

No simple formula tells when a child is too sick to go to school

by R.J. Ignelzi

Being a parent means having to make tough decisions. Determining when your child is big enough to move out of a car seat. Figuring out if or when your child should cross the street alone. And, on a more regular basis, deciding when your child is too ill to go to school.

Lori Price, an Encinitas, Calif., mother of two, had to make that decision on a recent Monday morning. Her 5-year-old son Nate had a slight fever and seemed uncharacteristically sleepy the day before. But by the next morning, Price thought he seemed well enough to go to school.

Not long after she dropped him off at kindergarten, her grocery shopping was interrupted by a call from her children's school. Nate was in the nurse's office complaining of lethargy and a sore throat. He probably should go home, said the nurse.

"Geez, I felt like such a bad mom," Price says. "I guess I was wrong and I should have kept him home. But, how do you ever know for sure?"

Every morning, mothers of school-age children ask that same question, especially during cold and flu season.

When is a child too sick to go to school? When is he or she at risk of infecting other children? When is being at home with Mom, bed rest and maybe a cup of chicken soup more important than getting an education?

This can be a particularly troubling dilemma for working parents, who often have to take time off from their own job to care for a sick child.

SICK CALL - Despite minor sniffles, Emma Price, 8, with mom, Lori, and brother Nate, 5, heads to school. CNS Photo by Eduardo Contreras.

"I rarely take a sick day for myself because I need those (days off) for my daughter when she's sick," says Rose Camacho, mother of 7-year-old Amanda and an insurance company secretary. "Sometimes I know she probably shouldn't be in school, she's probably (infecting) other kids, but I can't always leave my job. It's really hard."

Although many schools have a "sick day policy," offering parents a guide to when children should be kept home, the "rules can be very confusing," says Dr. Howard Taras, a pediatrician with the Community Pediatrics division of the University of California San Diego School of Medicine.

"Different schools have different policies, and even the way they're interpreted can differ from person to person," he says.

Some parents look for what they believe to be "sure signs" that their child is ill, such as green nasal mucus or a temperature of 100 degrees. But, doctors say these symptoms don't necessarily mean the child is sick, and definitely aren't enough to keep the youngster home.

"It's a myth that green nasal discharge is infectious. It just means it's thicker. Sometimes it means the cold has been around longer," Taras says. "It doesn't mean sinusitis or infection."

The same goes for what some parents think is a fever.

"Some people think 98.6 degrees is normal. It's just the average normal temperature (which can) vary during the day," Taras says. "A temperature of 100 or 100.1 degrees? I don't consider that to be a fever."

Usually, a fever is thought to be a temperature of 100.5 degrees and above, he says.

"In general, parents tend to keep their children out too often and send them back too late rather than too soon," said Dr. Leonard Kornreich, a Chula Vista, Calif., pediatrician. "We have seen parents who keep kids out three to five days for a cough and cold. That may be OK if the child is 4 or 5 and has a very bad cold, but when they're older, that long of time may be inappropriate."

To help determine how much school a sick child should miss, parents should try to figure out if the illness is viral or bacterial.

"If it's bacterial, like strep throat or some conjunctivitis (pink eye), you take antibiotics, and after 24 hours you're usually not contagious," Kornreich says.

But viral illnesses such as colds and flu aren't helped by antibiotics.

"If it's a virus, parents need to ask how sick is the child and how big of a problem will it be if another child gets the illness," he says.

Then there's always the possibility that the child may be exaggerating that cough or tummyache to get out of a math test or just because it's more fun to stay home and watch cartoons.

"Some kids are better at (faking it) than others, and sometimes it's difficult for parents to tell," Taras says.

That's why it's important to observe the child and confirm their complaints with how they're behaving.

"If you tell him he can stay home (after he complains he's ill) and he says 'Yay' and dashes around, he's probably not sick enough to stay home," Taras says. "Parents have to be good detectives."

But if a child occasionally feigns illness, "you can't get upset with the him," Taras says. "It's a normal and natural childhood reaction to like it when people bring you stuff in bed and you get lots of coddling."

Pediatricians offer the following tips to help you decide when your child needs a sick day.

COMMON COLD

If a child has a sniffle and a little cough, is that enough to keep him or her from school?

"The contagions from a cold are not enough reason to keep a child at home," says Taras, who notes school is probably where the child got the virus in the first place.

Parents shouldn't panic when their youngster comes down with a cold, because kids can be expected to get

eight to 10 colds annually, especially in the early years.

"A child with a cold may need to stay home if they have a fever or feel (very poorly)," he says. "However, with most colds, by the third day, most children should be able to be in school."

FEVER

If a child's temperature is 100.5 degrees or higher, keep him or her home. While at home, encourage drinking plenty of liquids. The child should be fever-free for 24 hours (without medicine) before returning to school.

"Expecting a school to manage a child with a fever is not fair. They're not staffed to do repeated temperature checks or administer Tylenol," Taras says.

UPPER RESPIRATORY ILLNESS

A child with bronchitis or influenza usually has a fever and should stay home from school, pediatricians say.

Kids with a bad cough need to stay home and maybe see a doctor. The cough could be due to a severe cold, bronchitis, flu or even pneumonia. When the cough is better, the child can go back to school. Don't wait for the cough to disappear completely because that could take more than a week.

SORE THROAT/STREP THROAT

A minor sore throat isn't really a problem, but a severe sore throat could mean strep throat even if there is no fever. Other symptoms of strep are headache and upset stomach. A child needs a special test to determine if it is strep throat and can return to school 24 hours after antibiotic treatments begin.

GASTROINTESTINAL ILLNESS

A child with diarrhea who must use the toilet repeatedly should stay home until the condition improves. Also, children whose stools are bloody or have mucus in them should stay home because it could be a sign of viral or bacterial infection. A child who is vomiting should also skip school until he or she is feeling better.

"Very young children, under the age of 6, who don't care for themselves very well, should probably stay home for 48 to 72 hours," Kornreich says. "When they get a little older and their hygiene is good enough that they wash their hands after they use the bathroom, then they can go back to school in a shorter amount of time."

RASH

If a child's rash is linked to an infection, staying out of school until it's under control is a good idea. However, if the child's rash isn't accompanied by a fever or other symptoms, it's probably OK to go to school.

"It may just be a contact or allergic rash. If you're not sure what the rash is, see your pediatrician," Kornreich

says.

The exception is chicken pox. Children with chicken pox should stay home and can return to school on the sixth day after their rash appears, sooner if the sores have dried up and crusted over.

Some children get a rash reaction from the measles, mumps rubella (MMR) vaccination. This is not contagious.

CONJUNCTIVITIS

A child who has bacterial conjunctivitis (pink eye) will have red, bloodshot eyes with yellow discharge. It's treated with antibiotic eyedrops or ointment, and the child can go back to school after 24 hours on the medication.

A child with nonbacterial conjunctivitis who has red eyes and clear watery discharge doesn't need antibiotics and can return to school right away if there are no other symptoms.

HEAD LICE

Children can return to school after they've been treated for live lice. There's no evidence that a student whose hair only has "nits," the eggs from head lice, can spread the infestation to other students by participating in school.

"A single treatment will kill active lice, and generally a child can go back the next day after treatment," says Kornreich, noting that the spread of lice is always riskier for younger children who may trade hats, etc.

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