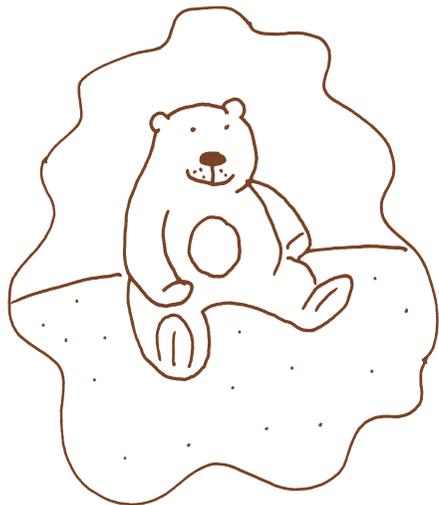




sick children
belong at home

well children
can attend child care



The information in this pamphlet is not intended as medical advice, but as simple guidelines to follow until you can contact your healthcare provider for direction.

At your child's annual check-up, it is wise to discuss what should be done in the event of illness, how and when to seek medical attention and what medications should be available in your home. Also, talk to your child care provider about her illness policies. Although emergencies do occur, you should develop a back-up plan for your child's care in the event your child is ill and unable to attend child care.

Source: The Communicable Diseases Summary, Maryland Department of Health and Mental Hygiene. November 2011

The Maryland Family Network gratefully acknowledges the Massachusetts Medical Society and the Massachusetts Medical Society Alliance for sharing their brochure entitled: *Attendance at School: Should my child be in school with this illness?* and granting non-exclusive permission to adapt their concept.

ATTENDANCE AT CHILD CARE

should my child be in care
with this illness?

My child's doctor's telephone number

My child's dentist's telephone number

My child care provider's telephone number

Keep this brochure for future reference.



1001 EASTERN AVENUE, 2ND FLOOR
BALTIMORE, MARYLAND 21202-4079
Tel 410.659.7701
www.marylandfamilynetwork.org



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red eyes

Redness and swelling of the white part of the eye can happen for many reasons, including seasonal allergies, bacterial and viral infections, and other medical conditions. Treatment may include antibiotics prescribed by a health care provider. The best way to prevent the spread of infections is frequent, correct handwashing by you and your child. If your child has pink eye, he should remain home from care until cleared by a health care provider and having taken antibiotics for 24 hours, or once symptoms have resolved.

cold, sore throat, cough

Children average three to eight colds per year, ten if they are in child care, and a cold usually lasts about one week. If cold and cough symptoms are associated with a fever or the symptoms do not improve in several days, contact a health care provider. Your child may attend child care if there is no fever. A child with a persistent, uncontrolled cough should remain at home. A sore throat, with a fever and/or swollen glands, may indicate strep throat. Contact a health care provider for evaluation. Children with strep throat who do not have fevers may return to care after 24 hours on antibiotics.

WHEN YOU CALL YOUR HEALTH CARE PROVIDER, YOU NEED TO KNOW:

1. When the symptoms began.
2. If your child has a fever.
3. Has your child been exposed to any serious illnesses?
4. The type of cold medicines you have at home.



A child care provider/program may have more restrictive policies, so review these as well. If any medication, including over-the-counter medications, are to be administered by child care staff, a completed Medication Administration Authorization form (OCC 1216) is required.

fever

A child's temperature can be measured orally, on the forehead, and in the armpit. A fever is defined as a temperature higher than 100.0° F orally, 101.0° F on the forehead, or 99.5° F in the armpit. If a child two months of age or younger has any kind of elevated temperature, contact a health care provider immediately and do not send your child to child care. If your child has a fever and there is a change in their behavior or other symptoms are present (such as a rash, vomiting, diarrhea, or sore throat) then they should stay home. Consult with a health care provider for further evaluation. In children over six months of age, fever alone is not a reason to exclude from child care. Teething is often accompanied with a low fever in children over 6 months of age and exclusion from child care is typically not necessary unless other symptoms are present.

rash

A rash may be due to a virus or bacteria, or may be a reaction to a medication or chemical (plants, detergents). If your child has a rash that you do not recognize or if the rash is associated with a fever, contact a health care provider. Keep your child home from child care until you have discussed the rash with a health care provider. Because many rashes are contagious, a note from a health care provider may be necessary before your child may return to child care. Remember to wash your hands and your child's hands frequently.

DIAPER RASH

A child with severe diaper rash may need to receive medical treatment. Diaper ointment for basic care should be discontinued and may not be applied in child care to broken skin or in the presence of severe or persistent rash without written authorization from a health care provider.

WHEN YOU CALL YOUR HEALTH CARE PROVIDER, YOU NEED TO KNOW:

1. When the rash began.
2. The location, color, and texture of the rash.
3. If your child has a fever.
4. If your child has been exposed to other children with contagious illnesses (such as Chickenpox).

pain

Earache: Your child may have an ear infection. Consult a health care provider. To relieve pain, give your child acetaminophen or ibuprofen as recommended by the health care provider. If your child does not have a fever and/or is not in severe pain, the child may attend child care.

Toothache: Consult a dentist if the tooth has fully emerged through the gum and/or if you suspect an infection.

Headache: A child should be kept at home if headaches are severe, if he is not responding to acetaminophen or ibuprofen, or if the headache is accompanied by other symptoms such as vomiting. Call a health care provider if the headache persists or symptoms worsen.

stomachache, vomiting, diarrhea

A child with persistent abdominal pain continuing more than two hours or intermittent pain along with fever or other symptoms should be seen by a health care provider. A child with two or more episodes of vomiting in a 24-hour period should remain home until vomiting stops or a health care provider clears the child to return. A child with diarrhea, loose or watery stools not contained by a diaper or usual toileting practices should be excluded until diarrhea-free for 24 hours or cleared by a health care provider.

hand, foot and mouth disease

A child diagnosed with Hand, Foot and Mouth Disease should remain home if one or more of the following symptoms are present: fever, uncontrolled "hand to mouth" behavior by the child, secretions cannot be contained (drooling, etc.), draining sores cannot be covered.

WHEN YOU CALL YOUR HEALTH CARE PROVIDER, YOU NEED TO KNOW:

1. When the illness began.
2. How often the vomiting or diarrhea is occurring.
3. If your child also has a fever.
4. If your child is listless.