## Common Illnesses and Diseases of School-Aged Children

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| Chicken Pox       | Symptoms include sudden onset of a slight fever, itchy eruptions (small blisters) and tiredness. Lesions occur in crops with several stages of maturity present at the same time | 1. Recommend that child remain at home for at least 5 days after eruptions first appear or until vesicles become dry.  
2. Avoid exposure to women in early pregnancy who have not had chickenpox and/or varicella vaccine.  
3. Communicable for as long as 5 days (usually 1-2) before eruption of lesions and for not more than 5 days after the appearance of the first crop of vesicles. | Virus spread by direct contact with skin lesions or by droplets spread from the secretions of the respiratory tract. |
| Common Cold       | Symptoms include watery eyes, sneezing, running nose, general feeling of illness. | 1. Recommend that child remain at home if coughing is excessive and/or nasal drainage is significant.  
2. Communicable for 24 hrs. before and for 5 days after nasal discharge.  
3. Do not give aspirin. | Virus spread directly through droplets from coughing, sneezing, or speaking; indirectly through articles freshly soiled by discharges of infected person and by contact with discharge on hands. |
| Influenza “Flu”   | Chills, body ache, headache, fever, sore throat, followed by cough, runny nose, and possibly stomach ache | 1. Exclude from school until child feels well, usually  
2-7 days or 24 hours after the fever has broken.  
2. Do not give aspirin. | Virus spread directly through coughing, sneezing, and contact with nose or throat discharge. May be spread through the air. |
| Impetigo          | Blister or fluid sacs covered with honey-colored crusts. May be confused with cold sores. | 1. Exclude from school until lesions are dry or written permission from physician.  
2. Contagious until sores are healed. | Bacteria spread by direct contact with persons with articles freshly soiled with discharges from nose or throat of patient; may also be spread through the air. Usually caused by Group A Beta-Streptococcus. |
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| Pink Eye (Conjunctivitis) | Redness of conjunctiva (white of eye). May or may not have drainage. Eye irritation. | 1. Refer for medical diagnosis/treatment.  
2. Communicability depends on cause.  
3. Exclude from school until doctor’s verification and/or 24 hours of antibiotics. | Most are caused by virus; some bacterial. May be spread through hand-eye contact. |
| Ringworm Body (Tinea Corporis) | Ring-shaped or irregular skin patch with raised pimple-like or scaly borders. May show central clearing. May become inflamed/crusted. | 1. Treat with antifungal cream.  
2. Child may attend school if under treatment. If condition is extensive, exclude from school. | Contact with man or animal infected with the fungus or its spores, and by contact with contaminated articles. |
| Scabies           | Raised red skin possibly blisters or pustules or scabs. Intense itching/most severe at night. Common sites are hands, arms, at or above wrist line, thighs. | 1. Exclude from school until written verification of treatment.  
2. Communicable until treated.  
3. Family should be examined.  
4. House should be thoroughly cleaned. | Mite is transferred by direct contact with an infected person, and to a limited extent, undergarments or soiled sheets freshly contaminated by an infected person. |
| Strep Throat      | Fever, sore throat, headache, nausea, vomiting. If associated with rash, it is called scarlet fever. | 1. If diagnosed by doctor as strep, exclude from school until 24 hrs. after antibiotic treatment is started and until clinically well.  
2. Communicable until 24 hrs. after treatment is started. | Bacteria spread directly from nose and throat discharges of infected persons. |
| Pin Worm          | Abdominal pain, anal itching to the point of disturbed sleep, irritability, local irritation due to scratching. | Exclude from school only after doctor verification. Medical attention should be obtained. | Direct contact with contaminated sources. |
| Head and Body Lice | Irritation and itching of scalp or body; presence of small light grey insects and their eggs (nits) which are attached to the base of the hairs. | Exclude from school/center until adequately treated and until judged noninfectious by the child’s physician or by school nurse. | Direct contact with an infected person and indirect contact with their personal belongings, especially clothing and headgear. |

This handout is only meant to be a quick reference guide. Please contact your child’s pediatrician with any health concerns. It is recommended that after seeing the pediatrician that you contact the school nurse to inform her of any changes in your child’s health.

Please remember to send in a written excuse each time your child is absent. This can be monitored on Skyward through Family Access. All absences beyond ten (10) cumulative days shall require an excuse from a licensed physician.