



Provo City School District

Policy Series 3000: Students

3413 P1

Communicable Diseases: Keeping Students Home from School

The following are conditions of special concern for which students should be kept home from school and when necessary, be diagnosed and treated by a licensed physician before returning:

1. Colds and Flu: Coughing, sneezing, chills, general body discomfort, fatigue, fever, and discharge from the eyes and/or nose. Students should be kept home until fever is resolved for 24 hours, without the use of fever-reducing medication and any green or yellow discharge is resolved.
2. COVID-19: Symptoms can be mild to severe and include cough, shortness of breath or difficulty breathing, fever, chills, muscle pain, sore throat, and/or new loss of taste or smell. Other less common symptoms include nausea, vomiting, and/or diarrhea. A person testing positive and showing symptoms should stay home until they are cleared by a licensed medical professional or by the Utah County Health Department.
3. Diarrheal Diseases - An increasing number of stools compared with the child's normal pattern with increased water and/or decreased form, which may be accompanied by nausea, vomiting, abdominal cramping, headache, and/or fever. If any kind of stool softeners (fleets, enema, laxative, etc.) are administered, student must remain home for at least 24 hours;
4. Fifth Disease or Erythema Infectiosum - A viral rash that is common among children. Symptoms include a red "slapped-face" rash on the face, a flat or raised red rash on the arms or legs often accompanied with a low-grade fever. If a pregnant woman who is at risk becomes infected, there is a small chance (less than 10 percent) that a miscarriage may occur. During an outbreak of Fifth Disease, a pregnant woman working around infected people should consult her physician within two weeks of exposure regarding potential risk;
5. Impetigo - Blister-like skin lesions or oozing or crusted sores must be diagnosed and treated with antibiotics for at least 24 hours before the child may return to school;
6. Pink-Eye or Conjunctivitis - Redness of eye(s), watery, white or yellow discharge from the eye, matted eyelashes, burning or itching eyes must be treated with antibiotic for at least 24 hours before the child may return to school. If antibiotics are not prescribed, a doctor's release is required prior to the student returning to school;
7. Any open wound or sore with drainage must be covered with a dressing;
8. Persistent cough: Cough lasting longer than 3-4 days, especially if it induces vomiting, passing out, or which produces colored sputum;
9. Nausea or vomiting: must be free from vomiting 24-48 hours before returning to school;
10. Strep throat or other bacterial infection must be treated with an antibiotic for at least 24 hours and be fever-free for 24 hours before the child may return to school;
11. Fever 100.4 degrees or above lasting 2-3 hours. Must be afebrile for 24-48 hours

- without** use of fever- reducing medication before returning to school;
12. Presence of any skin rashes that might be due to an infection (i.e. measles, strep, staph, fungus, chicken pox). These should be evaluated by a physician before returning to school;
 13. Foul smelling urine, or blood in urine;
 14. Earache or ear drainage;
 15. Pediculosis (Head Lice) - If a student is suspected of having head lice at school, a designated school employee shall discreetly check for live lice or nits (eggs). Care should be taken to protect the privacy of the student and family. In the case where the student is found to be affected, parents of the child will be immediately notified and provided information about "Evidence-based Treatment Options" and steps to follow. At the parents' discretion, the child may be either checked-out or sent home at the end of the day. To the extent possible, head lice should not contribute to student absenteeism; therefore, removal of the child from school is usually unnecessary. If the affected student remains at school, the child should be restricted from activities involving head-to head contact or sharing of personal items with other children until treated. If additional cases of head lice occur with other students in the same classroom, the principal may choose to send home the "Head Lice Information" letter to the parents of children in that class. Due to privacy concerns and the potential psychological impact, classroom-wide or grade level student head checks are strongly discouraged unless unusual circumstances warrant it.

Contents will change periodically per health department guidelines.

Individuals in charge of schools shall work with the Utah County Health Department regarding any individual suffering from or suspected of having a disease that is communicable. When deemed appropriate, the school district reserves the right to request a doctor's release prior to a student returning to school.

For additional guidelines regarding public health and contact information for the Utah County Health Department: www.utahcountyonline.org/Dept2/Health/

Legal Resources:
State Code 26.6.6

Synopsis:
Duty to report individual suspected of having communicable disease.

Utah County Health Department

Policy for Dealing with Communicable Disease in the School/Day Care Setting

Approved: November 14, 2017
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