

Health & Wellness Policies

Each child is unique and the manner in which each child responds to illness and infection is also unique. While we strive to consider each sick child on an individual basis, we do know that certain illnesses have typical symptoms, incubation periods, and durations. The following pages contain information regarding a variety of common and not-so-common childhood illnesses and our guidelines regarding the exclusion and return of children with these illnesses. The guidelines have been developed based upon our compilation of information from the Los Angeles County Department of Health, the American Academy of Pediatrics, the Center for Disease Control and the CEC's consulting pediatrician.

In considering a child's readiness to attend the program each day, we look at a variety of factors. Although fevers and rashes are obvious symptoms, we also consider the child's ability to participate as a member of an active group of children throughout the course of a busy day. To protect the health and wellbeing of children and teachers, we must insist that children who are ill remain at home for a complete day (a minimum of 24 hours) after all symptoms and signs of illness have ceased. This allows for a clear picture of the child's health and provides much needed time for your child to rest and rebuild his/her body strength and immunities. To be considered symptom free or to have a normal body temperature, your child may not be taking fever reducing medications. These medications artificially alter your child's temperature and potentially mask continued illness.

Additionally, a child who is under-immunized based on the state guidelines (i.e. has an approved exemption from particular vaccines) will be promptly excluded from the program if there are distinct signs of an illness or disease that is preventable with a vaccine. The Center will require a note from a physician in order for the child to re-enter the program.

We are able to administer certain prescription medications to your child after the completion of medication consent forms. Medications must come in a container with the prescription label and we must follow all printed instructions. Over-the-counter medications can be given by your instruction providing they match the dose, schedule and instructions on the container. Otherwise, we must have a doctor's note which provides instruction for us. If you have questions about our exclusion policies or our ability to give medications, please talk to a Lead Teacher, Site Director or a Program Director.

<u>Bronchiolitis:</u> Viral or bacterial inflammation of bronchioles in the lungs, usually preceded by common cold. Incubation: varies with nature of inflammation.

Return: Child can return when signs of infection have decreased, and appetite, alertness, strength, and overall signs of typical, healthy behavior return.

<u>Bronchitis:</u> Acute viral or bacterial inflammation of the air passages of the lungs. Usually begins with cold virus of nose and throat with secondary bacterial infection occurring.

Incubation: varies with nature of inflammation.

Return: Child can return when signs of infection have decreased, and appetite, alertness, strength, and overall signs of typical, healthy behavior return.

Canker Sores: Painful ulcers which occur in the lining of the mouth sometimes are contagious.

Incubation: 24-48 hours.

Return: Child can return when appetite, alertness, strength, and overall signs of typical, healthy behavior

return.

Child's eating and drinking utensils should be kept separate until sores heal.

<u>Candidiasis/Monilia:</u> Yeast infection generally found in diaper or genital area, can be treated with medication.

Incubation: within 48 hours of direct contact with the affected area.

Return: No exclusion is necessary unless child is too uncomfortable to remain.

Chicken Pox: Highly contagious varicella virus. There is now a vaccine available.

Incubation: 13-21 days

Return: Child can return when all lesions have scabbed over, body temperature is normal, and appetite, alertness, strength, and overall signs of typical, healthy behavior return.

<u>Cold Sores (Herpes Simplex):</u> Painful viral infection with blisters, usually around the mouth.

Incubation: up to 2 weeks

Return: Child can return when ulcer is no longer oozing, child's body temperature is normal, and appetite, alertness, strength, and overall signs of typical, healthy behavior return.

<u>Common Cold:</u> Generally a viral infection with a variety of symptoms; first 2 to 4 days are time of highest contagion.

Incubation: 1-2 days

Return: Child can return when body temperature is normal, signs of infection have decreased, and appetite, alertness, strength, and overall signs of typical, healthy behavior return.

Conjunctivitis: Viral or bacterial eye infection which may accompany a cold or which may exist on its own.

Incubation: 1-3 days

Children will not be excluded for eye discharge alone unless the eye itself is irritated, red or swollen or is accompanied by other symptoms such as fever or other signs of illness.

Consult a health professional for diagnosis and possible treatment. The role of antibiotics in preventing spread is unclear. Antibiotics shorten the course of illness a very small amount. Most children with conjunctivitis get better after 5 or 6 days without antibiotics. Child can return when body temperature is normal, signs of infection have decreased, and appetite, alertness, strength, and overall signs of typical, healthy behavior return.

Croup: Infection, inflammation, and swelling of larynx and surrounding tissue.

Incubation: 1-3 days

Return: Child can return when signs of infection have decreased, child has normal body temperature, and appetite, alertness, strength, and overall signs of typical, healthy behavior return.

<u>Diarrhea/Viral</u>: Exclusion if 2 or more diarrhea stools occur in an 8 hour period. If there is a higher volume of gastrointestinal illness in a particular room or the nature of the diarrhea is a strong indication of illness, a child may be excluded after one diarrhea at the director's discretion.

Incubation: variable

Return: Child can return when there has been no diarrhea for 24 hours (the health department may increase the exclusion to 48 hours in the case of an outbreak) and the child has had a solid stool. Child's appetite should be normal, and alertness, strength, and overall signs of typical, healthy behavior return.

<u>Diarrhea/Giardia, Salmonella, Shigella:</u> Diarrhea that is caused by a non-viral source; requires report to the Health Department.

Incubation: variable.

Return: Child can return upon approval from Health Department.

<u>Fever:</u> Oral or rectal temperature of 101 degrees Fahrenheit or higher or axillary 100 degrees Fahrenheit or higher. Fever is a symptom, rather than an illness, and other symptoms may accompany fever to indicate the nature of the problem.

Incubation: variable with nature of illness

Return: Child can return when fever free without fever reducing medication for a complete day (a minimum of 24 hours) and appetite, alertness, strength, and overall signs of typical, healthy behavior return.

<u>Hand, Foot, & Mouth:</u> Highly contagious viral infection which begins in the throat then spreads to palms of hands, fingers, bottoms of feet and toes. Exclusion for this illness occurs only if the child's symptoms (fever, irritability, lack of appetite, inability to drink, etc) prohibit remaining at the center or blisters are open and oozing.

Incubation: 3-6 days

Return: Children who have been excluded may return when appetite, alertness, strength, and overall signs of typical, healthy behavior return.

Hepatitis: Acute viral infection of liver, with early symptoms flu-like. Requires report to the Health Department.

Incubation: 10-60 days, usually 25 days.

Return: Child may return when a physician's approval is obtained. Siblings and family generally receive gamma globulin shots.

<u>Impetigo</u>: Contagious bacterial skin infection in staphylococcus family. Characterized by crusty and oozing skin lesions.

Incubation: 2-5 days

Return: decreased or crusted lesions, and appetite, alertness, strength, and overall signs of typical, healthy behavior return.

<u>Influenza:</u> Viral infection with some cases of secondary bacterial infections occurring, some of which are very dangerous to very young children. A vaccine is available and recommended.

Incubation: 1-3 days

Return: Child can return when body temperature is normal, and appetite, alertness, strength, and overall signs of typical, healthy behavior return.

<u>Head Lice</u>: The infestation of incredibly small insects in the hair and scalp. Special shampoos, combs and manual removal are generally used to kill the eggs (nits) and lice and help to stop the infestation cycle. If one child is identified as having lice, all family and close contacts should be checked and treated.

Incubation: 1 - 2 weeks

Return: Child may return when no lice or nits are found in the hair. Head checks will be performed prior to admittance back into the center. If lice is discovered at the Center and the child is sent home, s/he may return the following day after treatment. Staff will perform a head check each day until the child is nit free for a least one week.

<u>Measles, Rubeola:</u> Serious viral illness affecting respiratory tract and skin. Most children are now immunized to prevent this illness. Immunization must be current for entry into child care.

Incubation: 10-12 days to first symptoms, 14-17 days to rash.

Return: Child can return on the 8th day following the appearance of the rash.

<u>Meningitis:</u> Infection or inflammation of the membranes which cover the brain and spinal cord. Children can be immunized to prevent Homophiles influenzae type b infections of meningitis. This immunization is recommended for all children enrolled in day care. This illness requires report to the Health Department.

Incubation: Variable, generally 10 days.

Return: Child can return after the approval of the Health Department.

<u>Mononucleosis:</u> Infectious viral disease affecting the respiratory system, liver, and lymphatic system. No treatment other than symptomatic -- rest is very important.

Incubation: 4-14 days

Return: When signs of infection have decreased, and appetite, alertness, strength, and overall signs of typical, healthy behavior return.

<u>Mumps:</u> Mild, contagious viral disease causing painful swelling of the salivary glands. Children are immunized to prevent this illness, generally after 1 year of age.

Incubation: 12-26 days, usually 18 days.

Return: Until swelling disappears or for one week from onset, whichever is longer.

Pinworms: Intestinal parasites. Good hand washing and hygiene help in avoiding this.

Incubation: Up to 6-8 weeks

Return: Child can return after being treated with one dose of prescribed medication and is asymptomatic (the entire family usually is treated).

<u>Pneumonia:</u> Can be bacterial, viral, or mycoplasma; all are lung infections and can be contagious.

Incubation: 1-3 days if bacterial, up to several weeks if not

Return: Child can return when signs of infection have decreased, and appetite, alertness, strength, and overall signs of typical, healthy behavior return.

<u>Ringworm:</u> A fungal infection transmitted directly or through contact with infected surfaces. Siblings and close contacts should be checked at discovery and after 2 weeks.

Incubation: 10-14 days

Return: Child can return after treatment has started and when rash can be completely covered by clothing.

<u>Roseola:</u> Characterized by fever and skin rash. Skin and central nervous system are involved. Usually affects children from birth to 3 years.

Incubation: 9-15 days

Return: Child can return when signs of infection have decreased (body temperature normal and rash beginning to fade), and appetite, alertness, strength, and overall signs of typical, healthy behavior return.

Scabies/Mites: Small itchy blisters indicate the presence of scabies, which is transmitted through direct contact.

Incubation: 3-15 days

Return: Child can return after treatment has started and itching has stopped.

<u>Streptococcal Infections/ Scarlet Fever:</u> High fever caused by streptococcus bacteria, with Scarlet Fever there is an accompanying rash.

Incubation: 2-5 days

Return: Child can return after being treated for 24 hours with antibiotic, body temperature is normal, signs of infection have decreased, and appetite, alertness, strength, and overall signs of typical, healthy behavior return.

Staphylococcus: Bacterial infection which can affect internal systems or skin.

Incubation: 1-10 days

Return: Child can return after being treated for at least 24 hours and lesions are gone or can be kept

completely covered.

<u>Surgery:</u> When a child is recovering from surgery, no exclusion may be necessary. However, many children need time for the body to heal and the pain of surgery to diminish. Although we are capable of assisting children in a slightly altered schedule or day, we are limited. A child who cannot move, eat, or play in comfort may need to remain away from the center until able to participate in daily activities.

<u>Tetanus</u> (lockjaw): Potentially life-threatening infection that causes muscle spasms, difficulty opening mouth, swallowing & seizures (enters body through a wound or cut). Not transmitted person-to-person. Medical treatment should be sought if vaccinations are not current. Children are vaccinated.

Incubation: 4-21 days, averaging 10 days

Return: When signs of infection have decreased, and appetite, alertness, strength, and overall signs of typical, healthy behavior return.

Thrush: Common fungal infection of mouth, frequent side-effect of antibiotic treatment.

Incubation: 3-5 days

Return: Child can return once treatment has begun.

<u>Tuberculosis:</u> Bacterial lung infection; currently on the rise in Southern California. This disease requires report to the Health Department.

Incubation: 6-8 weeks or longer

Return: Child can return after Health Department approves.

<u>Typhoid:</u> Bacterial infection in gastrointestinal tract which can be contracted through exposure to salmonella bacteria. A doctor should be called immediately for treatment.

Incubation: 1-3 weeks

Return: Child can return when signs of infection have decreased, child has a normal body temperature, and appetite, alertness, strength, and overall signs of typical, healthy behavior return. This process usually takes 3 to 4 weeks with treatment.

<u>Urinary Tract Infection:</u> Can be viral or bacterial, usually bacterial. Fever, chills or vomiting may accompany painful urination.

Incubation: variable

Return: Child can return upon physician approval.

<u>Vomiting:</u> Can be viral, bacterial, or allergic in nature, and is a symptom rather than an illness. Children are excluded dependent upon a variety of factors.

Incubation: variable

Return: Child can return after a full day (a minimum of 24 hours) of being symptom free and when signs of illness have decreased, and appetite, alertness, strength, and overall signs of typical, healthy behavior return.

<u>Whooping Cough:</u> Serious contagious bacterial infection preventable through immunization. Requires report to the Health Department.

Incubation: 7-10 days

Return: Child can return when signs of infection have decreased, and appetite, alertness, strength, and overall signs of typical, healthy behavior return.