

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