

What to do: advice on childhood illnesses

1. Your child can go to school but may need treatments as shown

2. Can be spread to other children. Some restrictions for attending school

3. Your child cannot go to school – contact your GP. See advice below for when they can return

What it's called	What it's like	OK to go to school?	More advice
Chicken Pox	Rash begins as small, red flat spots that develop into itchy fluid-filled blisters		Although the usual exclusion period is 5 days, all lesions should be crusted over before children return to nursery or school.
Common cold	Runny nose, sneezing, sore throat		Children should be given paracetamol, plenty of fluids to drink and can be sent to school. Ensure good hand hygiene – dispose of tissues and regularly wash hand with soap and water
Conjunctivitis	Teary, red, itchy, painful eyes		Treatment is not usually required. Try not to touch eye to avoid spreading
Flu	Fever, cough, sneezing, runny nose, headache, body aches and pain, exhaustion, sore throat		Children should go back to school when recovered - this is usually about five days Ensure good hand hygiene
Glandular Fever	High temperature, sore throat (usually more painful than any before) and swollen glands		Child needs to be well enough to concentrate at school
Hand, Foot and Mouth disease	Fever, sore throat, headache, small painful blisters inside the mouth and on tongue and gums (may also appear on hands and feet)		Children can go to school with hand, foot and mouth disease
Head Lice	Itchy scalp (may be worse at night)		Treat child and all other family members by wet combing with a nit comb and conditioner
Impetigo	Clusters of red bumps or blisters surrounded by area of redness		See GP. Back to school when the lesions crust over or 48 hours after the start of antibiotics
Measles	Fever, cough, runny nose, and watery inflamed eyes. Small red spots with white or bluish white centres in the mouth, red blotchy rash		Contact your GP (by phone initially) if you think that your child might have measles. Back to school 4 days from on-set of rash
Ringworm	Red ring shaped rash , may be itchy rash, may be dry and scaly or wet and crusty		See pharmacist for advice about treatment.
Scabies	Intense itching, pimple-like rash . Itching and rash may be all over the body but is commonly between the fingers, wrists, elbows and arms		See pharmacist for advice about treatment. Back to school after first treatment
Scarlet fever / strep throat	Severe sore throat and painful glands in neck. No runny nose or cough. Associated with sandpaper-like pink/red rash in scarlet fever.		See GP. Return to school 24 hours after starting antibiotics
Shingles	Pain, itching, or tingling along the affected nerve pathway. Blister type rash.		Only stay off school if rash is weeping and not covered
Sickness bug/diarrhoea	Stomach cramps, nausea, vomiting and diarrhoea		Return to school 48 hours after the last episode of diarrhoea or vomiting. See GP if they appear to be getting dehydrated (passing little urine or becoming lethargic)
Threadworms	Intense itchiness around the anus		Get treatment from local pharmacy or GP. Everyone at home should be treated
Mild tonsillitis	Sore throat associated with runny nose or cough		See GP if they are not starting to improve or fever persists for more than 5 days

Please visit the following website for more information:
<https://what0-18.nhs.uk/parents/carers/child-unwell-ok-go-nurseryschool>

Good hand hygiene and single tissue use are the most effective ways to reduce the spread of illness both at home and school.

This information is a guide and has been checked by health professionals, however if you are unsure about your child's wellbeing we recommend you contact your pharmacy or GP to check

CATCH IT 
Germs spread easily. Always carry tissues and use them to catch your cough or sneeze.

BIN IT 
Germs can live for several hours on tissues. Dispose of your tissue as soon as possible.

KILL IT 
Hands can transfer germs to every surface you touch. Clean your hands as soon as you can.


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