

Communicable and Infectious Diseases

The District is required to provide educational services to all school age students who reside within its boundaries. Attendance at school may be denied to any student having a communicable or infectious disease that could make the student's attendance harmful to the welfare of other students. Attendance may be denied to a student with suppressed immunity in order to protect the welfare of the student with suppressed immunity when others in the school have an infectious disease which, although not normally life threatening, could be life threatening to the student with suppressed immunity.

The Board recognizes that communicable and infectious diseases are common occurrences among students and staff members who care for them. The care of students who are mildly ill in group settings is an inevitable reality. Communicable diseases that may afflict students range from common childhood diseases, acute and short-term in nature, to chronic, life-threatening diseases. The District shall rely on the advice of the public health and medical communities in assessing the risk of transmission of various communicable diseases to determine how best to protect the health of both students and staff.

Management of common communicable diseases will be in accordance with Idaho Department of Health and Welfare guidelines and communicable diseases control rules. A student who exhibits symptoms of a communicable disease that is readily transmitted in the school setting may be temporarily excluded from school attendance.

Students who complain of illness at school may be referred to the school nurse or other responsible person designated by the Board and may be sent home as soon as the parent or person designated on the student's emergency medical authorization form has been notified.

All families are expected to openly share information about their student's behavior, symptoms, or exposure to illness. Families must have a backup plan for care of their students when the student is unable to attend school due to illness or injury. When information is received by a staff member or volunteer that a student is afflicted with a serious communicable disease, the staff member or volunteer shall promptly notify the school nurse or other responsible person designated by the Board to determine appropriate measures to protect student and staff health and safety.

Acute conditions are temporary, short-term, usually infectious disease or injury. The building administrator or school nurse will decide about inclusion/exclusion, taking into account the current staffing situation and what is known about the illness or injury.

Staff members will rely on the family's description of the student's behavior or symptoms to determine when a student is well enough to return after an illness or injury. A note from the student's primary health care professional is necessary when staff members need advice about

any special care required by the student or if the student's condition poses a health risk to others. The District reserves the right to require a statement from the student's primary care provider authorizing the student's return to school. In all proceedings related to this policy, the District shall respect the student's right to privacy.

The school nurse or other responsible person designated by the Board, after consultation with, and on the advice of public health officials, shall determine which additional staff members, if any, have a need to know of the affected student's condition.

Only those persons with direct responsibility for the care of the student or for determining appropriate educational accommodation will be informed of the specific nature of the condition, if it is determined there is a need for such individuals to know this information.

Parents of other students attending the school may be notified that their student has been exposed to a communicable disease without identifying the particular student who has the disease.

Legal Reference: I.C. § 33-512 Governance of Schools  
I.D.A.P.A. 16.02.10.050 Reportable or Restrictable Diseases, Conditions and Reporting Requirements  
I.D.A.P.A. 16.02.10.090 School - Reporting and Control Measures

Policy History:

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Revised on:

**STUDENTS**

Communicable and Infectious Diseases Procedure

Definitions

A communicable disease is a disease caused by a microorganism (e.g., bacterium, virus, fungus, and parasite) that can be transmitted from person to person via an infected body fluid or respiratory spray, with or without an intermediary agent (e.g., tick, mosquito) or environmental object (e.g., table surface). Some communicable diseases are reportable to local health authorities.

An infectious disease is a disease caused by a microorganism (e.g., bacterium, virus, fungus, and parasite).

Preventing the Spread of Disease

Infections are frequently transmitted from person-to-person in pre-K-12 school settings due to the close environment, sharing of supplies and equipment, and inadequate hand hygiene.

**Hand hygiene to prevent illness:** All staff, volunteers, students, and visitors must perform routine hand hygiene cleaning hands with soap and water for 20 seconds upon arrival to the school, before eating and preparing food; after using the bathroom, sneezing or coughing, handling animals and animal waste or raw meat, poultry, fish, or eggs; after caring for or touching a cut, sore, or body fluids; whenever hands are visibly soiled; and more frequently when someone is sick (school health and food services settings require more stringent measures). When soap and water are not available and hands are not visibly soiled, alcohol-based disposable hand wipes or gel/foam sanitizers may be used in place of hand washing.

**Standard precautions to avoid exposure to body fluids:** School Health Services staff follows standard precautions developed by the CDC and the local health district. These are consistent with Universal Precautions followed by all other staff related to the prevention of blood-borne infections. All staff are required to use gloves when blood or body fluids might contact hands or splash into the mouth, eyes or nose. All staff should refer to policies and procedures 5610 and 5610P in regards to contact with blood or body fluids. School Health Services staff may use gowns and masks when blood or body fluids might contact hands or spray into the mouth, eyes or nose. Surfaces that might come into contact with infectious body fluids must be disposable or able to be disinfected.

1. **Spills of body fluids:** Spills of vomit, urine and feces, blood, and injury and tissue discharges are cleaned and disinfected.
2. **Disposal of Contaminated Materials:** Contaminated materials are disposed of in a plastic bag with a secure tie or closure (i.e., gloves, paper towels, or other materials used to wipe up body fluids).
3. **Contaminated Articles That Can Be Used Again:** Reusable rugs and other fabric articles are laundered. Brushes, brooms, dustpans, and mops used to clean up body fluids are washed with detergent, rinsed, and soaked in a disinfecting solution according to instructions on the product label. Items such as mop heads and reusable rags are washed with hot water and detergent in the washing machine. All items are hung off the floor or ground to dry.
4. **Soiled Clothing:** Clothing items soiled with body fluids are put into a closed plastic bag and sent home with the student to be laundered. A change of clothing is kept in the school for students.
5. **Hand Hygiene After Handling Contaminated Materials:** Hands are always washed after handling soiled laundry or equipment and after removing gloves.
6. **Blood Borne-Pathogen Exposure Plan:** See Coeur d'Alene School District No. 271 Personnel Policy and Procedure 5610 Prevention of Disease Transmission for blood-borne pathogens and exposure control plans, ensuring all staff learn how to protect themselves from exposure to body fluids and follow recommendations for immunization against hepatitis B of staff members whose jobs include the risk of exposure to blood (e.g., by providing first aid). In the event of an occupational exposure to blood and body fluids see the District webpage for a work injury report and follow the directions found in Coeur d'Alene School District No. 271 Personnel Procedure 5610 Prevention of Disease Transmission.

**Inclusion/exclusion Criteria:** The building administrator or school nurse will decide about inclusion/exclusion, taking into account the current staffing situation and what is known about the illness or injury. The decision is informed by what the family and the student's teachers/caregivers share about the student's condition, current references, and findings of the health check procedure (see Coeur d'Alene School District No. 271 Students Policy Exhibit 3520E1 Communicable or Infectious Diseases Exhibit Instructions for Health Check) if the student is brought to the school ill or injured or becomes ill or injured while in attendance.

The decision to exclude a student will take into account whether there are adequate facilities and staff members available to meet the needs of the student who is ill or injured and the other people at the school at the time.

### 1. **Criteria for Excluding Students Who Are Acutely Ill or Injured**

- a. Ability to Participate: The student's condition prevents the student from participating comfortably in activities that the facility routinely offers for well students or students who are mildly ill or injured.
- b. Need for More Care: The condition requires more care than teachers/caregivers can provide without compromising the needs of the other students in the group.
- c. Risk to Others: Keeping the student in school poses an increased risk to the student or other students or adults with whom the student comes in contact.

## **2. Permitted Attendance and Care for Mild Illness under Normal Circumstances**

The following conditions or symptoms do not require exclusion:

- Common colds, runny noses (regardless of color or consistency of nasal discharge).
- A cough not associated with an infectious disease or a fever (temperature greater than 99°F axillary/in an armpit, 100°F orally, 100.4°F (Tympanic, Temporal or Thermal) not associated with the body's response to illness or infection. Body temperature can be elevated by overheating caused by overdressing or a hot environment, reactions to medications, and response to infection. If a student is behaving normally but has a body temperature above the thresholds indicated, the student should be monitored but does not need to be excluded for fever alone.
- To attend school, the student must be fever free for 24 hours without the aid of fever-reducing medicine.
- Watery yellow or white discharge or crusting eye discharge without fever, eye pain, or eyelid redness.
- Yellow or white eye drainage that is not associated with pink or red conjunctiva (i.e., whites of the eyes).
- Rash without fever and behavioral changes.
- Molluscum contagiosum (do not require exclusion or covering of lesions).
- Thrush (i.e., white spots or patches in the mouth or on the cheeks or gums).
- Fifth disease (slapped cheek disease, parvovirus B19) once the rash has appeared.
- *Methicillin-resistant Staphylococcus aureus* (MRSA) without an infection or illness that would otherwise require exclusion. Known MRSA carriers or colonized individuals should not be excluded.
- Cytomegalovirus infection.

- Chronic hepatitis B infection.
- Sexually transmitted/HIV infection.
- Students and adults who had diarrhea and are now able to confine their stool to the toilet or diaper may return to care. For some infectious organisms, exclusion is required until certain guidelines have been met. These agents are not common, and teachers/caregivers usually do not know the cause of most cases of diarrhea.
- Students with chronic infectious conditions may be accommodated at school according to the legal requirement of federal law in the Americans with Disabilities Act. The act requires that schools make reasonable accommodations for students with disabilities and/or chronic illnesses, considering each student individually.

### 3. State Regulations That Apply to Exclusion

School reportable and restrictable diseases are those that are readily transmissible among students and staff in schools as listed under Section 050 of the Idaho Reportable Diseases. Any person who is diagnosed with or reasonably suspected to have a school restrictable disease must not attend school, as long as the disease is in a communicable form. A licensed physician, public health nurse, school nurse or other person designated by the Department of Health District may determine when a person with a school restrictable disease is no longer communicable.

#### *Idaho State Regulations Require Exclusion from School for the Following Conditions:*

<ul style="list-style-type: none"> <li>• Conjunctivitis</li> <li>• Cutaneous Fungal Infections</li> <li>• Diphtheria Haemophilus influenza Invasive Disease</li> <li>• Measles</li> <li>• Methicillin-resistant Staphylococcus aureus (MRSA) Non-Invasive Disease</li> <li>• Neisseria meningitidis Invasive Disease</li> <li>• Norovirus</li> <li>• Novel Influenza A Virus</li> <li>• Pediculosis</li> <li>• Pertussis</li> <li>• Plague</li> <li>• Pneumococcal Invasive Disease in children less than Eighteen (18) Years of Age</li> </ul>	<ul style="list-style-type: none"> <li>• Poliomyelitis (reportable, not restrictable)</li> <li>• Rubella</li> <li>• Scabies</li> <li>• Severe Acute Respiratory Syndrome (SARS)</li> <li>• 2019 SARS CoV 2 (COVID-19)</li> <li>• Shigellosis</li> <li>• Smallpox</li> <li>• Staphylococcal Infections other than MRSA</li> <li>• Streptococcal Pharyngeal Infections Streptococcus pyogenes (group A strep) Invasive or Resulting in Rheumatic Fever</li> <li>• Tuberculosis</li> <li>• Varicella (chickenpox)</li> </ul>
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**4. Procedure for Management of Short-term Illness:** If a student appears mildly ill but is staying for the day:

A. The student should be encouraged to communicate with the teacher or office staff for any change or worsening in signs, symptoms, or behavior.

**B. Increasing Symptoms While in School:** If a student who was well at drop-off time becomes sick or a mildly ill student becomes sicker during the time the student is in care, the procedure is as follows:

**i. Conditions That Require Medical Attention Right Away:** If the illness is one of those on the list of conditions that require medical attention right away, the student's teacher/caregiver notifies the school office to call 911 and the parent/legal guardian, makes the student comfortable. (See Coeur d'Alene School District No. 271 Students Policy 3540 Emergency Treatment)

**ii. Decision-maker about Inclusion/Exclusion:** The principal, school nurse or designated authority determines whether the student may remain in school or is too ill to stay.

**iii. Contacting the Parent/Legal Guardian:** Whether the decision is to allow the student to stay or leave, school personnel calls the parent/legal guardian to discuss the symptoms and how the school plans to manage the situation.

**iv. Management of Symptoms for an Ill Student in the School:** The teachers/caregivers manage the student's symptoms until the student is transferred to the care of the parent/legal guardian or a previously authorized emergency contact person.

**v. Obtaining Health Professional Advice:** If the facility needs the advice of a health care professional, school nurse contacts the local or state health department or, with consent of the parent/legal guardian, the student's primary health care professional for advice.

**vi. Arranging Pickup:** If the student is too ill to stay in school, the building personnel will ask the parent/legal guardian or a previously authorized emergency contact person to pick up the student as soon as possible. Until the student is picked up, the school will provide the student with a familiar teacher/caregiver to care for the student in a place where the student can rest.

**vii. Location of Students Who Are Being Excluded for Illness While Waiting for Pickup:** A student with a potentially contagious illness that requires that the student be sent home from school will receive care in a location where the student can be separated from other students by at least 3 feet until the student leaves the building. This arrangement may be in the student's usual care setting with extra attention to hygiene and sanitation. The location will avoid exposure of people not previously in close contact with the student and be where the student's needs can be met under close supervision.

**viii. Medication:** See Coeur d'Alene School District No. 271 Students Policy 3510  
Medication at School

## **5. Reporting Requirements**

- A. Reportable Diseases:** Some communicable diseases must be reported to public health authorities so that required control measures can be used. School Health Services obtains an updated list of reportable diseases from local or state health authorities annually and shares a copy of this list with each parent/legal guardian on the departmental webpage.
- B. Responsibility for Reporting Illness:** Each September, school nurses remind families and staff members to notify the school nurse within 24 hours after a student, staff member, or member of the student's or staff member's immediate household develops a known or suspected communicable disease and if the condition is a reportable communicable disease.
- C. Notification of the Public Health Department:** While respecting the legal boundaries of confidentiality of medical information, the school nurse notifies the appropriate public health department authority about any suspected or confirmed reportable disease and then follows the advice of the health department about additional notifications that may be necessary. (See Policy Exhibit 3520E3: Sample Letter to Families About Exposure to Communicable Disease.) The responsible local or state public health authority to whom to report communicable diseases is Panhandle Health District located at 8500 N. Atlas Rd, Hayden, ID 83835 (208) 415-5100

## **6. Outbreaks of Disease**

- A. Reporting Outbreaks of Infectious Disease:** If more than 2 cases of an infectious disease other than the common cold occur in a group of students /staff members who are in close contact with one another, the school nurse may call the local/state public health department for advice about how to control the spread of disease and whether the situation constitutes an outbreak. During an identified outbreak, a student or staff member will be excluded if an official in the health department or a primary care practitioner suspects that the student or staff member is contributing to the spread of the illness in the facility or lacks necessary immunization during an outbreak of a vaccine-preventable disease, or the infectious disease involved poses a special risk to that individual. Readmission for such exclusions is permitted when a licensed physician, public health nurse, school nurse or other person designated by the Department of Health District may determine that the risk is no longer present.
- B. Plan for Seasonal and Pandemic Influenza (Flu)**
- i. Developing a Plan for Dealing with Influenza: A committee with representatives of staff members, parents/guardians, healthcare providers, Panhandle Health Department and School Health Services meets in September each year and thereafter as needed to develop/review the plan for dealing with flu. The School Nurse Administrator convenes the committee, collects reliable information about the seasonal flu or pandemic flu outbreak as it affects the facility, and monitors public health announcements. Key information is shared with the flu committee, all staff members,

and all parents/legal guardians of enrolled students. To the extent that it is feasible, communications will be in the language that all the individuals to be informed understand most easily.

ii. The communication plan is as follows:

- a. Annually, the School Health Services department will search the following websites for information about flu and pandemic flu: [www.cdc.gov/flu](http://www.cdc.gov/flu), [www.flu.gov](http://www.flu.gov), and [panhandlehealthdistrict.org](http://panhandlehealthdistrict.org)
- b. School nurses will send reminders:
  1. that seasonal flu vaccine; covering a sneeze or cough with a tissue, shoulder, or elbow; staying home when sick; and practicing hand hygiene help prevent the spread of flu.
  2. about contacting a healthcare professional as soon as a student or an adult is suspected of having the flu to see if it is possible to reduce the severity with antiviral medication.
  3. to families to have arrangements for backup care if schools must close in a pandemic flu outbreak.
- c. If school(s) must close during a pandemic flu outbreak, Coeur d'Alene School District 271 will maintain operations out of the District Office.
- d. A school administrator must report the closure of any school within one (1) working day when, in his or her opinion, such closing is related to a communicable disease.
- e. The agency that regulates school closure related to communicable disease in Coeur d'Alene School District 271 and how they plan to address seasonal or pandemic influenza is Panhandle Health District located at 8500 N. Atlas Rd, Hayden, ID 83835 (208)415-5100.
- f. In the event of a school closure, the District Office will initiate communication. Building administrators will then communicate with individual building staff.
- g. If school(s) must close during a pandemic flu outbreak, families concerned about meals may find local resources on the district website for Hope on the Homefront.
- h. Sources of mental health services to cope with stress during a pandemic may also be found on the district website in School Health Services Department or Hope on the Homefront Program.
- i. A childcare program with whom we exchange limited information is School Plus.

iii. Infection Control Plan - In the event of an outbreak, the school will:

- a. Observe keeping students in contact only with teachers/caregivers and students in their own group.
- b. Observe hand and surface hygiene measures.
- c. Use the health check to exclude students from attending school according to the Communicable or Infectious Diseases policy. (See Policy Exhibits 3520E1/3520E2 Instructions for Health Check and Illness Guidelines.)
- d. Teach staff members and parents/guardians how to limit the spread of flu with vaccines, beginning in September and continuing until everyone has received immunizations into March or April—especially for students and adolescents 6 months to 18 years of age, teachers/caregivers, and parents/family members of students younger than 5 years. Our District will encourage family members older than 6 months and all staff members to receive the flu vaccine as soon as it becomes available in our community unless an individual has a valid medical reason not to do so.
- e. Support staff members who are ill so they can stay at home until they are well again with paid sick leave See Coeur d'Alene School District No. 271 Personnel Policy 5405 Personal Sick Leave.

### **C. Plan for Other Disease Epidemic and Pandemic Outbreaks**

- i. In the event of a disease epidemic or pandemic, the Superintendent will form a committee with consultation from the School Health Administrator. The committee will convene, collect reliable information about the outbreak as it affects the facility, and monitor public health announcements. Key information will be shared with the committee, all staff members, and all parents/legal guardians of enrolled students. To the extent that it is feasible, communications will be in the language that all the individuals to be informed understand most easily.
- ii. Illness and return to school guidelines will follow CDC and local health department requirements.
- iii. The communication plan is as follows:
  - a. The committee will utilize the following websites for information about the outbreak or pandemic: [CDC.gov](http://CDC.gov) and [panhandlehealthdistrict.org](http://panhandlehealthdistrict.org).
  - b. The District will send reminders about:

- i. current information regarding the disease,
    - ii. contacting a healthcare professional as soon as a student or an adult is suspected of having the illness to see if it is possible to be tested for the disease and treated with appropriate interventions,
    - iii. families need to have arrangements for back up care if schools must close in a pandemic outbreak.
  - c. If school(s) must close during a pandemic outbreak, Coeur d'Alene School District 271 will maintain operations out of the District Office.
  - d. A school administrator must report the closure of any school within one (1) working day when, in his or her opinion, such closing is related to a communicable disease.
  - e. The agency that regulates school closure related to communicable disease in Coeur d'Alene School District 271 and how they plan to address epidemic or pandemic outbreak is Panhandle Health District located at 8500 N. Atlas Rd, Hayden, ID 83835 (208) 415-5100.
  - f. In the event of a school closure, the District Office will initiate communication. Building administrators will then communicate with individual building staff.
  - g. If school(s) must close during a pandemic outbreak, families concerned about meals may find local resources on the District website for Hope on the Homefront.
  - h. Sources of mental health services to cope with stress during a pandemic may also be found on the District website in the School Health Services Department or Hope on the Homefront Program.
  - i. A childcare program with whom we exchange limited information is School Plus.
- iii. Infection Control Plan - In the event of an outbreak, the school will:
- a. Observe keeping students in designated groups or with individuals as advised by the local health district or School Health Services.
  - b. Observe hand and surface hygiene measures, and the use of appropriate personal protective equipment.
  - c. Use the health check to exclude students from attending school according to current guidelines from the CDC or local health department.

- d. Teach staff members and parents/guardians how to limit the spread of the disease by following best practice as outlined by the CDC and local Health District recommendations.
- e. Support staff members who are ill so they can stay at home until they are well again with paid sick leave See Coeur d'Alene School District No. 271 Personnel Policy 5405 Personal Sick Leave.

**Reference** Aronson, S.S., Shope, T.R., (Eds.). (2017) *Managing Infectious Diseases in Child Care and Schools: A Quick Reference Guide* (4<sup>th</sup> ed.). Elk Grove Village, IL: American Academy of Pediatrics.

Policy History:

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**STUDENTS**

Communicable or Infectious Diseases Exhibit

**Instructions for Health Check**

1. Adjust your position to be at the student's level so you can interact with the student even if talking with the parent.
2. Listen to what the family and student tell you and what you see for the following:
  - a. Complaints about not feeling well.
  - b. Any suggestion that the student has symptoms of illness or injury.
    - i. Any symptom or unusual behavior
    - ii. Any bowel problem
    - iii. Any change in usual sleeping/eating/drinking routines
    - iv. When the student most recently ate, used the toilet, or slept
  - c. Observed behavior is typical or atypical for time of day and circumstances. The appearance, feel, and look of the student:
    - i. Skin: pale, flushed, visible rash, unusually warm or cold to the touch, bruises, discomfort when touched.
    - ii. Eyes, nose, and mouth: dry or have discharge. Is the student rubbing an eye, nose or mouth? Is the student sneezing or drooling?
    - iii. Hair: complaints of itching or distraction.
    - iv. Breathing: normal or different, coughing.
  - d. Any unusual events, illness in the family, or other experience that might have involved the student.

**STUDENTS**

**Illness Guidelines and Return to School:** Conditions requiring temporary exclusion

When a student becomes ill but does not require immediate medical help, a determination must be made about whether the student should be sent home (i.e., should be temporarily excluded from school). Most illnesses do not require exclusion. The building administrator, school nurse or designee should determine whether the student's illness meets the following criteria for exclusion:

- Prevents the student from participating comfortably in activities as determined by staff members of the school.
- Results in need for care that is greater than staff members can provide without compromising the health and safety of other students.
- Poses a risk of spread of harmful disease to others (on the list of specific excludable conditions).

If any of these criteria are met, the student should be excluded, regardless of type of illness, unless a health professional determines the student's condition does not require exclusion. To attend school, the student must be fever free 24 hours without the aid of fever-reducing medicine unless the elevated temperature can be explained otherwise (see the Coeur d'Alene School District Procedure 3520P).

List of specific excludable conditions:

- A severely ill appearance. This could include lethargy or lack of responsiveness, irritability persistent crying, difficulty breathing, or having a quickly spreading rash.
- Fever (temperature greater than 99°F axillary/armpit, 100°F orally, 100.4°F tympanic, temporal or thermal) and behavior change or other signs and symptoms (e.g., sore throat, rash, vomiting, diarrhea).
- Diarrhea, stool that is occurring more frequently or is less formed in consistency than usual in the student and not associated with changes of diet. Exclude students who have 2 stools above normal per 24 hours.
- Vomiting 2 or more times in the previous 24 hours.
- Abdominal pain that continues for more than 2 hours or intermittent abdominal pain that is associated with a fever or other signs or symptoms.
- Mouth sores with drooling that the student cannot control unless the health department or the student's healthcare provider states the student is noninfectious.
- Rash with fever or behavioral changes, until a healthcare provider has determined the illness is not a communicable disease.

- Skin sores that are weeping fluid and are on an exposed body surface that cannot be covered with a waterproof dressing.
  
- Other, specific diagnoses as follows:
  - Streptococcal pharyngitis (i.e., Strep throat or other streptococcal infection), exclusion until the student starts an appropriate course of an antibiotic (course is usually at least a week of a form of penicillin or erythromycin). Return to school may occur if the student has a dose on the day of the diagnosis and has a second dose the following morning and before returning to the school.
  - Head lice (pediculosis), only if the student has not been treated after notifying family at the end of the prior school day. (Note: Exclusion is not necessary before the end of the school day.)
  - Scabies, only if the student has not been treated after notifying family at the end of the prior school day. (Note: Exclusion is not necessary before the end of the school day.)
  - Pink Eye (conjunctivitis), only if yellow or white eye drainage or crusting eye discharge associated with pink or red conjunctive (i.e. Whites of eyes) and fever, eye pain or eyelid redness.
  - Ringworm, (cutaneous fungal infections) only if the student has not been treated after notifying family at the end of the prior school day. (Note: Exclusion is not necessary before the end of the school day.)
  - Impetigo, only if student has not been treated after notifying family at the end of the prior school day. (Note: Exclusion is not necessary before the end of the school day as long as lesions are covered.)
  - Chickenpox (varicella) until all lesions have dried or crusted (usually 6 days after onset of rash) and no new lesions have appeared for at least 24 hours.
  - Rubella, until 7 days after rash appears.
  - Pertussis, until 5 days of appropriate antibiotic treatment (21 days if untreated).
  - Mumps, until 5 days after onset of parotid gland swelling.
  - Measles, until 4 days after onset of rash.
  - Hepatitis A virus infection, until 1 week after onset of illness or jaundice or as directed by the health department (if the student's symptoms are mild). (Note: Protection of

others in the group should be checked to be sure everyone who was exposed has received a vaccine or receives a vaccine immediately).

- 2019 SARS CoV2,
  - Presumed or diagnosed, follow current federal, state, and local guidance:
    - Symptom-based strategy
      - At least 10 days have passed since symptoms first appeared AND
      - No fever for 24 hours (1 full day) without the use of fever reducing medication, AND
      - Other symptoms have improved such as cough and shortness of breath.
    - Test based strategy – test (if available) to determine if still contagious
      - Provision of results of two negative FDA Emergency Use Authorized tests in a row spaced 24 hours apart, AND
      - No longer has a fever without the use of fever reducing medication, AND
      - Other symptoms have improved such as cough and shortness of breath.
  - Possible Exposure
    - If you feel healthy but:
      - Recently had close contact with a person with COVID-19 stay home and monitor your health (quarantine), AND
      - Stay home until 14 days after your last exposure.
      - Check your temperature twice a day and watch for symptoms of COVID-19.
      - If possible, stay away from people who are at higher risk for getting very sick from COVID-19.
  - Refer to CDC for most current and up-to-date guidelines.

Reference: Center for Disease Control and Prevention (n.d.). Discontinuation of Isolation for Persons with COVID-19 Not in Healthcare Settings. Retrieved from <https://www.cdc.gov/coronavirus/2019-ncov/hcp/disposition-in-home-patients.html>

National Association of School Nurses (2020). Interim Guidance: Role of the School Nurse in Return to School Planning. Retrieved from <https://higherlogicdownload.s3.amazonaws.com/NASN/3870c72d-fff9-4ed7-833f-215de278>