
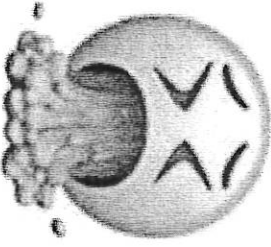
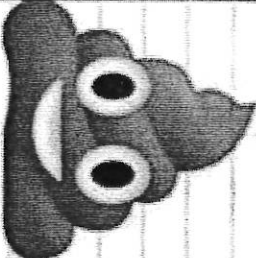
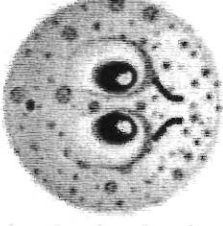

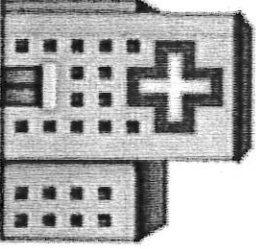


I NEED TO STAY HOME IF...

<p>I HAVE A FEVER</p>	<p>I AM VOMITING</p>	<p>I HAVE DIARRHEA</p>	<p>I HAVE A RASH</p>		<p>I HAVE AN EYE INFECTION</p>	<p>I HAVE BEEN IN THE HOSPITAL</p>
						
<p>Temperature of 100.4 or higher</p>	<p>Within the past 24 hours</p>	<p>Within the past 24 hours.</p>	<p>Body rash with itching or fever.</p>		<p>Redness, itching, and/or "crusty" drainage from eye.</p>	<p>Hospital stay and/or ER visit</p>

I AM READY TO GO BACK TO SCHOOL WHEN I AM....

<p>Fever free for 24 hours without the use of fever reducing medication i.e. Tylenol, Motrin</p>	<p>Free from vomiting for at least 2 solid meals</p>	<p>Free from diarrhea for at least 24 hours</p>	<p>Free from rash itching, or or fever. I have been evaluated by my doctor if needed.</p>		<p>Evaluated by my doctor and have note to return to school</p>	<p>Released by my medical provider to return to school.</p>
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