

## COMMUNICABLE DISEASES OF CHILDHOOD

## \*\* Notify school administration in all cases \*\*

Infection	Cause	Incubation Period	Method of Spread	Description	Action	Immunization
Red Measles (Rubeola)	measles virus	About 10 days, varying from 7- 18 days	Airborne by droplet spread (coughing or sneezing) or direct contact with nasal or throat secretions of infected person.	Fever; aches and pains; runny nose; red, inflamed eyes; and cough.  2-4 days later, rash: blotchy red rash; large red spots appear first on face and head and spread down the body to the arms and legs; fades after about a week.	Watch for deepening cough or earache. Exclude from school/day care for at least 4 days after rash appears or until well.	Two doses of MMR (measles-mumps-rubella) vaccine. First dose at 12 months; second dose at 4-6 years (preschool).
German Measles (Rubella)	rubella virus	14-23 days	Airborne by droplet spread (coughing or sneezing) or direct contact with nasal or throat secretions of infected person.	Low grade fever, aches and pains, redness of the eyes, swollen lymph glands.     Rash: small red spots, may be itchy; appears first on the face and scalp; spreads rapidly down the body; begins to fade within 1-3 days.	<ul> <li>Exclude from school/day care for 7 cays after rash appears.</li> <li>Alert pregnant woman if in contact with child</li> </ul>	As above: two doses of MMR vaccine
Mumps (Infectious Parotitis)	mumps virus	12-25 days, Commonly 18 days	Airborne by droplet spread (coughing or sneezing) or direct contact with saliva of infected person.	Fever, headache, stomach ache, drowsiness. Swollen, painful parotid gland behind corner of jaw (one or both sides).	<ul> <li>Exclude from school/day care for 9 days after swelling appears.</li> </ul>	As above: two doses of MMR vaccine
Whooping Cough (Pertussis)	pertussis bacterium	Generally 7-10 days (may be up to 20)	Airborne by droplet spread (coughing or sneezing) or direct contact with nasal or throat secretions of infected person.	Runny nose and slight fever progress to cough. Cough worsens, "spells" begin. At the end of a coughing spell, the characteristic whoop sound may occur as the child takes a very deep breath.	<ul> <li>Antibiotics.</li> <li>Exclude from school/day care until treated for 5 days.</li> <li>If not treated exclude from school/day care 3 weeks from onset of cough.</li> <li>All children under age 1 who have been in contact must be immunized and treated.</li> </ul>	Combined vaccine (against diphtheria, tetanus, pertussis, Haemophilus influenzae type B disease, and poliomyelitis).  dose primary series (at 2, 4, 6, and 18 months); fifth dose (booster dose) at 4-6 years; sixth dose at 14-16 years.
Chicken Pox (Varicella)	varicella-zoster virus	10-21 days	Airborne or direct contact with nasal or throat secretions of infected person or blister fluid, or contact with contaminated items.	Scattered blisters, many or few, appear in crops.     Mild fever.     Blisters turn to pustules turn to scabs.	Treat itch and fever, prevent scratching. No exclusion from school/day care.	Vaccine is available for children at 12 months of age. The vaccine is offered at the preschool time or Grade 4, if child is still at risk for chickenpox.
Influenza	influenza virus	1-4 days, average 2 days	Airborne by droplet spread (coughing or sneezing) or direct contact with nasal or throat secretions of infected person.	High fever, headache, muscle aches, weakness and fatigue, sore throat, runny nose, cough (often severe and prolonged).	Treat fever. Look for deepening cough. Exclude from school/day care until completely well.	Influenza vaccine is recommended for healthy children 6-23 months of age and all children with health problems.
Strep Throat (Streptococcal Sore Throat)	group A streptococcal bacterium	1-3 days	Direct or intimate contact with infected person.	Fever, unwell. Sore throat. Swollen, tender lymph glands in the neck, below the angle of the jaw.	Antibiotics.     Exclude from school/day care until treated for 24 hours.	None

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Scarlet Fever	group A streptococcal bacterium	1-3 days	Direct or intimate contact with infected person.	A form of streptococcal infection that produces a skin rash.     The usual streptococcal infection associated with Scarlet Fever is Strep Throat, in which case all the symptoms listed above are present.     Fine red rash, most often on the front of the body and generally not on the face, sandpapery feel.	Antibiotics.     Exclude from school/day care until treated for 24 hours.	None
Fifth Disease (Erythema Infectiosum, Parvovirus B19)	parvovirus B19	Generally 4-14 days (may be up to 20)	Usually droplet spread or direct contact with nasal or throat secretions of infected person. Uncommonly, may be transmitted from non-immune mother to fetus.	Low-grade fever.  Usually, distinctive rash: "slapped-cheek" appearance; lace-like rash moving down the body; rash can recur for weeks, becoming more obvious with heat and sunlight.  Infrequently, joint pain and tenderness.	No exclusion from school/day care. Advise exposed pregnant woman to discuss with physician or midwife.	None
Pink Eye (Acute Bacterial Conjunctivitis)	various bacteria	24-72 hours	Direct contact with discharges from the eye of infected person or with contaminated objects.	<ul> <li>Sore, teary, itchy eye (one or both), sensitive to light.</li> <li>Eye surface red.</li> <li>Thick yellow discharge.</li> </ul>	<ul> <li>Prescription eye drops.</li> <li>Exclude from school/day care until treated for at least 1 day and eye is improving.</li> </ul>	None
Ringworm	fungal disease of the skin	Usually 4-10 days	Direct contact with skin of infected person or animals or with contaminated objects, such as shared brushes, towels.	Flat, spreading ring-shaped skin sores.	Prescription medication.  Exclude from school/day care until treatment has begun and signs of healing are present.	None
Impetigo	group A streptococcal or staphylococcal bacterium	Variable. Commonly 4-10 days.	Direct contact with an infected person (generally via the hands), or contact with contaminated objects.	Weeping, crusting, spreading skin sores	<ul> <li>Prescription medication.</li> <li>Exclude from school/day care until treatment has begun and sores are dry.</li> </ul>	None
Head Lice	louse infestation of hair	Generally, eggs of lice hatch in 1 week; newly- hatched lice begin to lay eggs within 8-10 days.	Direct contact with an infested person and, to a lesser extent, with their personal belongings.	<ul> <li>Itchy head.</li> <li>May see lice in hair or nits (nits are extremely small eggs glued to the hair shaft</li> <li>Typically behind the ears or at the nape of the neck</li> </ul>	Medicated shampoo for whole family.     REMOVE NITS     Wash personal articles, bedding with hot water, or dry clean, or seal in plastic bag and store for 10 days.     Exclude from school/day care until shampooing and cleaning completed and nits have been removed.	None
Scabies	mite infestation of the skin	2-6 weeks in first-time infestations, but only 1-4 days in people who have been previously infested.	Direct skin-to-skin contact with an infested person and, to a lesser extent, with their personal belongings.	<ul> <li>Intensely itchy red rash; itching is worse at night; rash is usually between the fingers, on the wrists, under the arms, around lower abdomen or buttocks.</li> <li>Mite burrows may be seen under the skin, but have often been destroyed by scratching.</li> </ul>	Medicated skin cream or lotion for whole family.      Wash personal articles, bedding in hot water, or dry clean; clothing that cannot be washed can be sealed in a plastic bag for 3 days.      Exclude from school/day care until 24 hours after the start of treatment.	None