

## Prevention and Control of Communicable Diseases in Schools and Child Care Facilities - To Report Call WCHD Communicable Disease Program at (775) 328-2447

Condition	Incubation Period	Early Signs of Illness	Exclude from Attendance*	Readmission Criteria	Report to WCHD	Notes for Prevention	To minimize the spread of communicable diseases:
<b>Chickenpox</b> (Varicella-Zoster)	10-21 days, average 14-16 days	Fever, fatigue, loss of appetite, and rash consisting of blisters that initially appear on the trunk, back and face in crops with greatest concentration on trunk. Crops of new blisters occur over days.	Yes	May return when 1) they have no fever for 24 hours after discontinuing the use of fever-reducing medications, AND 2) all lesions are dry and scabbed over (in immunized people without crusts), AND 3) no new lesions have appeared for 24 hours.	Yes <b>Immediately</b>	Highly contagious disease. Varicella vaccination is recommended to prevent chickenpox. Wash hands with soap and warm water for 20 seconds. Consult with the Health District on post-exposure prophylaxis recommendations for household contacts, children, and staff exposed.	<p><b>To minimize the spread of communicable diseases:</b></p> <ul style="list-style-type: none"> <li>Encourage children and adults to wash their hands with soap and warm water for 20 seconds, especially after wiping noses, diapering, or using toilets, and before and after touching food. Sinks, liquid soap, and disposable towels should be easy for children to use.</li> <li>Have plenty of facial tissue readily available. Dispose of soiled tissues in covered containers and immediately wash hands.</li> <li>Clean and sanitize as required all food service utensils, toys, and other items used by children.</li> <li>Diapering and food preparation areas should be physically separate from one another and their surfaces should be kept clean, uncluttered, and dry.</li> <li>Discourage children and adults from sharing items such as combs, brushes, jackets, hats, and bedding. Maintain a separate container for clothing and other personal items. Provide a separate sleeping area for each child.</li> <li>Wash bedding at least weekly. Keep changes of clothing on hand. Store soiled items in a non-absorbent container that can be sanitized or discarded after use. Soiled linens and clothing must be sent home with parents for laundering.</li> <li>Diapering children and preparing food contributes to the spread of illness, especially diarrheal illnesses. Therefore, it is recommended that the same staff members do not perform both tasks. Handwashing after diapering is essential to prevent disease.</li> <li>Isolate the ill child from well children at the facility until he/she can be taken home.</li> <li>Any staff member with one or more incidences of vomiting or diarrhea who touches food or oral medication belonging to another person, even if they are not classified as a food service worker, MUST be excluded from work for 48 hours after vomiting or diarrhea resolves.</li> <li>Longer exclusion periods may be required if directed by the Health District.</li> </ul>
<b>Common Cold</b> (Rhinoviruses, most common)	12 hours-5 days, average 2-3 days	Runny nose, cough, sore throat, sneezing, headache, and body aches. Fever is uncommon in children over 3 years of age.	Yes	May return when fever is gone for 24 hours without the use of fever-reducing medication. Symptoms must be improving, may still have cough.	No	Avoid touching eyes, nose, and mouth. Wash hands with soap and warm water for 20 seconds. Hand sanitizers with at least 60% alcohol can be used if soap and clean water are not available. Wear a face mask. Cover mouth when coughing or sneezing, and wash hands afterwards.	
<b>Croup</b> (Parainfluenza)	2-6 days	A hoarse and a deepening, non-productive cough similar to seal barking. May be accompanied by runny nose, fever, sore throat, sneezing, ear pain, or irritability. Rapid breathing, sitting forward in bed to cough, or making a noise when taking a breath may occur. Worse at night.	Yes	May return when fever is gone for 24 hours without the use of fever-reducing medication. Symptoms must be improving, may still have cough.	No	Avoid touching eyes, nose, and mouth. Wash hands with soap and warm water for 20 seconds. Cover mouth when coughing or sneezing, and wash hands afterwards. Clean and sanitize mouthed toys, objects, and surfaces at least daily.	
<b>Gastroenteritis, Bacterial/ Parasitic</b> (Campylobacteriosis; Cryptosporidiosis; E. coli; Giardiasis; Salmonellosis, Shigellosis, etc.)	<i>Campylobacteriosis:</i> 2-5 days <i>Cryptosporidiosis:</i> 2-10 days <i>E. coli:</i> 10 hours to 6 days; O157:H7 1 to 10 days <i>Giardiasis:</i> 1 to 3 weeks <i>Salmonellosis:</i> 6-48 hours, up to 6 days <i>Shigellosis:</i> 1-7 days, average 1-3 days	Range from sudden onset of fever, abdominal pain, diarrhea, nausea, vomiting, and cramps. bloody stools in severe cases of shigellosis and E. coli may occur. May also have bloating, foul-smelling gas, decreased appetite and weight loss. Children may show mild symptoms or none at all in some diarrheal illnesses. Risk of severe dehydration may occur in younger children.	Yes	<b>E. coli:</b> Consult with Health District. Additional testing may be required prior to readmission. <b>Campylobacteriosis, Cryptosporidiosis, Salmonellosis and Shigellosis:</b> May return when diarrhea and fever have stopped for 24 hours without the use of medication. <b>Giardiasis:</b> May return when diarrhea and fever have stopped for 24 hours without the use of medication.	Yes <b>Immediately</b>	Wash hands with soap and warm water for 20 seconds. Diarrheal illness can spread quickly in child care facilities. Usually transmitted through contaminated food or water or person-to-person via the fecal-oral route. Disinfect diapering area after each use. <b>Salmonella:</b> Commonly transmitted from reptiles. Reptiles are not to be handled by children! Proper hand washing procedures, environmental cleaning, and disinfection should be performed after staff handling of reptiles.	
<b>Fifth disease</b> (Parvovirus B19)	4-21 days, average 4-14 days	Blotchy red rash on cheeks ("slapped cheek"), fever, runny nose, headache, or joint pain and swelling. Lace-like rash (often itchy) may also appear on trunk, buttocks, arms, and legs.	No, unless fever is present.	May return when fever is gone for 24 hours without the use of fever-reducing medication.	No	Avoid touching eyes, nose, and mouth. Wash hands with soap and warm water for 20 seconds. Cover mouth when coughing or sneezing, and wash hands afterwards. Contagious for a few days before rash appears. Pregnant women exposed should see a physician. Persons who are immunocompromised may be at risk for serious complications.	
<b>Gastroenteritis, Viral</b> (Rotavirus, Norovirus, Sapovirus)	12-48 hours	Vomiting, watery diarrhea, stomach cramps, and nausea. May also have headache and fever. Risk of severe dehydration may occur in younger children.	Yes	May return when vomiting and/or diarrhea has stopped for 24 hours without the use of medication. Exclusions are 48 hours during an outbreak.	No	Wash hands with soap and warm water for 20 seconds, especially after using the bathroom or changing diapers. Hand sanitizer is not recommended as it is not effective against norovirus. Supervise handwashing of pre-school children. Virus can remain infectious on surfaces for days to weeks; routine cleaning and sanitizing 25 feet surrounding public vomiting incident is important. Cleaning with bleach solution (1.5 cups of bleach per gallon of water) is recommended. Rotavirus vaccine available for infants.	
<b>German Measles</b> (Rubella)	12-23 days, average 16-18 days	Mild fever, runny nose, mild pink eye, headache, and swollen tender glands at back of neck. Fine pink rash begins on the face and spreads rapidly (within 24 hours) to the trunk.	Yes	Consult with the Health District. May return on the 8 <sup>th</sup> day after onset of rash.	Yes <b>Immediately</b>	Report suspect cases immediately to the Health District. Refer pregnant women exposed to rubella to a physician. Vaccine available.	
<b>Hand, foot, &amp; mouth disease</b> (Coxsackievirus)	3-6 days	Sudden onset of fever, sore throat, runny nose, fatigue, and small blisters in mouth or on palms of hands, fingers, buttocks, and soles of feet.	Yes	May return when 1) no fever for 24 hours after discontinuing the use of fever-reducing medication, AND 2) all lesions are dry or scabbed over AND 3) no new lesions have appeared for 24 hours.	No	Wash hands with soap and warm water for 20 seconds, especially after using the bathroom, changing diaper, and coughing or sneezing. Virus persists in stool for several weeks. Wash and sanitize mouthed toys, bottles, etc. that have come in contact with infected saliva.	
<b>Hepatitis A</b>	15-50 days, average 28 days	Sudden onset of fever, fatigue, stomach ache, nausea, vomiting, yellowing of the eyes or skin (jaundice), dark urine, light-colored stools, diarrhea, and joint pain. Young children often have a mild case without jaundice or no symptoms at all.	Yes	Consult with the Health District. May return on the 8 <sup>th</sup> day after onset of jaundice. If no jaundice, may return on the 15 <sup>th</sup> day after onset of first symptoms.	Yes <b>Immediately</b>	Consult with the Health District on post-exposure prophylaxis recommendations for household contacts, children, and caregivers exposed. Wash hands with soap and warm water for 20 seconds. The hepatitis A vaccine is recommended to prevent hepatitis A infection.	
<b>Herpes, Oral</b> (Cold Sores)	First infection: 2-12 days	Blisters on or near lips that open and become covered with dark crust. Fever and irritability may also occur. Recurrences are common.	No, unless drooling	Exclude children who do not have control of oral secretions as long as active sores are present.	No	Wash hands with soap and warm water for 20 seconds. Avoid direct contact with sores and saliva of individual with infection. Wash and sanitize mouthed toys, bottles, etc. that have come in contact with infected saliva.	
<b>Impetigo</b> (Group A Strep, Staphylococcus aureus)	1-10 days	Red, itchy sores on skin (usually face) that open and leak fluid or pus. Yellow crusted scabs form on sores. No fever.	Yes	May return 24 hours after treatment has been started. Sores are drying and improving.	No	Wash hands thoroughly with soap and warm water for 20 seconds. Cover mouth when coughing or sneezing, and wash hands afterwards. Cover sores if possible. Clean and sanitize mouthed toys after each use.	
<b>Influenza ("flu")</b> Influenza-like illness	1-4 days, average 2 days	Rapid onset of fever, headache, sore throat, cough, muscle aches, and runny or stuffy nose. May also have vomiting and/or diarrhea	Yes	May return when fever and/or diarrhea has resolved for 24 hours without the use of medication.	No	Yearly vaccine available in the fall and winter. Wash hands with soap and water for 20 seconds. Avoid touching eyes, nose and mouth. Cover mouth when coughing or sneezing, and wash hands afterwards.	
<b>Lice (Head)</b> (Pediculosis)	Eggs hatch in 6-9 days	Itching or tickling sensation of the head and neck. Nits (brownish-white eggs) on hair shafts do not flick off. Observation of live lice crawling in hair. Scratch marks may be noted on the head or back of the neck at the hairline.	Childcare: Yes WCSD: Follow Policy	May return when first hair treatment is completed and no live lice are seen. No exclusion recommended for persons for whom live lice have not been observed (e.g., nits only). Follow Washoe County School District policy for cases in a school setting.	No	Teach importance of not sharing combs, hats, coats. Launder clothing, bedding, etc. in hot water and hot dryer at time of treatment. Vacuum carpet and furniture. Items unable to be laundered can be sealed in a bag for at least 14 days. "No-nit" policies are not recommended. Close contacts should be examined and treated if infested. Lice can't spread disease. Head lice infestation is not a sign of poor hygiene.	
<b>Measles</b> (Rubella)	7-21 days, average 7-14 days	High fever, runny nose, red, watery eyes, and cough. Blotchy red rash appears 3-5 days after symptoms begin. Rash begins on face, spreads down the trunk and body. Small white spots in mouth.	Yes	Consult with the Health District. May return on the 5 <sup>th</sup> day after appearance of rash.	Yes <b>Immediately</b>	Highly contagious. Consult with Health District regarding post-exposure prophylaxis and/or exclusion for unvaccinated children and/or staff. MMR vaccine is recommended to prevent measles. Wash hands with soap and warm water for 20 seconds. Avoid touching eyes, nose, or mouth with unwashed hands.	
<b>Meningococcal Disease</b> (Neisseria meningitidis)	1-10 days, average 3-4 days	Sudden onset of fever, intense headache, stiff neck, altered mental status, sensitivity to light, nausea, and vomiting. Dark purple rash may be present.	Yes	Consult with the Health District. May return 24 hours after appropriate antibiotic treatment has been started.	Yes <b>Immediately</b>	Prophylactic antibiotics may be recommended for household contacts, staff, and children that came in contact with the infected child. Vaccine available for children 11 years and older and high risk children. Do not allow sharing of utensils and drink containers.	
<b>Meningitis, Viral</b>	3-7 days	Sudden onset of fever, intense headache, stiff neck, light sensitivity, trouble waking, irritability, trouble waking, fatigue, nausea, and vomiting.	No, unless fever is present	Consult with the Health District. May return when fever, vomiting, and/or diarrhea has resolved for 24 hours.	Yes <b>Immediately</b>	Wash hands with soap and warm water for 20 seconds. Disinfect diapering area after each use. Sick individuals should stay home. Avoid close contact with sick people.	
<b>Mumps</b>	12-25 days, average 16-18 days	Swelling in front of and below one or both ears or jaw, fever, muscle aches, headache, fatigue, and loss of appetite. Pain in cheeks made worse by chewing. May have no symptoms.	Yes	Consult with the Health District. May return on the 6 <sup>th</sup> day after the onset of swelling.	Yes <b>Immediately</b>	MMR vaccination is recommended to prevent mumps. Consult with Health District regarding exclusion for unvaccinated children and/or staff.	
<b>Whooping Cough</b> (Bordetella pertussis)	5-21 days, average 7-10 days	Runny nose, sneezing, low-grade fever, apnea, and a mild cough that progresses to paroxysmal (explosive) coughing spells ending in a high-pitched whoop and vomiting. Whoop may be absent in older children and adults.	Yes	Consult with the Health District. May return on 6 <sup>th</sup> day after appropriate antibiotic treatment has been started. Exclusions can last up to 21 days in certain circumstances.	Yes <b>Immediately</b>	DTaP and Tdap vaccination is recommended to prevent pertussis. Wash hands with soap and warm water for 20 seconds. Cover mouth when coughing or sneezing, and wash hands afterwards. Contacts may require immunization and/or prophylactic antibiotics.	
<b>Pink Eye</b> (Conjunctivitis)	1-12 days, average 1-3 days	Red or pink in white of eye(s), swollen, itchy, and painful eyes. Increased tear production, feeling of foreign object in eye, and discharge. May have thick yellow/white discharge or crust on eyelids especially in the morning.	Yes	If bacterial infection is diagnosed, may return 24 hours after treatment has started.	No	Wash hands with soap and warm water for 20 seconds. Avoid touching/rubbing eyes with unwashed hands. Do not share personal items, such as pillows, towels, eye drops, make-up, contacts, or eyeglasses.	
<b>Ringworm</b>	4-21 days	Varies depending on which part of the body is infected. General symptoms include: Itchy skin, red, scaly, flat, ring-shaped rash on skin. May have hair loss.	Yes	May return 24 hours after treatment has started.	No	Exclude from gym, swimming, and other close contact activities. Do not share personal items or dress-up clothing during outbreak. Wash hands with soap and warm water for 20 seconds, especially after playing with pets. Shower immediately after close contact sports.	
<b>RSV</b> (Respiratory syncytial virus)	2-8 days, average 4-6 days	Low grade or no fever, cough, runny nose, wheezing, and sneezing. Very young infants may only have tiredness, crankiness, difficulty breathing, and poor feeding.	Yes	May return when symptoms subside and child has been without fever for 24 hours without the use of fever-reducing medication.	Yes	Most serious infection in infants and young children. Wash hands with soap and warm water for 20 seconds. Cover nose and mouth with a tissue when sneezing and coughing. Avoid close contact with sick people. Avoid touching face with unwashed hands.	
<b>Strep Throat</b> (Streptococcal Sore Throat or Scarlet Fever)	2-5 days	Fever, sore throat, enlarged, tender lymph nodes in neck, red and swollen tonsils with white patches, and tiny red spots on roof of mouth. Headache, stomach pain, nausea or vomiting can also occur. Scarlet fever is a fine red sandpaper-like rash that typically does not involve the face, but cheeks can become flush. May appear after onset of sore throat.	Yes	May return 24 hours after antibiotic treatment has started and the child is without fever for 24 hours without the use of fever-reducing medication.	No	Cover mouth when coughing or sneezing. Wash hands with soap and warm water for 20 seconds, especially after contact with nose and mouth secretions or handling tissues.	

\* The major criterion for exclusion from attendance is the condition's probability of spread from person-to-person. A child may have a non-excludable illness, yet require care at home or in a hospital for the child's own well-being.  
\*\* All diseases of extraordinary or outbreak/epidemic occurrence (in higher numbers than usually expected) are reportable.  
**07/2022**