



St. Louis King of France Catholic School

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Rev. Colm J. Cahill, Pastor

Shannon Culotta, Principal

Illness/Unusual Behavior Policy

Children will occasionally get sick and may need to be sent home for rest and care or to receive medical attention. It is always our top priority to ensure that all children are healthy and happy. The following is a list of mandated guidelines for particular illnesses. Please understand that this is not an exhaustive list. It includes common illnesses for infants and toddlers. To maintain a safe and healthy environment, we will enforce the following guidelines, as mandated by the Department of Health in Title 51, PUBLIC HEALTH—SANITARY CODE Part XXI. Day Care Centers and Residential Facilities.

Illness	When the Child Can Return to School
Fever of unknown origin (100.4 or greater) and some behavioral signs of illness	Fever free WITHOUT medication for 24 hours or cleared by the child's physician
Pinkeye	24 hours AFTER starting drops
Vomiting	Eating and drinking normally for 24 hours, symptom-free
Undiagnosed rash/skin infection	Cleared by the child's physician as non-contagious
Diarrhea: One (1) uncontained diarrhea OR Two (2) times or more	Eating and drinking normally for 24 hours WITHOUT diarrhea, or cleared by the child's physician
Mouth sores with drooling	With a doctor's note
Severe cough	With a doctor's note
Ear Pain/Infection	With a doctor's note
Sore Throat	With a doctor's note
Staph Infection	Day after treatment, WITH a doctor's note. The area must remain covered at all times.
Flu	Symptom-free and fever-free without medication for 24 hours
Hand, Foot & Mouth	Day after treatment, WITH doctor's note. ALL open sores MUST remain covered.
Chicken Pox	Skin lesions (blisters) all scabbed over

I, _____, understand that St. Louis King of France will follow the guidelines listed above for illnesses and unusual behaviors. If my child is not picked up within an hour of being contacted, SLKF and its administration are instructed by the Department of Education and the Department of Health to call an ambulance to pick up my child and transport them to the nearest hospital for proper medical attention, if deemed necessary. I also understand that SLKF reserves the right to request my child be picked up if he/she elicits any unexplained and/or uncommon symptoms and behaviors. I understand that these guidelines are created for the health and safety of my child and my child's classmates.

Name of Child: _____

Signature of Parent: _____ Date: _____