Introduction

This Epidemiology Update presents information about the sixth edition of the Infectious Diseases in Childcare Settings and Schools manual. This issue is different in that it does not present data.

Past issues have profiled disease occurrence in Hennepin County. Copies of previous reports are available from Hennepin County Public Health Protection – Epidemiology.
http://www.hennepin.us/EpiUpdates

Background

The number of families with young children in out-of-home childcare has been steadily increasing. A variety of infections have been documented in children attending childcare, sometimes with spread to caregivers and to others at home. Infants and preschool-aged children are very susceptible to contagious diseases because they 1) have not been exposed to many infections, 2) have little or no immunity to these infections, and 3) have not received any or all of their vaccinations.

Close physical contact for extended periods of time, inadequate hygiene habits, and underdeveloped immune systems place children attending childcare and in special needs settings at increased risk of infection. For instance, the spread of diarrheal disease may readily occur with children in diapers and others with special needs due to inadequate handwashing, environmental sanitation practices, and diaper changing.
This manual is a resource that has grown in popularity over the years. Many public health staff, childcare providers, school health staff, and healthcare provider offices use the manual as a resource.

It is always beneficial to parents/guardians if the healthcare provider, the childcare provider, the childcare consultant, school health staff, and health department staff make the same recommendations for exclusion of ill children. The guidelines found in the manual are a means of having all the players using the same information.
General Exclusion Guidelines for Ill Children/Staff

Certain symptoms in children may suggest the presence of a communicable disease. Excluding an ill child may decrease the spread of the disease to others in the childcare and school settings. Recommended exclusion varies by the disease or infectious agent. Children with the symptoms listed below should be excluded from the childcare or school setting until symptoms improve; or a healthcare provider has determined that the child can return; or children can participate in routine activities without more staff supervision than usual.

Exclude children with any of the following:

**Illness**
Unable to participate in routine activities or needs more care than can be provided by the childcare/school staff.

**Fever**
With an elevation of body temperature above normal when accompanied by behavior changes, stiff neck, difficulty breathing, rash, sore throat, and/or other signs or symptoms of illness; or is unable to participate in routine activities. **Measure temperature before giving medications to reduce fever.**
- **Auxiliary** (armpit) temperature: 100° F or higher
- **Oral** temperature: 101° F or higher

Ear temperatures are not recommended because of inconsistent and inaccurate results. Each manufacturer may have different temperature ranges, which makes setting standards difficult.

**Signs/Symptoms of Possible Severe Illness**
Until a healthcare provider has done an evaluation to rule out severe illness when the child is unusually tired, has uncontrolled coughing, unexplained irritability, persistent crying, difficulty breathing, wheezing, or other unusual signs for the child.

**Diarrhea**
Until diarrhea stops or until a medical exam indicates that it is not due to a communicable disease. Diarrhea is defined as an increased number of stools compared with a child's normal pattern, along with decreased stool form and/or stools that are watery, bloody, or contain mucus.

**Vomiting**
Vomiting two or more times in the previous 24 hours, unless determined to be caused by a non-communicable condition and the child is not in danger of dehydration.

**Mouth Sores with Drooling**
Until a medical exam indicates the child may return or until sores have healed.

**Rash with Fever or Behavior Change**
Until a medical exam indicates these symptoms are not those of a communicable disease that requires exclusion.

**Eye Drainage**
When purulent (pus) drainage and/or fever or eye pain is present or a medical exam indicates that a child may return.

**Unusual Color of Skin, Eyes, Stool, or Urine**
Until a medical exam indicates the child does not have hepatitis A. Symptoms of hepatitis A include yellow eyes or skin (jaundice), gray or white stools, or dark (tea or cola-colored) urine.

Specific guidelines for childcare and schools settings can be found on pages 3-14 in the *Infectious Diseases in Childcare Settings and Schools* manual (June 2008).
Fact Sheets for Providers and Parents/Guardians

This manual contains 54 disease fact sheets for providers (healthcare providers, childcare providers, and school health staff) about specific infectious disease problems. These fact sheets have been designed to provide specific disease prevention and control guidelines that are consistent with the national standards put forth by the American Public Health Association and the American Academy of Pediatrics. Some indicate when immediate action is necessary. Please note that on the PROVIDER fact sheets, for any diseases labeled "REPORTABLE", the provider (childcare or school) MUST consult with the LOCAL or STATE HEALTH DEPARTMENT. After receiving approval from the local or state health department, the PARENT/GUARDIAN fact sheets would be posted or distributed to the parents/guardians.

In past editions the “provider” fact sheets were used to notify parents/guardians when a child in their childcare or school had a specific disease. Parents and providers have requested information in a format that was easier for parents/guardians to use. For this edition 47 parent fact sheets were created to address this concern. Parents/guardians that are interested in more information can access the provider information sheets or check the website references in the back of the manual.

Each parent fact sheet includes information on notifying the childcare provider or school health staff when the child has a disease; answers the question, “does the child needs to stay home?”; and provides information on symptoms, spread, contagious period, when to call a healthcare provider, and prevention.

Example of parent/guardian fact sheet

<table>
<thead>
<tr>
<th>Your child may have been exposed to:</th>
</tr>
</thead>
<tbody>
<tr>
<td><em>Chickenpox</em></td>
</tr>
</tbody>
</table>

Chickenpox is a viral illness. It is common for children to get chickenpox. It may be prevented by vaccination.

If you think your child has Chickenpox:

- Tell your childcare provider or call the school.
- Need to stay home?
  - Childcare and School: Yes, until all the blisters have dried into scabs. This is usually by day 6 after the rash began. This is true even if the child has been vaccinated.

DO NOT give aspirin or salicylate-containing medicines to anyone under 18 years of age.

Symptoms
Your child will have a rash that begins as red bumps and may have a fever.

If your child is infected, it may take 10-21 days for symptoms to begin.

Spread
- By touching the blister fluid or secretions from the nose or mouth.
- By coughing or sneezing.

Contagious Period
From 1 to 2 days before the rash begins until all blisters have become scabs. Scabs usually form within 6 days.

Call your Healthcare Provider
If someone in your home:
- develops a rash with fever. Your doctor will decide if treatment is needed. DO NOT go to a healthcare facility without calling first. You will be separated from others to prevent spread of illness.
- has been exposed to chickenpox and they have not had chickenpox disease or chickenpox (varicella) vaccine in the past or are pregnant.

References:

For more information about this report call Hennepin County Human Services and Public Health Department-Epidemiology, (612) 543-5230.

For other documents please visit our site at: www.hennepin.us