



**Greeley-Evans | Weld County School District 6
Office of Health Services**

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District 6 Illness Exclusion Guidelines

When Children and Staff Should Stay Home from School

Outbreaks of illnesses may require more strict return to school requirements. When there is concern about outbreaks in the school, it is important to consult with the school nurse.

Main reasons to keep children and staff at home:

1. The child or staff member does not feel well enough to take part in usual activities (fussy, crying, overly tired).
2. A child needs more care than teachers and staff can give while still caring for the other children.
3. The child or staff member has symptoms or an illness is on this list, and staying home is required.

Symptom Guidance	The Student or Staff Must Stay Home?
Diarrhea -Frequent, loose, or watery stools (poop) compared to normal ones that are not caused by food or medicine.	Yes – Unless the diarrhea is related to an existing long-term medical condition, is explained by a diagnosed condition not requiring the person to stay home, or is consistent with the person's normal. The child or staff member may return to school or child care 24 hours after their last episode of diarrhea unless the diarrhea is caused by an illness that requires them to stay home longer. If the diarrhea is explained by a specific illness, then the child or staff can return to school or child care following exclusion guidelines for that illness.
Fever - Temperature of 100.4°F or greater	Yes – The child or staff member may return to school or child care if the fever has been resolved for 24 hours without fever reducing medications unless the fever is caused by an illness that requires them to stay home longer.
Flu-Like Symptoms Fever, Sore throat, Runny nose, congestion	Yes - Children and staff may return to school or child care as long as they are fever-free for 24 hours without the use of fever-reducing medications and other symptoms are improving.
Vomiting/Throwing Up	Yes – Unless the vomiting is related to an existing long-term medical condition or is explained by a diagnosed condition not requiring the person to stay home. If the vomiting is unexplained and not consistent with the person's normal state of health, the child or staff member may return 24 hours after their last episode of vomiting. If the vomiting can be explained by a specific illness, then follow the exclusion guidelines for that illness. If a child with a recent head injury vomits, seek medical attention.
Chicken Pox	Yes - Until the blisters have dried and crusted (usually 6 days), or in immunized people without crusting, until no lesions within 24 hour period.
Croup, RSV (respiratory syncytial Virus)	Yes - Should remain out of school or child care setting until they are fever free 24 hours without the use of fever-reducing medications and other symptoms have been improving for 24 hours.
Strep Throat	Yes - for 12 hours after starting antibiotics unless the doctor says it is okay to return to school sooner.

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Symptom Guidance	The Student or Staff Must Stay Home?
Pink Eye- (Conjunctivitis)	No – Children and adults do not need to stay home unless they have a fever or are not able to participate in usual activities. Call your doctor for advice and possible treatment. Encourage frequent hand washing.
Hand, Foot & Mouth Disease	No - exclusion necessary unless the child or adult meets other exclusion criteria, is drooling uncontrollably and has mouth sores or is not able to participate in usual activities.
Lice	Exclusion is for children found with live head lice only , may return after they have had the first treatment. *Research does not support school exclusion for nits (lice eggs).
Hepatitis A, Salmonella, Shigella, or Shiga-toxin producing E. coli	Yes - Children and staff may return to school/child care when cleared by the health department.
Impetigo	Yes - Children and adults need to stay home until 24 hours after antibiotic treatment has started.
Mouth Sores	Yes - If a student is drooling uncontrollably.
Rash	Yes - If a student has symptoms in addition to the rash such as behavioral change, fever, joint pain, bruising not associated with injury, or if the rash is open and oozing.
Ringworm	Yes - may stay in school until the end of the day, but may not return until they have had the first treatment. Keep the area covered for the first 3 days.
Stomach Ache or Abdominal Pain	Yes - If the pain is severe, if the pain appears after an injury, or if the student had symptoms in addition to the stomach ache such as vomiting, fever, diarrhea, etc.
Swollen Glands	Yes - If the student has symptoms in addition to the swollen glands such as difficulty breathing or swallowing, fever, etc.
Earache	No - exclusion necessary. Notify parents if they are unaware of earache, especially in young children.
Headache	No - exclusion necessary. Contact the nurse if the headache is persistent, severe, or is accompanied by other symptoms. Follow the healthcare plan if a student has one for headache.
Norovirus	Yes - Exclude children and staff for at least 48 hours after their last episode of vomiting and/or diarrhea.
Contagious Illness	Students on antibiotics for contagious illnesses, such as strep throat, tonsillitis, bronchitis, or pneumonia, must stay home until antibiotics have been taken for 24 hours or longer if directed by a healthcare provider or public health department. All skin lesions must be covered by a bandage or clothing during the school day. This may include impetigo, ringworm, scabies, and other fungal, bacterial or viral skin infections.
Other Vaccine Preventable Diseases - Measles, Mumps, Rubella and Pertussis	Yes - Children and staff can return to school once they are no longer contagious (see Infectious Disease Guidelines). Public health consultation may be necessary.

*Adapted from CDPHE - Infectious Diseases in Child Care and School Setting, Nov. 2022

<https://drive.google.com/file/d/12NZoSBRjN5s4rFCNKaCu2RCzELeUT5nC/view>

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