

Recommended School Action When a Person Exhibits Symptoms of a Communicable Disease or a Health Care Provider Has Diagnosed a Specific Communicable Disease

If you become aware the child has any of the following diseases, then clearance by the local health department is required before the child returns to school: diphtheria; measles; rubella (German measles); typhoid fever, *E. coli* O157 infection; shigellosis; hepatitis A; tuberculosis; pertussis (whooping cough). Call your local health department with questions.

Children with any of the symptoms listed on page 9 should be excluded from school until the symptoms are no longer present, or until the student is cleared to return by a licensed physician or by the school nurse.

DISEASE/SYMPTOMS	SCHOOL EXCLUSION/ SCHOOL RESTRICTION and REPORTING TO LOCAL HEALTH DEPARTMENT	TRANSMISSION/ COMMUNICABILITY	RECOMMENDED SCHOOL CONTROL MEASURES
<p>AIDS (Acquired Immune Deficiency Syndrome)</p> <ul style="list-style-type: none"> AIDS is a later stage of an infection caused by the Human Immunodeficiency Virus (HIV). Swollen lymph nodes, loss of appetite, chronic diarrhea, weight loss, fever or fatigue, cancers and other infections 	<p>Exclude: NO</p> <p>Restriction: NO – See Communicable Disease Appendix IV, “Guidelines for Schools with Children who have Bloodborne Infections” for further information</p> <p>Report: YES – call CD coordinator at Local Health Department</p>	<p>Spread by:</p> <ul style="list-style-type: none"> Direct contact with potentially infectious blood to broken skin, mucous membranes or through puncture wounds <p>Communicable:</p> <ul style="list-style-type: none"> Lifetime infection after initial infection with virus 	<ul style="list-style-type: none"> Strict adherence to standard precautions when handling body fluids Report, to school nurse or administrator, all accidental body fluid exposures to broken skin, mucous membranes or puncture wounds (e.g., bites, needle stick injuries)
<p>ATHLETE’S FOOT</p> <ul style="list-style-type: none"> Dry scaling and/or cracking blisters and itching, especially between toes and bottoms of feet 	<p>Exclude: NO</p> <p>Restriction: NO</p> <p>Report: NO</p>	<p>Spread by:</p> <ul style="list-style-type: none"> Direct contact with infectious areas Indirect contact with infected articles <p>Communicable:</p> <ul style="list-style-type: none"> Until treated 	<ul style="list-style-type: none"> Restrict walking barefoot, sharing towels, socks & shoes Encourage use of sandals in shower Routine disinfection of showers and locker room floors with approved agents

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<p>BOILS – (See Also STAPH SKIN INFECTION)</p> <ul style="list-style-type: none"> • Large pimple-like sore, swollen, red, tender may be crusted or draining • Headache, fever may be present 	<p>Exclude: Exclusion status may vary according to the state of the lesion in question. Refer to Exclusion Guidelines on page 9.</p> <p>Restriction: May attend with licensed health care provider permission, or lesion is dry and crusted with no drainage</p> <p>Report: NO</p>	<p>Spread by:</p> <ul style="list-style-type: none"> • Direct contact with drainage from sores or nasal secretions from carrier • Indirect contact with infected articles <p>Communicable:</p> <ul style="list-style-type: none"> • As long as sores drain if untreated 	<ul style="list-style-type: none"> • Standard precautions • Wash hands thoroughly and often • No cafeteria duty while lesions present • Good personal hygiene
<p>CHICKENPOX (Varicella)</p> <ul style="list-style-type: none"> • Malaise, slight fever, blister-like rash, or red rash, usually beginning on trunk, blisters, scab over 	<p>Exclude: Refer to Exclusion Guidelines on page 9.</p> <p>Restriction: Exclude until chickenpox lesions have crusted or dried with no further drainage (minimum of 5 days after rash appears)</p> <p>Report: NO</p>	<p>Spread by:</p> <ul style="list-style-type: none"> • Airborne droplets from coughing • Direct contact with drainage from blisters or nasal secretions • Indirect contact with infected articles <p>Communicable:</p> <ul style="list-style-type: none"> • 5 days before to 5 days after rash appears 	<ul style="list-style-type: none"> • Immunization required – see website for current information: Immunization Requirements for School and Child Care Getting Immunized • Wash hands thoroughly and often. • Cover mouth and nose if coughing or sneezing • Encourage safe disposal of used tissues • Contact school nurse regarding possible earlier return to school if lesions are crusted/dried before 5th day after rash appears • Staff and students with impaired immune responses should consult their health care provider, if exposure to a confirmed or suspected case has occurred.

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<p>CMV (Cytomegalovirus)</p> <ul style="list-style-type: none"> Caused by a human herpes virus Most severe form of the disease occurs to infants infected from mother during pregnancy, premature infants, and the immunocompromised. A variety of symptoms can occur 	<p><u>Exclude:</u> Refer to Exclusion Guidelines on page 9.</p> <p><u>Restriction:</u> NO</p> <p><u>Report:</u> NO</p>	<p><u>Spread by:</u></p> <ul style="list-style-type: none"> Direct mucosal contact with infected tissues, secretions and excretions (urine, saliva, breast milk, cervical secretion and semen) Indirect contact with infected articles <p><u>Communicable:</u></p> <ul style="list-style-type: none"> Virus is secreted in urine and saliva for many months and may persist or be episodic for several years after initial infection. 	<ul style="list-style-type: none"> Wash hands thoroughly and often. Strict adherence to standard precautions when handling body fluids. Take care when handling diapers or toileting children Women of childbearing age or immunocompromised individuals should consult with their medical provider regarding risks when caring for children identified as carriers of CMV.
<p>COMMON COLD (Upper Respiratory Infection)</p> <ul style="list-style-type: none"> Runny nose and eyes, cough, sneezing, possible sore throat, fever uncommon 	<p><u>Exclude:</u> Refer to Exclusion Guidelines on page 9.</p> <p><u>Restriction:</u> NO</p> <p><u>Report:</u> NO</p>	<p><u>Spread by:</u></p> <ul style="list-style-type: none"> Direct contact with nose and throat secretions Droplets from coughing or sneezing Indirect contact with infected articles <p><u>Communicable:</u></p> <ul style="list-style-type: none"> 1 day before onset of symptoms until 5 days after 	<ul style="list-style-type: none"> Wash hands thoroughly and often Cover mouth, nose if coughing or sneezing Encourage appropriate disposal of used tissues

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<p>DIARRHEAL DISEASES</p> <ul style="list-style-type: none"> Loose, frequent stools, sometimes with pus or blood Vomiting, headaches, abdominal cramping or fever may be present 	<p>Exclude: Refer to Exclusion Guidelines on page 9.</p> <p>Restriction: Exclude students with acute diarrhea; see to Exclusion Guidelines on page 9.</p> <p>Report: Not usually; depends on diagnosis; Report cluster outbreaks to local health department.</p>	<p>Spread by:</p> <ul style="list-style-type: none"> Direct contact with feces Consumption of water or food contaminated with feces <p>Communicable:</p> <ul style="list-style-type: none"> Varies from hours to several days 	<ul style="list-style-type: none"> Wash hands thoroughly and often, especially after using bathroom or diapering/toileting children No food handling/preparation No cafeteria duty
<p>FIFTH DISEASE</p> <ul style="list-style-type: none"> Bright red cheeks, blotchy, lace appearing rash on extremities that fades and recurs, runny nose, loss of appetite, sore throat, low grade fever, headache 	<p>Exclude: Refer to Exclusion Guidelines on page 9.</p> <p>Restriction: May attend with licensed health care provider permission or when no rash or signs of illness are present</p> <p>Report: NO</p>	<p>Spread by:</p> <ul style="list-style-type: none"> Droplets from coughing or sneezing <p>Communicable:</p> <ul style="list-style-type: none"> Greatest before onset of rash when illness symptoms occur No longer contagious after rash appears 	<ul style="list-style-type: none"> Wash hands thoroughly and often Encourage student to cover mouth/nose when coughing/sneezing Encourage safe disposal of used tissues Contact school nurse for recommendations for pregnant females / immunocompromised persons exposed by suspected/confirmed case Contact local health department for latest recommendation for pregnant females exposed in school outbreak situations
<p>HAND, FOOT & MOUTH DISEASE</p> <ul style="list-style-type: none"> Sudden onset fever, sore throat and lesions in mouth Blistered lesions on palm, fingers and soles 	<p>Exclude: Refer to Exclusion Guidelines on page 9.</p> <p>Restriction: May attend with licensed health care provider permission or when blisters are gone</p> <p>Report: NO</p>	<p>Spread by:</p> <ul style="list-style-type: none"> Direct contact with nose and throat discharges or feces <p>Communicable:</p> <ul style="list-style-type: none"> During acute stage of illness and potentially for several weeks after in stool 	<ul style="list-style-type: none"> Wash hands thoroughly and often Good personal hygiene especially following bathroom use Reinforce use of standard precautions

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<p>HEAD LICE</p> <ul style="list-style-type: none"> Itching of scalp Lice or nits (small grayish brown eggs) in the hair <p>*See additional ODE guidance document on Head Lice</p>	<p>Exclude: If required by school policy</p> <p>Restriction: NO</p> <p>Report: NO</p>	<p>Spread by:</p> <ul style="list-style-type: none"> Direct contact with infected person Indirect contact with infected articles (rarely) <p>Communicable:</p> <ul style="list-style-type: none"> Only when live bugs present 	<ul style="list-style-type: none"> Check siblings/close contacts for symptoms Avoid sharing/touching clothing, head gear, combs/brushes Refer to local school district process on head lice. Contact school nurse, local health department, and/or local medical provider for further treatment information.
<p>HEPATITIS A</p> <ul style="list-style-type: none"> Sudden onset with loss of appetite, fever, nausea, right upper abdominal discomfort Later student may have jaundice (yellow color to skin and eyes), dark urine, or clay- colored stools May have mild or no symptoms 	<p>Exclude: Refer to Exclusion Guidelines on page 9.</p> <p>Restricted: May attend only with local health department permission.</p> <p>Report: YES</p>	<p>Spread by:</p> <ul style="list-style-type: none"> Direct contact with feces Consumption of water or food contaminated with feces <p>Communicable:</p> <ul style="list-style-type: none"> Two weeks before symptoms until two weeks after onset 	<ul style="list-style-type: none"> Wash hands thoroughly and often No food handling or sharing School restrictions on home prepared foods for parties Immunization required - see website for current information: Immunization Requirements for School and Child Care Getting Immunized
<p>HEPATITIS B & C</p> <ul style="list-style-type: none"> Fever, headache, fatigue, vomiting, aching, loss of appetite, dark urine, abdominal pain, clay- colored stools and jaundice 	<p>Exclude: Refer to Exclusion Guidelines on page 9.</p> <p>Restriction: NO – See Communicable Disease Appendix IV, “Guidelines for Schools with Children who have Bloodborne Infections” for further information.</p> <p>Report: YES</p>	<p>Spread by:</p> <ul style="list-style-type: none"> Infectious body fluids (blood, saliva, semen) getting under the skin (e.g., through needles) or into the eyes; or through sexual contact; or mother to baby transmission. <p>Communicable:</p> <ul style="list-style-type: none"> One month prior to symptoms to 4 to 6 months or longer after jaundice Some individuals have no symptoms but can transmit the disease. 	<ul style="list-style-type: none"> Strict adherence to standard precautions when handling body fluids Report all body fluid contact that penetrates the skin such as bites, scratches and needle sticks to the health consultant. Immunization required for Hepatitis B - see website for current information: Immunization Requirements for School and Child Care Getting Immunized

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<p>HIV Disease (Human Immunodeficiency Virus Disease)</p> <ul style="list-style-type: none"> • May have acute flu-like illness • Most often, no symptoms present in early stages of infection • AIDS is a later stage of HIV infection (See AIDS). 	<p><u>Exclude:</u> Refer to Exclusion Guidelines on page 9.</p> <p><u>Restriction:</u> NO – See Communicable Disease Appendix IV, “Guidelines for Schools with Children who have Bloodborne Infections” for further information.</p> <p><u>Report:</u> YES</p>	<p><u>Spread by:</u></p> <ul style="list-style-type: none"> • Blood getting under the skin (e.g., through needles); or through sexual contact • Some individuals have no symptoms but can spread the disease. <p><u>Communicable:</u></p> <ul style="list-style-type: none"> • Lifetime infectivity after initial infection with virus 	<ul style="list-style-type: none"> • Strict adherence to standard precautions when handling body fluids • Report all body fluid contact that penetrates the skin such as bites, scratches and needle sticks to the school nurse.
<p>IMPETIGO (See also Staph Skin Infections)</p> <ul style="list-style-type: none"> • Blister-like sores (often around the mouth and nose), crusted, draining and “itching” 	<p><u>Exclude:</u> Refer to Exclusion Guidelines on page 9.</p> <p><u>Restriction:</u> May attend with licensed health care provider permission, or when lesions are dry and crusted with no drainage.</p> <p><u>Report:</u> NO</p>	<p><u>Spread by:</u></p> <ul style="list-style-type: none"> • Direct contact with drainage from sores <p><u>Communicable:</u></p> <ul style="list-style-type: none"> • As long as sore drains if untreated 	<ul style="list-style-type: none"> • Wash hands thoroughly and often • No cafeteria duty while sores present • Avoid scratching or touching sores • Cover sores if draining • No sharing personal items when lesions are present • No contact sports (wrestling) if drainage cannot be contained.
<p>INFLUENZA (flu)</p> <ul style="list-style-type: none"> • Abrupt onset, fever chills, headache, muscle aches, cough 	<p><u>Exclude:</u> Refer to Exclusion Guidelines on page 9.</p> <p><u>Restriction:</u> NO</p> <p><u>Report:</u> NO</p>	<p><u>Spread by:</u></p> <ul style="list-style-type: none"> • Droplets from coughing or sneezing <p><u>Communicable:</u></p> <ul style="list-style-type: none"> • 1-2 days before onset of symptoms, up to 5 days or more following the onset of illness 	<ul style="list-style-type: none"> • Vaccination: recommended annually for all persons ≥ 6 months of age • Wash hands thoroughly and often • Cover mouth/nose when coughing or sneezing • Encourage appropriate disposal of used tissues • See website for up-to-date information: http://flu.oregon.gov/Pages/Learn.aspx

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MEASLES <ul style="list-style-type: none"> Fever, eye redness, runny nose, a very harsh cough 3-7 days later dusky red rash (starts at hairline and spreads down); white spots in mouth 	<p>Exclude: Refer to Exclusion Guidelines on page 9.</p> <p>Restriction: May attend with local health department permission</p> <p>Report: YES - Highly Communicable</p>	<p>Spread by:</p> <ul style="list-style-type: none"> Airborne droplets from coughing <p>Communicable:</p> <ul style="list-style-type: none"> 4 days before rash until 4 days after rash begins Most contagious 4 days before rash appears 	<ul style="list-style-type: none"> Contact school nurse or health department immediately for direction School nurse or health department will identify population at risk and assist with parent notification Immunization required – see website for current information: Immunization Requirements for School and Child Care Getting Immunized
MENINGOCOCCAL DISEASE <ul style="list-style-type: none"> Sudden onset of high fever, nausea, vomiting, headache, stiff neck, lethargy May have blotchy, purplish, non-blanching rash 	<p>Exclude: Refer to Exclusion Guidelines on page 9.</p> <p>Restriction: None necessary. Patients are not contagious after treatment.</p> <p>Report: YES</p>	<p>Spread by:</p> <ul style="list-style-type: none"> Direct contact with nose and throat secretions Droplets from coughing or sneezing <p>Communicable:</p> <ul style="list-style-type: none"> Until bacteria are no longer present in discharges from nose and mouth Cases and contacts usually no longer infectious after 24 hours on antibiotics 	<ul style="list-style-type: none"> Wash hands thoroughly and often Cover mouth/nose when coughing or sneezing and practice safe disposal of used tissues No sharing food, drink or eating utensils Meningococcal vaccine recommended for students 11–18 years of age See County Health Department CD Specialist for further information
MONONUCLEOSIS <ul style="list-style-type: none"> Fever, sore throat, swollen lymph nodes, fatigue and abdominal pain 	<p>Exclude: Refer to Exclusion Guidelines on page 9.</p> <p>Restrictions: NO – Bed rest for a time and withdrawal from PE/Athletic activities are encouraged until student has recovered fully or with licensed health care provider permission.</p> <p>Report: NO</p>	<p>Spread by:</p> <ul style="list-style-type: none"> Direct contact with saliva <p>Communicable:</p> <ul style="list-style-type: none"> May be infectious for several months 	<ul style="list-style-type: none"> Wash and disinfect shared items/toys which may be mouthed or in settings with children who drool No sharing food, drink or eating utensils

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MUMPS <ul style="list-style-type: none"> Painful swelling of neck and facial glands, fever and possible abdominal pain 	<p><u>Exclude:</u> Refer to Exclusion Guidelines on page 9.</p> <p><u>Restriction:</u> May attend with local health department permission.</p> <p><u>Report:</u> YES</p>	<p><u>Spread by:</u></p> <ul style="list-style-type: none"> Direct contact with nose and throat secretions Droplets from coughing or sneezing <p><u>Communicable:</u></p> <ul style="list-style-type: none"> 2 days before onset until 5 days after onset of symptoms. 	<ul style="list-style-type: none"> Wash hands thoroughly and often Report to school nurse No sharing of personal items Immunization required - see website for current information: Immunization Requirements for School and Child Care Getting Immunized
PINK EYE (Conjunctivitis) <ul style="list-style-type: none"> Eyes tearing, irritated and red, sensitive to light Eye lids puffy, may have yellow discharge 	<p><u>Exclude:</u> Refer to Exclusion Guidelines on page 9.</p> <p><u>Restriction:</u> May attend with licensed health care provider/school nurse permission or symptoms are gone</p> <p><u>Report:</u> NO</p>	<p><u>Spread by:</u></p> <ul style="list-style-type: none"> Direct contact with infectious saliva or eye secretions Indirect contact with infected articles <p><u>Communicable:</u></p> <ul style="list-style-type: none"> As long as drainage is present 	<ul style="list-style-type: none"> Wash hands thoroughly No sharing of personal items Consult with school nurse or licensed medical provider
PINWORMS <ul style="list-style-type: none"> Nervousness, irritability, itching of anus, abdominal pain Sometimes no symptoms are present 	<p><u>Exclude:</u> NO</p> <p><u>Restriction:</u> Restriction may be necessary in situations where students are unable to control bowel function, otherwise No.</p> <p><u>Report:</u> NO</p>	<p><u>Spread by:</u></p> <ul style="list-style-type: none"> Direct contact with infectious eggs by hand from anus to mouth of infected person Indirect contact with infected articles <p><u>Communicable:</u></p> <ul style="list-style-type: none"> As long as female worms are discharging eggs in the anal area Eggs remain infective in an outdoor area for about 2 weeks 	<ul style="list-style-type: none"> Wash hands thoroughly Good personal hygiene Consult with school nurse or licensed medical provider

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<p>RINGWORM – SCALP</p> <ul style="list-style-type: none"> • Patchy areas of scaling with mild to extensive hair loss • May have round areas of “stubs” of broken hair 	<p><u>Exclude:</u> Refer to Exclusion Guidelines on page 9.</p> <p><u>Restriction:</u> May attend with licensed health care provider or school nurse permission or when symptoms are gone.</p> <p><u>Report:</u> NO</p>	<p><u>Spread by:</u></p> <ul style="list-style-type: none"> • Direct contact with infectious areas • Indirect contact with infectious areas <p><u>Communicable:</u></p> <ul style="list-style-type: none"> • Until treated 	<ul style="list-style-type: none"> • Wash hands thoroughly • No sharing of personal items, especially combs, brushes, hats, etc. • It is not necessary to shave the student’s head.
<p>RINGWORM – SKIN</p> <ul style="list-style-type: none"> • Ring-shaped red sores with blistered or scaly border • “Itching” common 	<p><u>Exclude:</u> Refer to Exclusion Guidelines on page 9.</p> <p><u>Restriction:</u> May attend with licensed health care provider or School Nurse permission or when symptoms are gone.</p> <p><u>Report:</u> NO</p>	<p><u>Spread by:</u></p> <ul style="list-style-type: none"> • Direct contact with infectious areas • Indirect contact with infectious areas <p><u>Communicable:</u></p> <ul style="list-style-type: none"> • Until treated 	<ul style="list-style-type: none"> • Wash hands thoroughly • No sharing of personal items • Special attention to cleaning and disinfecting, with approved anti-fungal agent, gym/locker areas • No sport activity until lesions disappear
<p>RUBELLA (German Measles, 3- day measles)</p> <ul style="list-style-type: none"> • Slight fever, aches, red eyes, runny nose, headache, lethargy and a pinkish rash that starts at face and spreads rapidly to trunk and limbs • Swollen glands back of head and neck 	<p><u>Exclude:</u> Refer to Exclusion Guidelines on page 9.</p> <p><u>Restriction:</u> May attend only with local health department permission</p> <p><u>Report:</u> YES</p>	<p><u>Spread by:</u></p> <ul style="list-style-type: none"> • Direct contact with nose and throat secretions • Droplets from coughing or sneezing <p><u>Communicable:</u></p> <ul style="list-style-type: none"> • One week before until 4 days after onset of rash • Very communicable 	<ul style="list-style-type: none"> • Immunization required - see website for current information: Immunization Requirements for School and Child Care Getting Immunized • Report to school nurse if available or to health department • Notify parents of at-risk students as directed by health officials • Refer all pregnant students and staff to primary health care provider

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<p>SCABIES</p> <ul style="list-style-type: none"> • Intense itching, raised small red or pus-filled sores • Common between fingers, behind knees, around waist, inside of wrists, on arms 	<p>Exclude: Refer to Exclusion Guidelines on page 9.</p> <p>Restriction: May attend with licensed health care provider/school nurse permission</p> <p>Report: NO</p>	<p>Spread by:</p> <ul style="list-style-type: none"> • Direct skin contact • Indirect contact with infected articles <p>Communicable:</p> <ul style="list-style-type: none"> • Until treated 	<ul style="list-style-type: none"> • Wash hands thoroughly • Screen close contacts/siblings for symptoms • No sharing of personal items
<p>SHINGLES (Herpes Zoster)</p> <ul style="list-style-type: none"> • Painful skin lesions which are a result of the same virus that causes chicken pox • Lesions may appear in crops • May occur in immune-compromised children • Usually on trunk, may be accompanied by pain, itching or burning of affected area • Headache may precede eruption 	<p>Exclude: Refer to Exclusion Guidelines on page 9.</p> <p>Restriction: May attend with licensed health care provider permission and if lesions can be covered with dressing or when lesions are scabbed/dried</p> <p>Report: NO</p>	<p>Spread by:</p> <ul style="list-style-type: none"> • Direct contact with draining skin areas <p>Communicable:</p> <ul style="list-style-type: none"> • As long as lesions are draining 	<ul style="list-style-type: none"> • Keep lesions covered with dressings. If lesions are on area of body where dressing cannot be secured (e.g., face, hand), consult with school nurse if available or local health department. • Contact school nurse or local health department for recommendations for pregnant females/Immunocompromised person if exposure occurs at school.
<p>STAPH SKIN INFECTIONS</p> <ul style="list-style-type: none"> • Draining sores, slight fever, aches and headache • Affected area may be red, warm and/or tender 	<p>Exclude: Refer to Exclusion Guidelines on page 9.</p> <p>Restriction: May attend with licensed health care provider permission or when lesions are dry/crusted or gone</p> <p>Report: NO</p>	<p>Spread by:</p> <ul style="list-style-type: none"> • Direct contact with drainage from sores • Indirect contact with infected articles <p>Communicable:</p> <ul style="list-style-type: none"> • As long as sores are draining 	<ul style="list-style-type: none"> • Wash hands thoroughly • Good personal hygiene • No sharing towels, clothing or personal items • No food handling • No contact sports until lesions are gone

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<p>STREP THROAT – SCARLET FEVER (streptococcal infections)</p> <ul style="list-style-type: none"> • Strep throat: Sore throat, fever, swollen, red tonsils, tender neck glands, headache, bad breath, abdominal pain or nausea • Scarlet Fever: Same as strep throat with a red blotchy, sandpapery rash on trunk and a “strawberry” tongue 	<p>Exclude: Refer to Exclusion Guidelines on page 9.</p> <p>Restriction: May attend with licensed health care provider/school nurse permission.</p> <p>Report: NO</p>	<p>Spread by:</p> <ul style="list-style-type: none"> • Direct contact with nose and throat secretions <p>Communicable:</p> <ul style="list-style-type: none"> • Greatest during symptoms of illness. Some individuals are carriers without symptoms and may be infectious for weeks or months. • Treated cases are no longer infectious after 24 hours on antibiotics unless fever persists 	<ul style="list-style-type: none"> • Wash hands thoroughly • Encourage covering mouth & nose when coughing & sneezing • Encourage appropriate disposal of used tissues
<p>TUBERCULOSIS (infectious/active)</p> <ul style="list-style-type: none"> • Fatigue, weight loss, fever, night sweats, cough, chest pain, hoarseness & coughing up blood in later stages of disease 	<p>Exclude: Refer to Exclusion Guidelines on page 9.</p> <p>Restriction: May attend only with local health department permission</p> <p>Report: YES</p>	<p>Spread by:</p> <ul style="list-style-type: none"> • Primarily by airborne droplets from infected person through coughing, sneezing or singing <p>Communicable:</p> <ul style="list-style-type: none"> • As long as living bacteria are discharged through coughing. Specific drug therapy usually diminishes communicability within weeks 	<ul style="list-style-type: none"> • Observe TB rule compliance: CDC - Tuberculosis (TB) • Report to school nurse or consult with county health department
<p>WHOOPING COUGH (Pertussis)</p> <ul style="list-style-type: none"> • Begins with mild “cold” symptoms and progresses to violent fits of coughing spells that may end in a whooping sound (infants & toddlers) or vomiting (older children & adults) • Slight or no fever 	<p>Exclude: Refer to Exclusion Guidelines on page 9.</p> <p>Restriction: May attend only with local health department permission</p> <p>Report: YES</p>	<p>Spread by:</p> <ul style="list-style-type: none"> • Direct contact nose and throat secretions • Droplets from coughing or sneezing <p>Communicable:</p> <ul style="list-style-type: none"> • Greatest just before and during “cold” symptoms to about 3 weeks without treatment. • If treated with antibiotics, infected person is communicable 5 days 	<ul style="list-style-type: none"> • Immunization required - see website for current information: Immunization Requirements for School and Child Care Getting Immunized • Report to school nurse or consult with health department