</b>	Stay home until fever free, feeling well, and able to participate fully.
<b>E. Coli</b> (Food Poisoning)	May return after two consecutive stool samples, collected 24 hours apart, are cultured negative.
<b>Fifth Disease</b> (Slapped Cheek)	Stay home until feeling well enough to participate.
<b>Gastroenteritis</b> (Diarrhea, Vomiting, Fever, Cramps)	Stay home until symptom free for 24 hours. <b>NOTE: In the event of enteric outbreak, the exclusionary period will be extended to 48 hours symptom free, or otherwise as directed by local health authority.</b>
<b>Hepatitis A</b> (Infectious Hepatitis, Viral Hepatitis)	Stay home until two weeks after onset of symptoms or one week after onset of jaundice.
<b>Impetigo</b>	May return 24 hours after antibiotic treatment started; lesions on exposed skin should be covered.
<b>Influenza</b>	Stay home for five days after symptoms begin.
<b>Bacterial Meningitis</b> (Haemophilus Influenza B, Meningococcal Infection, Spinal Meningitis)	May return 24 hours after antibiotic treatment has begun and feeling well enough to participate.
<b>Mumps</b>	Stay home for five days after swelling first appears.
<b>Pediculosis</b> (Head Lice)	Will be sent home for treatment upon detection of lice/nits. May return once treatment has been administered (parents will be encouraged to continue nit removal). Follow-up treatment within 7-10 days is essential.
<b>Pertussis</b> (Whooping Cough)	<b>If treated</b> , stay home for at least five days after start of antibiotics. <b>If untreated</b> , stay home for three weeks after cough begins.
<b>Pinworms</b>	May attend, but should be treated by a physician.
<b>Respiratory Syncytial Virus (RSV)</b>	Stay home until fever free, feeling well, and able to participate fully.
<b>Ringworm</b>	May return once treatment with an anti-fungal medication has begun.
<b>Roseola</b>	May return once diagnosed by a physician, fever free, feeling well, and able to participate fully.
<b>Rotavirus</b>	Stay home until symptom free for 48 hours.
<b>Rubella</b> (German Measles)	Stay home for seven days after rash appears.
<b>Rubeola</b> (Red Measles)	Stay home for four days after rash appears.
<b>Scabies</b>	May return 24 hours after treatment (lotion) has started.
<b>Scarlett Fever</b>	May return 24 hours after start of antibiotics.
<b>Strep Throat</b>	May return 24 hours after start of antibiotics.
<b>Thrush</b>	Stay home until feeling well enough to participate fully.