

Date:_____

Dear	Parent or Guardian:
impro	ar child gets sick, it is usually appropriate to keep him/her home from school until symptoms have oved. A sick child will not be able to perform well in school and is likely to spread the illness to so. To protect the safety of students and staff, the Alachua County Public Schools exclusion lines recommend sending any student home or denying entry for certain symptom/s.
Toda	y your child presented to the school clinic with the following symptom/s:
	Cold symptoms: A very runny nose or bad cough that disrupts classroom learning. May return once symptoms are subsiding and no fever has developed.
	<u>Multiple</u> episodes of vomiting. May return to school once vomit-free for 24 hours (without the use of anti-nausea/vomiting medication).
	<u>Multiple</u> episodes of diarrhea. May return to school once diarrhea-free for 24 hours (without the use of antidiarrheal medication).
	Fever of 100.4° F (38° C) or greater with thermometer. May return to school once fever-free for 24 hours (without the use of fever-reducing medication).
	Flu-like symptoms: Headache, fever, sore throat, runny and stuffy nose, cough, feeling bad. May return to school once fever-free for 24 hours (without the use of fever-reducing medication).
	Pink-eye symptoms: Please take student to a health care provider for evaluation . If diagnosed, student must be on antibiotic eye drops for 24 hours before returning to school.
	Rash. For all unidentified rashes/skin conditions student will be excluded until diagnosis. Student must have a note from a health care provider to return to school.
	Strep Throat symptoms: Please take student to a health care provider for evaluation . If diagnosed, student must be on antibiotics for at least 24 hours before returning to school.
	Other:
found	e refer to the School Health Services Handbook for policies regarding student illnesses, which can be on the school district website: www.sbac.edu , under the Health Services Department page. cooperation on this issue is appreciated. For any questions or concerns, please contact your School Nurse
Schoo	ol Nurse Phone

Form No.: HTH-2425-003 – Illness – Parent Letter / Health Revised Date: 2/19/25