

# RECOMMENDATIONS for Temporary Exclusion from a CHILD CARE SETTING



- ✖ Illness that **prevents the child from participating** comfortably in program activities.
- ✖ Illness that results in a **greater need for care** than the staff can provide without compromising the health and safety of other children.
- ✖ **Fever, lethargy, irritability, persistent crying, difficult breathing** and/or other manifestations of possible severe illness.
- ✖ **Persistent abdominal pain** (continuous for more than two hours) or intermittent abdominal pain associated with fever, dehydration, or other systemic signs or symptoms.
- ✖ **Chicken pox (Varicella):** exclude until all lesions have dried and crusted or, in immunized children without crusts, until no new lesions appear within a 24-hour period.
- ✖ **COVID-19:** exclude based on current CDC and SD Department of Health guidance, see website [doh.sd.gov](https://doh.sd.gov).
- ✖ **Diarrhea:** exclude if
  - stool not contained in diaper
  - fecal accidents occur in a child normally continent
  - stool frequency exceeds two or more stools above normal for that child
  - stool contains blood or mucus
- ✖ **E. coli, shiga toxin-producing (STEC):** exclude until diarrhea resolves and two stool cultures are negative.
- ✖ **Haemophilus influenzae type B, invasive (Hib):** exclude until after the child has been cleared by a physician.
- ✖ **Head lice (Pediculosis Capitis):** refer for treatment at end of program day and readmit once completion of treatment recommended by a physician.
- ✖ **Hepatitis A:** exclude until one week after onset of illness.
- ✖ **Impetigo (Streptococcal infection of the skin):** exclude until after 12 hours of antibiotic treatment.
- ✖ **Influenza and Influenza-like illness:** exclude until fever has been absent for 24 hours in an unmedicated state. Additional exclusions may be necessary for documented novel strain or pandemic influenza based on SD Department of Health and CDC guidance.
- ✖ **Measles:** exclude until 4 days after onset of rash.
- ✖ **Meningococcal disease (Neisseria meningitidis):** exclude until after 24 hours of antibiotic treatment.
- ✖ **Methicillin-resistant Staphylococcus aureus (MRSA):** generally no exclusion; considerations may exist if confirmed MRSA is present from a wound in which drainage is occurring and cannot be covered and contained.
- ✖ **Mouth sores:** exclude if associated with drooling, unless a physician has determined it is not a communicable disease.
- ✖ **Mumps:** exclude until 5 days after the onset of parotid gland swelling.
- ✖ **Pertussis (Whooping cough):** exclude until completion of 5 days of appropriate antibiotic treatment. If appropriate antibiotic treatment is not received, exclude until 21 days after onset of cough.
- ✖ **Rash (with fever or behavior change):** exclude until a physician has determined it is not a communicable disease.
- ✖ **Rubella:** exclude until 7 days after onset of rash.
- ✖ **Scabies:** exclude until after treatment has started.
- ✖ **Shigella:** exclude until 24 hours after diarrhea resolves.
- ✖ **Strep throat (Streptococcal pharyngitis):** exclude until after 12 hours of antibiotic treatment.
- ✖ **Tuberculosis:** exclude until a physician, concurring with the SD Department of Health, states the child is not infectious.
- ✖ **Vomiting:** exclude if vomiting occurs two or more times in 24 hours, unless the vomiting is determined to be caused by a non-communicable condition and the child is not in danger of dehydration.

*2024 Red Book, American Academy of Pediatrics, 33rd Edition; 2024 Managing Infectious Diseases in Child Care and Schools, A Quick Reference Guide, American Academy of Pediatrics, 6th Edition; 2024 Control of Communicable Diseases Manual, American Public Health Association, 21st Edition.*

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**If you have questions about infectious diseases or immunizations,  
contact the Department of Health or your physician.**

South Dakota Department of Health, Office of Disease Prevention Services:  
605-773-3737 or 800-592-1861

Local Disease Intervention Specialist: \_\_\_\_\_ Phone: \_\_\_\_\_

Local DSS Child Care Licensing Office: \_\_\_\_\_ Phone: \_\_\_\_\_

See also SD Department of Health disease fact sheets: <https://doh.sd.gov/diseases/>

