

CONTROLLING CHILDHOOD DISEASES

GENERAL DISEASE PREVENTION RECOMMENDATIONS:

- FOR PATIENTS**
- Practice routine hand hygiene throughout the day, particularly after using the bathroom, changing diapers, and before eating.
 - Avoid sharing personal items.
 - Receive routine vaccines.
- AT WORK**
- Maintain written policies for infectious diseases, including standard precautions, and ensure staff education of policies and procedures.
 - Establish policies for food preparation, routine cleaning, sanitation, and disinfection of contaminated surfaces and objects.
 - Exclude ill persons when necessary.
- All outbreaks of disease must be reported to your county health department immediately.**

	DISEASE	INCUBATION PERIOD	HOW DOES IT SPREAD?	COMMON SYMPTOMS	RETURN TO CENTER OR SCHOOL?	REPORT TO COUNTY HEALTH DEPARTMENT?	DISEASE PREVENTION
EYE, EAR, NOSE, THROAT & CHEST	Bronchiolitis, Bronchitis, Common Cold, Croup, Ear Infection, Pneumonia, Sinus Infection & Most Sore Throats	Variable	Contact with respiratory droplets or contaminated surfaces.	Various respiratory symptoms, possibly with fever.	No restrictions unless child has a fever.	NO	Cover coughs & sneezes.
	Influenza	1–4 days	Contact with respiratory droplets or contaminated surfaces.	Fever, cough, sore throat, fatigue.	After 24 hours without fever & without anti-fever medication.	NO	Immediate exclusion. Annual influenza vaccination.
	Mononucleosis (Epstein-Barr virus)	4–6 weeks	Contact with respiratory droplets or contaminated surfaces.	Fever, fatigue, sore throat, swollen lymph nodes.	No restrictions unless child has a fever.	NO	Avoid contact with respiratory droplets.
	Mumps	12–25 days	Contact with respiratory droplets or contaminated surfaces.	Swollen & tender salivary glands.	5 days after swelling begins.	YES	Routine pediatric vaccination.
	Pinkeye or Conjunctivitis	Variable	Contact with eye secretions or contaminated surfaces.	Pink or red in whites of eyes & discharge or crusting around eyes.	On recommendation of physician.	NO	Increased hand washing.
	Respiratory Syncytial Virus (RSV)	2–8 days	Contact with respiratory droplets or contaminated surfaces.	Cold-like symptoms, fever, difficulty breathing.	After 24 hours without fever & without anti-fever medication.	NO	Cover coughs & sneezes.
	Strep Throat (Group A <i>Streptococcus</i>)	1–5 days	Contact with respiratory droplets or contaminated surfaces.	Sore throat, fever, swollen lymph nodes.	After 24 hours without fever & without anti-fever medication.	NO	Immediate exclusion. Avoid contact with respiratory droplets. Cover coughs & sneezes.
	Tuberculosis (TB)	Variable	Contact with respiratory droplets.	Persistent cough, bloody sputum, weight loss, fever.	County health department permission.	YES	Immediate exclusion.
GASTROINTESTINAL	Whooping Cough* (<i>Bordetella pertussis</i>)	5–21 days	Contact with respiratory droplets or contaminated surfaces.	Cold-like symptoms, persistent cough, vomiting after cough & difficulty breathing.	After 5 days of appropriate antibiotic treatment.	YES–URGENT	Routine pediatric & adult vaccination. Booster recommended for adults.
	Campylobacteriosis	1–10 days	Consuming improperly cooked food. Contact with human or animal feces.	Diarrhea, abdominal pain, fever.	After 24 hours without diarrhea.	YES	Proper food preparation/handling & hand washing. Hand washing after animal contact.
	Cryptosporidiosis	1–12 days	Swallowing contaminated water. Contact with human or animal feces.	Watery diarrhea, abdominal pain & fever.	After 24 hours without diarrhea.	YES	Avoid contact with untreated/contaminated water sources (i.e. water play features). Do not swim for at least 2 weeks after diarrhea stops.
	Giardiasis	1–4 weeks		Watery diarrhea, abdominal pain, fever & excessive gas.	After 24 hours without diarrhea.	YES	Avoid contact with untreated/contaminated water sources (i.e. water features). Do not swim for at least 1 week after diarrhea stops.
	Hepatitis A	2–7 weeks	Consuming contaminated food or water. Contact with human feces.	Fever, jaundice (yellow skin or eyes) & fatigue.	After 7 days from onset of jaundice.	YES–URGENT	Routine pediatric & adult vaccination.
	Pathogenic <i>E. coli</i>	2–10 days	Consuming improperly cooked food or water. Contact with human or animal feces.	Diarrhea (sometimes bloody), abdominal pain & fever.	County health department permission—generally 2 negative stool cultures.	YES	Proper food preparation/handling & hand washing. Hand washing after animal contact.
	Pinworms	2–8 weeks	Contact with human feces.	Anal or vaginal itching.	No restrictions.	NO	Practice routine hand hygiene.
	Salmonellosis	6–72 hours	Consuming improperly cooked food. Contact with human or animal feces.	Diarrhea (sometimes bloody), abdominal pain & fever.	After 24 hours without symptoms.	YES	Proper food preparation/handling & hand washing. Hand washing after animal contact.
	Shigellosis	1–3 days	Contact with human feces.		After 48 hours without symptoms.	YES	Immediate exclusion. Enhanced cleaning & disinfection.
	Typhoid Fever (<i>Salmonella typhi</i>)	3–60 days	Consuming food or water contaminated with human feces. Contact with human feces or aerosolized vomit.	High fevers, headache & abdominal pain.	County health department permission—3 negative stool cultures.	YES	Immediate exclusion. Vaccination of at-risk international travelers.
Viral Gastroenteritis (vomiting and/or diarrhea) Norovirus or Rotavirus	1–5 days	Vomiting, watery diarrhea & sometimes fever.		After 48 hours without vomiting or diarrhea.	NO	Immediate exclusion. Enhanced cleaning & disinfection. Practice routine hand hygiene.	
MENINGITIS	Bacterial Meningitis	Variable	Contact with respiratory droplets.	High fever & headache, additional symptoms present.	After 24 hours of antibiotic treatment.	YES	Routine immunization can prevent <i>Haemophilus influenzae</i> type B, meningococcal disease & pneumococcal disease.
	Meningococcal Disease (<i>Neisseria meningitidis</i>)	2–10 days		High fever & headache, may have rash.	After 24 hours of antibiotic treatment.	YES–URGENT	
	Viral Meningitis (Enteroviruses)	3–6 days	Contact with respiratory droplets or human feces.	Fever & headache.	On recommendation of physician.	NO	Practice routine hand hygiene.
	Amebic Meningitis (<i>Naegleria fowleri</i>)	1–9 days	When water containing ameba enters the nose. Not spread between people.	Fever, headache, vomiting, stiff neck, seizures, coma.	On recommendation of physician.	YES–URGENT	Avoid getting warm fresh water in sinuses. If rinsing sinuses, use sterile water.
SKIN OR RASH	Chickenpox* (Varicella zoster virus)	10–21 days	Breathing airborne respiratory droplets. Contact with lesion fluid.	Fever & itchy/bumpy rash.	When all lesions have crusted over or no new lesions for >24 hours in immunized children.	YES	Routine pediatric vaccination.
	Fifth Disease* (Parvovirus B19)	4–21 days	Contact with respiratory droplets.	Red “slapped-cheek” rash, preceded by fever.	No restrictions unless child has a fever.	NO	Practice routine hand hygiene.
	Hand, Foot, & Mouth Disease (Coxsackie virus)	3–6 days	Contact with respiratory droplets, lesion fluid or human feces.	Blister-like rash on mouth, hands, buttocks & feet.	No restrictions unless child has a fever.	NO	Practice routine hand hygiene.
	Head Lice	7–12 days	Contact with infested person.	Itching of scalp.	After treatment started, even if nits are present.	NO	Avoid sharing personal items. Close contacts need to be examined for lice.
	Impetigo (<i>Staphylococcus</i> or <i>Streptococcus</i> bacteria)	1–10 days	Contact with respiratory droplets, lesion fluid or contaminated surfaces/items.	Red sores or blisters that have a yellow crust, typically on face.	After at least 24 hours of antibiotics & lesions are covered until dry.	NO	Immediate exclusion. Cover lesions with bandage.
	Measles (Rubeola virus)	7–21 days	Airborne respiratory droplets.	Fever, cough, red eyes, flat/raised rash spread over body.	After 4 days from the onset of rash.	YES–URGENT	Routine pediatric vaccination.
	Molluscum Contagiosum	2–7 weeks	Contact with lesions or contaminated surfaces.	Small raised round flesh-colored lesions.	No restriction.	NO	Practice routine hand hygiene. Do not share towels.
	MRSA (Methicillin-resistant <i>Staphylococcus aureus</i>)	Variable	Contact with lesion fluid or contaminated surfaces.	Red bumps, boils or lesions of varying severity.	Wound drainage can be contained under a dressing & no fever.	NO	Cover skin breaks/lesions. Avoid contact with wound drainage. Proper disposal of dressings. Do not share personal items: towels, razors, etc.
	Ringworm	Variable	Contact with lesions or contaminated surfaces.	Circular, red, scaly patches with raised edges on skin.	Once treatment begins.	NO	Avoid direct contact with infected individuals.
	Roseola	9–10 days	Contact with respiratory droplets.	High fever, followed by red raised rash all over body.	No restrictions unless child has a fever.	NO	Practice routine hand hygiene.
	Rubella*	14–21 days		Flat/raised rash spread over body, fever, swollen lymph nodes.	After 7 days from onset of rash.	YES–URGENT	Routine pediatric vaccination.
	Scabies	4–6 weeks after first exposure. 1–4 days after re-exposures.	Contact with infested person or contaminated personal items.	Itchy, red, raised eruptions.	After treatment completed.	NO	Porous items that cannot be laundered should be removed—stored for one week. During outbreaks, treating all close contacts may be necessary to stop transmission.

*These diseases are of increased concern to staff members who are pregnant or trying to become pregnant. Follow-up with obstetric health care provider is recommended after known or suspected contact. For outbreaks, county health department staff may recommend additional or more strict disease control measures (i.e. exclusion of unvaccinated persons, testing of ill persons, enhanced cleaning and disinfection, etc.).

