

GUIDELINES FOR COMMUNICABLE DISEASES

The following guidelines will be used in controlling the listed communicable diseases in the schools.

1. **CHICKENPOX:** Excluded from school attendance until free of fever and all "sores" are scabbed over (no drainage)...usually 5-7 days.
2. **IMPETIGO/INDIAN FIRE:** Should be seen by physician and may return to school with authorization after treatment has begun.
3. **CONJUNCTIVITIS/PINK EYE:** Excluded until treatment by a physician is begun or until symptom free.
4. **RINGWORM:** Ringworm on the body should be reported to the school nurse and he/she will advise family of recommended treatment. Student is not excluded from school unless the ringworm has indications of infection or other unusual characteristics. Ringworms on the scalp are excluded from school and must have a physician's authorization to return.
5. **SCABIES:** Excluded from school. Readmission with a physician's authorization.
6. **STREP THROAT OR SCARLET FEVER:** Should have a note from a physician stating the student is being treated. Generally, may return to school 24 hours after start of antibiotic therapy.
7. **PEDICULOSIS/HEAD LICE:** Excluded from school until recommended treatment accomplished and a note obtained from the school nurse stating student is free of nits (eggs) and may return to school; or with a note from a physician stating the student has been treated, is nit free and may return to school.
8. **HIV/AIDS:** Attendance and the type of education setting shall be based on the physical condition, the behavior, the neurological development, and the expected type of interaction with others in the proposed setting. These decisions shall be made using a team approach including the student's physician, a school nurse, the parent or guardian, and an education personnel associated with the proposed education setting. Risks and benefits to both the affected student and others in the setting will be considered. Since the risk of transmission in a school is almost

non-existent, if the committee feels that the benefits of an unrestricted setting outweigh the risk of the infected student acquiring potentially harmful infections, the student will be allowed to attend school in an unrestricted setting. For the infected preschool age child and for some neurologically handicapped children who lack control of their body secretions or who display behavior such as biting; and, those children who have uncoverable, oozing lesions, a more restricted environment may be advisable. This decision will be reviewed periodically and if condition changes. If the health of student does not allow his/her attendance in a regular education program, education service will be provided in a setting that is appropriate to the health status of the student while affording adequate protection to both the infected student and school employees. Persons involved in the care and education of HIV/AIDS infected children must respect the student's right to privacy, including maintaining confidential records. The number of personnel who are aware of the student's condition should be kept to only those who need this information to assure proper care of the student.

Adopted: 9/16/87

Adopted: 7/6/88

Revised: 12/2/98