Upper Canada® Child Care

Exclusion Guidelines for Communicable Illnesses

Sources: American Academy of Pediatrics, the Canadian Pediatric Society, the Simcoe Muskoka District Health Unit, Toronto Public Health, and York Region Public Health. Contact Public Health Unit (PHU) for additional information related to communicable diseases and resources on the management and control of infectious diseases in childcare settings. **See below for periods of exclusion and conditions for return to the program.**

Illness	Recommended Exclusion Guidelines
Chickenpox	Stay home until fever free (24 hours), feeling well, and can participate fully regardless of spots being present. Spots indicate a less contagious stage of the illness.
Common Cold	Stay home until fever free (24 hours), feeling well, and can participate fully.
Conjunctivitis (Pink Eye)	Stay home until assessed by a doctor. For **bacterial** conjunctivitis, stay home until 24 hours after start of antibiotic.
COVID 19 (Coronavirus)	Stay home until fever free (24 hours), feeling well, and can participate fully.
Coxsackie Virus (Hand Foot and Mouth Disease)	May return once fever free (24 hours), feeling well, and can participate fully, regardless of rash; child is most infectious before illness is recognized.
Croup	Stay home until fever free (24 hours), feeling well, and can participate fully.
E. Coli (Food Poisoning)	Stay home until two consecutive stool samples, collected at least 24 hours apart, test negative.
Fifth Disease (Slapped Cheek)	Stay home until fever free (24 hours), feeling well, and can participate fully.
Gastroenteritis (Diarrhea, Vomiting, Fever, Cramps, Rotavirus, Norovirus)	Stay home until symptom free for 24 to 48 hours (consult local PHU). **Enteric outbreaks require an exclusion period of 48 hours symptom free or as local PHU dictates. Negative test results may be required to return.**
Hepatitis A (Infectious Hepatitis, Viral Hepatitis)	Stay home for two weeks from start of symptoms or one week after onset of jaundice.
Impetigo	May return 24 hours after antibiotic treatment started; lesions on exposed skin should be covered.
Influenza	Stay home up to 5 days after symptoms start, or until symptoms end, whichever comes first.
Bacterial Meningitis (Haemophiles Influenza B, Meningococcal Infection, Spinal Meningitis)	May return 24 hours after starting antibiotic treatment, feeling well and can participate fully.
Mumps	May return five days after swelling appears if fever free (24 hours) and feeling well and able to participate fully.
Pediculosis (Head Lice)	Sent home for treatment if lice/nits detected. May return after treatment administration. Continued nit removal is strongly recommended. Follow-up treatment within seven to ten days is **essential.**
Pertussis (Whooping Cough)	**If treated,** stay home for at least five days after start of antibiotics. **If untreated,** stay home for 21 days after cough begins.
Pinworms	May attend but should be treated by a physician.
Respiratory Syncytial Virus (RSV)	Stay home until fever free (24 hours), feeling well, and can participate fully.
Ringworm	May return once anti-fungal medication has begun.
Roseola	Once diagnosed by a physician, child may return when fever free, feeling well, and can participate fully. (Roseola can be mistaken for other illnesses.)
Rubella (German Measles)	Stay home for seven days after rash appears.
Rubeola (Red Measles)	Stay home for four days after rash appears.
Salmonella (Paratyphoid and Typhoid Fever)	May return after three negative stool samples are taken at least 48 hours apart, and **after** completion of antibiotic treatment. (Testing timeframe depends on which antibiotic is prescribed.)
Scabies	May return 24 hours after treatment (lotion) has started.
Scarlett Fever	May return 24 hours after starting antibiotics, feeling well, and can participate fully.
Strep Throat	May return 24 hours after starting antibiotics, feeling well, and can participate fully.
Thrush	Stay home until feeling well and can participate fully.