**DATA ABSTRACTION VARIABLES:**

**DATE**- date of report of sick child

**FACILITY CODE**- Abbreviated name of child center location

**ENROLLMENT**- number of children enrolled at the center the day of the report

**AGE**- age range of the sick child; 0-12 mon – infant; 13-35 mon – toddler; 36-59 mon – preschooler

**CONDITION**:

*FEVER*

*INFLUENZA*

 *STOMACH FLU*

 *COLD SYMPTOMS*

 *EAR INFECTION (OTITIS MEDIA)*

 *RASH*

 *SKIN/HAIR*- condition related to the skin and/or hair

 *OTHER CONDITION*- condition not associated with above illnesses

**SYMPTOMS**- additional symptoms that can be chosen by reporters (including free text responses)

2 or more episodes of diarrhea

2 or more episodes of vomiting

Blood in diarrhea

 Body Aches

 Boils - draining pus

 Breathing (difficulty or increased work of breathing)

 Chills

 Clear drainage from eyes

 Cough

 Decreased energy or activity level

Dehydration

 Diarrhea

 Diarrhea not contained in diaper

Drainage from ear

 Eyes or eyelids matted or crusted over

Fussiness

 Hand foot mouth disease

 Hives

 Human or animal bite

 Insect bite

 Lice

 Mouth sores

Unable to participate in normal activities

Requires extra care

**ACTIONS**:

Child excluded immediately

Parent pick-up as soon as possible

Report called in by parent

Child is allowed to stay

Relative pick-up (e.g. Grandmother) as soon as possible

Child placed in isolation and observed

Taken to doctor or a medical provider

Taken to Urgent Care Clinic

Taken to Emergency Department

Emergency Services
(Ambulance or 911 called)

Contacted Health Department

Parent Action Unknown

Facility closed

Parent notified.