

KEEP ME HOME IF...

I have a temperature of 100 degrees or higher.

I vomited or had diarrhea within the last 24 hours.

I have body rash with itching or fever.

I have an itchy head or active head lice.

I have itching, draining, and/or pus draining from one or both eyes.

I have a bacterial infection or Strep throat.

I have had an emergency visit and/or hospital stay.

BRING ME BACK WHEN...

I have been fever free without the assistance of medication for 24 hours (i.e Tylenol, Motrin, Advil, etc.)

I am free from vomitting or diarrhea for 24 hours.

I am free from rash, itching or fever and/or have been evaluated by a doctor if needed.

Treated with appropriate lice treatment at home.

I am free from drainage and/or have been evaluated by a doctor if needed.

I have been treated with anti-biotics for at least 24 hours and/or health care provider has given me permission to return to school.

I have been released by medical provider to return to school.

