

Childhood Communicable Diseases

DISEASE	SIGNS/SYMPTOMS	HOW TRANSMITTED	WHEN COMMUNICABLE	EXCLUDE FROM SCHOOL	CONTROL MEASURES
Chicken Pox (Varicella)	Fever, skin eruption with blister like lesions	Airborne or direct contact w/vesicle fluid	1-2 days before outbreak, till blisters dry	Until all the blisters have dried	Vaccination and isolation of sick individuals.
Diarrheal Diseases	Abnormally loose or frequent stools, vomiting and sometimes, fever. A physician should diagnose specific cause.	Fecal-oral route, through contaminated articles, food/beverages and hands.	Throughout acute infection and as long as organisms are in stool.	Exclude until diarrhea is gone for 24 hours or as advised by physician.	Proper hand washing, sanitize all contaminated articles and equipment.
Head Lice (Pediculosis) Eggs hatch in 7 days/1 week (can multiply in 8-10 days, lives 20-30 days).	Severe itching; small lice eggs on hair. Bumpy rash on nape of neck, behind ears and/or crown of head may appear after persistent infestation.	Direct contact with infested individual or their clothing, article to article contact, i.e. coats, blankets and hats.	As long as live lice remain on an infested person	Until after child and household is treated. Have child checked by school nurse prior to return to school.	Vacuum to get rid of lice in environment. Wash all clothing and bedding in hot soapy water and place in dryer for 20 minutes.
Scabies 2-6 weeks-initial exposure 1-4 days-re-exposure	Mite burrows under skin. Red, itchy rash tends to be in lines or burrows usually on wrists, elbow creases or between fingers.	Skin to skin contact. Shared clothing.	Until mites are destroyed	Exclude for 24 hours after treatment completed.	Wash all clothing and bedding in hot soapy water for 20 minutes. Keep all children's personal items and clothing separate.
Impetigo 4-10 days Staphylococcus Streptococcus 1-3 days	Blisters, crusts, flat yellow scabs on skin (may be weeping).	Direct contact with infected area or with nasal discharges from infected child.	When weeping, crusted lesions are present.	Exclude until on antibiotic Rx for 24 hrs. and lesion no longer "weeping" and forming yellow crust.	Wash hands frequently throughout day. Wear disposable gloves when treating. Cover draining lesions with dressing.
Measles	Fever, red eyes, cough, spots on tongue and mouth, blotchy rash 3rd and 7th day, usually lasting 4 to 7 days	Droplet and direct contact with nasal or throat secretions.	7-18 days from exposure	From time of initial fever till 4 days after rash appears.	Hand washing after contact with secretions and vaccination

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Pertussis	Irritating cough can last 1-2 months-Often has a typical “whoop”	Direct contact with oral or nasal secretions	6-20 days	5 Full days after antibiotics	Hand washing after handling secretions. Covering mouth during coughing; then hand washing.
Pinkeye (Conjunctivitis) <i>Bacterial:</i> 24-72 hrs. <i>Viral:</i> Usually 12-72 hrs.	Tearing, swollen eyelids, redness of eyes, purulent discharge from eyes.	Contact with discharges from eye, nose or mouth. Contaminated fingers and shared articles.	During active symptoms and while drainage persists. Dependent upon cause of the infection.	Exclude until drainage/secretion of eye is gone or on antibiotic Rx for full 24 hrs.	Wash all items used by child; practice good handwashing.
Rubella	Low grade fever, headache, mild redness of eyes, fine rash	Contact with nasal and throat secretions.	14-23 days	7 days from onset	Vaccination and strict handwashing procedures.
Strep Throat/Scarlet Fever 1-3 days (rarely longer)	Red, painful throat, fever. May develop rash (Scarlet Fever).	Sneezing & coughing on others, contact with mucus or saliva, contaminated articles.	2 days before symptoms until on antibiotic Rx for 24-48 hrs. Untreated cases 10-21 days.	Exclude until on antibiotic Rx for full 24 hrs. and no fever. (Must be treated for 10 days).	Sanitize all articles use by child. Proper handwashing.
Ringworm (Varies by site) Mainly: 4-10 days	Red Scaling, itchy, circular lesions and broken hairs from skin/head	Personal contact with infected humans or animals, skin to skin contact or with contaminated articles	As long as lesions/infection is active. Some lesions may not be seen with the human eye.	If on Rx, may return; otherwise exclude unless lesions are coverable	Wash all items used by infected child, cover lesions, proper handwashing.
Fifth Disease 4-20 days 4-14 days; up to 21 days	Mild or no fever, “slapped cheek” rash spreading throughout body, lacy rash on arms on legs; rash may recur with sunlight, warm bath or exercise.	Sneezing & coughing on others, contact with mucus or saliva, contaminated articles	Prior to onset of rash; Not communicable after onset of rash. During the week prior to the rash appearance.	None	Wash hands frequently; sanitize all articles used by children. Pregnant women should tell health care provider if they have been in contact with an infected person.

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Meningitis Bacterial: 1-10 days (usually less than 4 days) Viral: Varies	Fever, headache, vomiting, chills, neck pain or stiffness, muscle spasm, irritability	Sneezing & coughing on others, contact with mucus or saliva, contaminated articles, or fecal-oral route depending upon organism involved	Bacterial-Noncommunicable 24 hrs. after starting antibiotic Rx. Viral- Prolonged period	Exclude, return with Dr.'s permission after treatment.	Notify local health department. Clean and sanitize all articles; proper handwashing.
Hepatitis A 15-50 days. Average 25-30 days	Upset stomach, tired, dark colored urine, light colored stool, yellowish skin & eyes, fever, jaundice (often jaundice not present in children under 5 years), abdominal pain and diarrhea.	Fecal-oral route, through contaminated articles, food/beverages & hands.	Two weeks prior to jaundice until 1 week after jaundice (yellow) appears. If no jaundice one week prior until 2 weeks after symptoms	Exclude for 2 weeks or until 1 week after jaundice	Proper handwashing; sanitize all contaminated articles & equipment; notify local health department.
Hand, Foot & Mouth (Coxsackie Virus) Up to 6 days, usually 3-6 days.	Small blisters with reddened base primarily on hands, feet, mouth, tongue, buttocks or throat	Direct contact with nose & throat secretions and with feces	During acute stage of illness (virus may stay in stools for several weeks)	Self-limited, exclude during acute symptoms (serious in young infants). Lesions should not be weeping.	Proper handwashing, don't share cups, glasses, etc., sanitize all contaminated articles, boil eating utensils for 20 minutes.
Rosella 5-15 days	High sudden fever, runny nose, irritability, followed by rash on trunk	Direct contact with infected person	Uncertain	Exclude until fever down for 24 hrs.	Proper handwashing
RSV (Respiratory Syncytial Virus) 1-10 days	Fever, runny nose, cough, and sometimes wheezing.	Virus spread from resp. secretion (sneezing, coughing) through close contact with infected persons or contaminated surfaces or objects.	Just prior to symptoms and when febrile ³	Exclude until child has no fever and can tolerate normal activities.	Frequent and proper handwashing, sanitize all contaminated articles. Do not share items such as cups, glasses and utensils. Proper disposal of tissue when used for nasal and respiratory secretions.