










# I Need to Stay Home If....

<p>I have a fever</p>  <p>Temperature of 100.2 or higher</p>	<p>I am vomiting</p>  <p>Within the past 24 hours</p>	<p>I have a runny nose</p>  <p>With yellow/green discharge</p>	<p>I have a persistent cough</p>  <p>Croupy cough</p>	<p>I have diarrhea</p>  <p>Within the past 24 hours</p>	<p>I have a rash</p>  <p>Impetigo, ringworm, or body rash with itching or fever</p>	<p>I have head lice</p>  <p>Itchy head, active head lice or nits</p>	<p>I have an eye infection</p>  <p>Redness, itchy, and/or "crusty" drainage from eye(s)</p>	<p>I have a communicable disease</p>  <p>Flu, Measles, MRSA, etc.</p>
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# I am ready To Return If..

<p>Fever free for 24 hours</p>	<p>Free from vomiting for at least 24 hours</p>	<p>On required antibiotics for at least 24 hours</p>	<p>Cleared by my doctor and have note specifying my continued symptoms are not contagious to others</p>	<p>Free from diarrhea for at least 24 hours</p>	<p>Free from rash, itching, open sores, and fever</p>	<p>Treating with appropriate lice treatment and free from nits or lice</p>	<p>Evaluated by my doctor, appropriate medication, and/or have a note from my doctor stating I may</p>	<p>No longer contagious and the incubation period for any communicable disease has passed</p>
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