Rashes and Skin Infections	Recommended period to keep off school	Comments
Athlete's Foot	None	Athlete's foot is not a serious condition. Treatment is recommended
Chicken Pox	Until all Vesicles crusted over	Care needed with regards to contact with Vulnerable children or pregnant staff members
Cold Sores	None	Avoid kissing and contact with sores. Cold sores are generally mild and self- limiting
German Measles	Four days from onset of rash	Preventable by immunisation (MMR x 2 doses) - care needed regards contact with Pregnant staff members
Hand, Foot and Mouth	None	Contact the Public Health if large number of cases. Exclusion may be considered in some circumstances
Impetigo	Until Lesions are crusted and healed or 48hrs after commencing antibiotic treatment	Antibiotic treatment speeds healing and reduces the infection period
Measles	Four days from onset of rash	Preventable by Vaccination (MMR x 2)
Molluscum Contagiosum	None	A self-limiting condition
Ringworm	Time away from school not usually required	Treatment is required
Rosela (Infantum)	None	None
Scabies	Child can return after first treatment	Household and close contacts require treatment
Scarlet fever	Child can return 24hrs after commencing treatment	Antibiotic treatment recommended for the affected child
Slapped Cheek	None once rash has developed	Care needed if close contact to vulnerable child or pregnant staff member

Rashes and Skin Infections	Recommended period to keep off school	Comments
Shingles	Absent only if rash is weeping and cannot be covered	Can cause chickenpox in those who are not immune - it is spread by very close contact and touch.
Warts and Verrucae	None	Verrucae should be covered in swimming pools, gymnasiums and changing rooms.
Diarrhoea and vomiting Illness	Recommended period to keep off school	Comments
Diarrhoea and/or vomiting - more than 3 times in 1 hour	48 hours from last period of Diarrhoea and/ or vomiting	
E.coli O157 VTEC Typhoid Shigella	Should be off for 48 hours from the last episode of Diarrhoea Further time off may be required for some children until they are no longer excreting	Further time off is required for younger children under 5 as they have difficulty in following hygiene practices Children in these categories should be off until there is evidence of microbiological clearance
Cryptosporidiosis	Off for 48 hours from the last episode of diarrhoea	Child required to be off from swimming for two weeks after the diarrhoea has settled
Respiratory infections	Recommended period to keep off school	Comments
Flu	Until recovered	Be careful where a close contact is a vulnerable child
Tuberculosis	School to contact Public Health for advice	Required prolonged close contact to spread
Whooping Cough	48 hours from commencing antibiotic treatment, or 21 days from the onset of the illness if no antibiotic treatment	Preventable by vaccination. After treatment non-infectious coughing could continue for many weeks.

Other Infections	Recommended period to keep off school	Comments
Conjunctivitis	None	
Diphtheria	off work until school receive confirmation	Family contacts must also not attend.

	from Public Health of when they can return	Preventable by vaccination.
Glandular Fever	None	
Head lice	None	Treatment recommended only in cases where live lice have been seen.
Hepatitis A	Off until seven days after onset of jaundice (or seven days after symptom onset if no jaundice)	School to speak with the Public Health.
Hepatitis B, C, HIV, AIDS	None	Bloodborne viruses that are not infectious through casual contact. For cleaning of body fluids SSE Good hygiene practice is to be followed
Meningococcal Meningitis / Septicemia	Until recovered	Some forms are preventable by vaccination. No reason for siblings or close contacts to not attend school.
Meningitis due to other bacteria	Until recovered	Hib and Pneumococcal meningitis are preventable by vaccination. No reason for siblings or close contacts to not attend school
Meningitis Viral	None	Milder illness. There is no reason for siblings or close contacts to not attend.
MRSA	None	Good hygiene, in particular handwashing and environmental cleaning are important to minimise any danger of spread.
Mumps	Child is off for 5 days after onset of swelling	Preventable by vaccination (MMR x 2 doses)
Threadworms	None	Treatment is recommended for the child and household contacts
Tonsillitis	None	Most cases are due to virus and do not need antibiotics.