Symptoms That May Suggest Illness

Updated May, 2024:

- the vomiting and diarrhea sections were replaced with new content

The Thunder Bay District Health Unit (TBDHU) developed this resource for use by Licensed Child Care Centres. Please direct any questions to the public health inspector assigned to your centre/program at 807-625-5930 or toll-free 1-888-294-6630 (use ext. 5930).

Certain symptoms in children may suggest a child is ill with a communicable illness or disease.

Children who have any of the following symptoms should be sent home from child care and not return until:

- they no longer meet the exclusion criteria found in the updated Common Childhood Illnesses Manual (CCI) available at TBDHU.com/CCI OR
- a health care provider has examined them and determined they can return and they no longer meet the exclusion criteria reference above

The following information is meant as a guide to assist staff in taking the appropriate action for handling ill children. They are not guidelines for exclusion. As noted above, exclusion criteria (i.e. when the child can return to child care) can be found in the updated CCI at TBDHU.com/CCI.

Each child must be assessed individually, establishing what is 'normal' for the child. Every child's baseline is different and this must be considered for all listed symptoms.

If you are unsure or have any questions or concerns, please advise the parent/caregiver to seek an assessment from a health care provider.

If a note is provided from a health care provider, please be advised that TBDHU supports this assessment.

Symptoms that suggest a child may be ill and should be sent home:

Unusual behavior	If illness prevents participation in normal activities If child looks or acts differently, is unusually tired, difficult to wake, irritable, inconsolable crying, pale, confused, or lacking appetite
Respiratory symptoms	If breathing is difficult or rapid; severe cough If child makes a high-pitched croupy or whooping sound after coughing OR if child is unable to lie comfortably due to continuous cough
Vomiting	If one episode of vomiting along with another symptom or unusual behavior (for example, child is unable to participate in normal activities)
	If two or more episodes of vomiting within a 24 hour period • Refer to the Gastrointestinal (Enteric) Outbreak Resources for Child Care Staff for more information on outbreaks; available from TBDHU.com/childcareoperators
Diarrhea	If one episode of unformed or watery stool along with another symptom or unusual behavior (for example, child is unable to participate in normal activities) • Note: Care should be taken to rule out non-infectious causes of these symptoms such as new medication, use of laxatives or other non-infectious diseases.
	If two or more episodes of unformed or watery stool within a 24 hour period. • Refer to the Gastrointestinal (Enteric) Outbreak Resources for Child Care Staff for more information on outbreaks; available from TBDHU.com/childcareoperators
Fever	 If axillary (e.g. under the armpit) or oral (e.g. mouth) temperature reaches 38° C or higher This high temperature is a concern especially if accompanied by other symptoms such as vomiting, sore throat, diarrhea, headache, stiff neck, rash, or change in behavior Please note: Axillary temperature can be 0.5 to 1° lower than oral temperature and this should be taken into consideration when checking for fever.
Eye/Nose Drainage	If thick mucus or pus is draining from the eye or nose
Itching	If child experiences persistent itching/scratching of body or scalp
Rashes	If child has sores with crusty, yellow or green drainage which cannot be covered by clothing or bandages. • Children who have a rash but no fever or change in behavior can continue in school or daycare, although they may need to be seen by a physician

Unusual colour	Some of the changes you may notice could be:
	 eyes or skin are yellow (jaundice) urine is dark or tea colored. stool is grey, white or black