

KEEP ME HOME IF...

**I HAVE A RASH,
LICE OR NITS**

**I HAVE AN EYE
INFECTION**
THICK MUCUS OR PUS DRAINING
FROM THE EYE

**I HAVE
A FEVER**
100°F OR MORE

I'M VOMITING
TWO OR MORE TIMES IN
24 HOURS

**I HAVE
DIARRHEA**
3 OR MORE WATERY STOOLS
IN 24 HOURS

**I HAVE A
SORE THROAT**
WITH FEVER OR
SWOLLEN GLANDS

**I JUST DON'T
FEEL GOOD**
UNUSUALLY TIRED, PALE, LACK OF SLEEP
OR APPETITE, CONFUSED OR CRANKY

WHEN YOUR CHILD IS SICK...

HAVE PLANS FOR BACKUP CHILD CARE
AND TELL YOUR CHILD CARE PROVIDER WHAT IS
WRONG, EVEN IF YOUR CHILD STAYS HOME.
DO NOT MEDICATE YOUR CHILD TO SUPPRESS
SYMPTOMS IN ORDER TO ATTEND CHILD CARE

