

Something Special Children's Centre
10 Chapman St.
Kingston, ON
K7K 6B8
Phone: 613-544-8367
Fax: 613-544-5369

Date: _____

Dear Physician,

This individual _____ was excluded from daycare exhibiting the following symptoms:

As you may know, Something Special Children's Centre, as a licensed childcare agency under the guidance of the Ministry of Children and Youth Services and the Frontenac Lennox and Addington Health Unit, is mandated to ensure that children/staff/students/volunteers, which have diarrhea or vomiting, are excluded until the individual is symptom free for 48 hours.

For fevers, the individual must be *fever free/medication free* for 24 hours before returning to daycare.

Individuals who exhibit the following illnesses are excluded until deemed clear of infection by a physician. To indicate that the individual may return to daycare a circle or a check mark will suffice.

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|--|--|
| <ul style="list-style-type: none">○ Impetigo (24 hr on antibiotic treatment)○ Measles (4 days after onset of rash)○ Rubella (7 days after onset of rash)○ Meningitis bacterial (pending Health Unit advice)○ Meningitis viral (pending Health Unit advice) | <ul style="list-style-type: none">○ Mumps (9 days)○ Whooping Cough (5 days of antibiotics)○ Pink Eye (24 hour antibiotic treatment)○ Strep Throat (24 hours on antibiotic treatment)○ Other: _____ |
|--|--|

We thank you for your patience and for helping us to ensure the physical well-being of all who attend our centre.

By signing this document, you are acknowledging that the individual is free of communicable infection and is well enough to return to daycare.

Thank you,

Lorraine Peters, RECE
Executive Director

This individual was seen for _____ and may return to daycare immediately or after _____ days.

Physician's signature and stamp: _____

Date: _____