



HFMD at Home: When Your Child Can Return to Preschool

Description

A child with HFMD should stay home and away from public child-gathering places until fully recovered, all blisters have dried and the medical certificate has expired. Well siblings may generally attend, but the household should monitor them closely and intensify hygiene.

A parent caring for a preschool child diagnosed with hand, foot and mouth disease needs one outcome: manage the home period and make a safe, evidence-based return-to-preschool decision.

Use symptoms, not convenience

Situation	Practical next step
HFMD is only suspected	See a family doctor; do not send the child to preschool
Child is diagnosed and stable	Keep home, support fluids and follow prescribed symptom relief
Fits, breathlessness or blue colour appears	Seek urgent medical help
Sibling remains completely well	MOH says attendance can continue, with monitoring and hygiene

HFMD is only suspected: See a family doctor; do not send the child to preschool. **Child is diagnosed and stable:** Keep home, support fluids and follow prescribed symptom relief.

Protect the child and the preschool

[HealthHub HFMD guide](#): Symptoms, medical review, home care, urgent warning signs, hygiene and return-to-centre conditions. [MOH and ECDA guidance on well siblings](#): Well siblings without symptoms need not stay away, with hygiene and symptom monitoring.

Diagnosis and exclusion are the first job

HealthHub says HFMD is usually diagnosed clinically and has no specific antibiotic treatment because it is viral. Keep the unwell child away from school, childcare, restaurants, playgrounds and other public places, and notify the centre so it can monitor other children. [HealthHub HFMD guide](#).

Build a hydration-and-comfort log

Offer fluids often and use soft foods if mouth ulcers make eating painful. Give only medicines prescribed or recommended for the child. Record fluid intake, urination, temperature, discomfort and energy. The log helps a clinician assess change; it is not a substitute for examination. [HealthHub HFMD guide](#).

Use urgent signs, not guesswork

HealthHub lists fits and breathlessness or turning blue among warning signs requiring urgent help. Parents should also seek medical review when the child cannot maintain fluids, becomes unusually drowsy or otherwise worsens. Call the treating clinic or emergency service for the actual situation. [HealthHub HFMD guide](#).

Separate the sick child's items

Keep toys, books, eating utensils, towels and clothes separate, wash hands with soap and water for at least 20 seconds, and clean items contaminated by oral or nasal secretions. Household cleaning should target high-touch and shared items without mixing unsafe chemicals. [HealthHub HFMD guide](#).

Return uses three checks

HealthHub's return position combines full recovery, dried blisters and expiry of the doctor's MC. A date alone is not enough if the child remains unwell. MOH says a sibling who stays well and has no symptoms need not automatically be excluded, but should be monitored. [MOH and ECDA guidance on well siblings](#).

Use HealthHub's four-part morning screen

HealthHub advises parents to check four things before preschool: temperature, mouth ulcers, blisters on both sides of the hands, and bumps or blisters on the tops and soles of the feet. Use good light and record the result when HFMD is circulating in the household. A child with a suspicious sign should not be sent to the centre for staff to decide; arrange a medical assessment. The screen does not replace diagnosis, because symptoms vary and some infected people may have few or no signs. [HealthHub HFMD guide](#).

A well sibling does not automatically need exclusion

MOH and ECDA say a sibling of a child with HFMD may continue attending preschool when well and symptom-free; routine quarantine of healthy contacts is not required. The household should still inform the centre where relevant, watch the sibling closely and keep any unwell child at home. Preschools use arrival health checks, handwashing and a sick bay as part of infection control. This rule is about a well contact—it does not permit a feverish child or one with ulcers or blisters to attend. [MOH and ECDA guidance on well siblings](#).

A return-to-school example

A child's MC ends Friday, but blisters are still moist and the child is lethargic. The family does not use Friday as an automatic return date; it contacts the doctor and waits for full recovery and dry blisters. This illustrates the three-check rule, not clinical diagnosis.

Fits, breathlessness or blue colour appears: Seek urgent medical help. **Sibling remains completely well:** MOH says attendance can continue, with monitoring and hygiene.

Run the home-care checklist

1. See a doctor for suspected HFMD
2. Tell the preschool promptly
3. Track fluids, urination and symptoms
4. Separate personal items and clean surfaces
5. Watch urgent warning signs
6. Return only after all three checks pass

When home care needs escalation

- Sending the child to a playground
- Using antibiotics without indication
- Returning on the MC date while still unwell
- Automatically excluding a well sibling
- Relying on internet photos for diagnosis

Continue the family health plan

After HFMD at Home: When Your Child Can Return to Preschool, [build a screen-and-sleep routine after recovery](#). Then [compare another household hydration plan](#). Both resolve a different task from HFMD child return preschool Singapore checklist.

Questions readers ask about HFMD child return preschool Singapore checklist

When can a child return?

When fully recovered, blisters are dry and the doctor's MC has expired. [HealthHub HFMD guide](#).

Must a well sibling stay home?

MOH says not automatically, if the sibling remains well and symptom-free. [MOH and ECDA guidance on well siblings](#).

Do antibiotics treat HFMD?

No; HealthHub states antibiotics are not effective for this viral infection. [HealthHub HFMD guide](#).

Reviewed 1 August 2026: HealthHub HFMD guide.

Date Created

01/08/2026

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