Dear Parent/Guardian:

Please follow these guidelines to help all students stay healthy and ready to learn.

Please **DO NOT SEND AN ILL STUDENT TO SCHOOL.** The other page of this letter gives examples of when your student should not be in school.

**If your student is ill, please CONTACT THE SCHOOL**.

**Please contact your health care provider** about any **SERIOUS ILLNESS** or if you are worried about your student’s health. If you need help in finding a health care provider, you may contact the local public health authority.

**Please notify the school** if your child is diagnosed with a **CONTAGIOUS DISEASE,** including these: *chickenpox, COVID-19, diarrhea caused by E. coli or Salmonella or Shigella, hepatitis, measles, mumps, pertussis, rubella, scabies, tuberculosis, or another disease as requested.* The school will protect your private information as required by law. [OAR 333-019-0010; ORS 433.008.]

**Please notify the school** if your student requires **MEDICATIONS** during school hours. Follow school protocols for medication at school. If your student’s illness requires antibiotics, the student must have been on antibiotics for at least 24 hours before returning to school, and longer in some cases. Antibiotics are not effective for viral illnesses.

**Please notify the school** if your student has an **UNDERLYING OR CHRONIC HEALTH CONDITION**. We will work with you to address the health condition so that the student can learn. With consent, the school nurse may consult with the student’s health care provider about the health condition and necessary treatments. To contact the school nurse or health office please call or email.

We want to support your student. Please contact us if you have questions or concerns.

## PLEASE KEEP STUDENTS WITH SYMPTOMS OUT OF SCHOOL

## This list is school instructions, not medical advice. Please contact your health care provider with health concerns.

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| **SYMPTOMS OF ILLNESS** | **THE STUDENT MAY RETURN AFTER…**  \*The list below tells the shortest time to stay home.  A student may need to stay home longer for some illnesses. |
| A picture containing text  Description automatically generated**Fever**: temperature of 100.4°F (38°C) or greater | \***Fever-free for** **24 hours** without taking fever-reducing medicine **AND per guidance for primary COVID-19 symptoms.** |
| Icon  Description automatically generatedNew **cough** illness | **\* Symptoms improving for 24 hours** (no cough or cough is well-controlled) **AND per guidance for primary COVID-19 symptoms.** |
| Icon  Description automatically generatedNew **difficulty breathing** | **\* Symptoms improving for 24 hours** (breathing comfortably) **AND per guidance for primary COVID-19 symptoms. à *Urgent medical care may be needed.*** |
| Icon  Description automatically generated**Diarrhea**: 3 loose or watery stools in a day **OR** not able to control bowel movements | **\*Symptom-free for 48 hours OR** with orders from doctor to school nurse. |
| Icon  Description automatically generated **Vomiting:** one or more episode that is unexplained | **\*Symptom-free for 48 hours OR** with orders from doctor to school nurse. |
| Icon  Description automatically generated**Headache with stiff neck and fever** | **\*Symptom-free OR** with orders from doctor to school nurse.Follow fever instructions above. **à *Urgent medical care may be needed.*** |
| **Skin rash** or **open sores** | **\*Symptom free**, which means rash is gone OR sores are dry or can be completely covered by a bandage  **OR** with orders from doctor to school nurse. |
| **Red eyes with colored drainage** | **\*Symptom-free**, which means redness and drainage are gone **OR** with orders from doctor to school nurse. |
| **Jaundice**: new yellow color in eyes or skin | **\*After the school has orders** from doctor or local public health authority to school nurse. |
| **Acting differently without a reason**: unusually sleepy, grumpy, or confused. | **\*Symptom-free**, which means return to normal behavior **OR** with orders from doctor to school nurse. |
| **Major health event**, like an illness lasting 2 or more weeks OR a hospital stay, **OR**  **health condition requires more care than school staff can safely provide.** | **\*After the school has orders** from doctor to school nurse **AND** after measures are in place for the student’s safety. Please work with school staff to address special health-care needs so the student may attend safely. |