

Communicable Disease Reference Chart for Schools and Child Care Personnel

This chart provides recommendations by disease for when a child may be excluded from school, and what documentation is required for their return

***These conditions require temporary exclusion of a child from school or childcare setting until diagnosed or cleared by a healthcare provider, or symptoms have resolved, regardless of the specific disease.**

- **Fever:** Any unexplained fever (greater than 100.4°F in a child) or feels warm to the touch, in addition to a behavior change or other signs and symptoms
- **Vomiting:** > 2 episodes in the previous 24 hours, unless due to a non-communicable disease
- **Diarrhea:** 3 or more watery or loose stool episodes within 24 hours
- **Rash:** Red, bumpy, itchy, or scaly patches of skin; Any new onset of rash accompanied by fever
- **Skin Lesions:** Abnormal skin growth, may have drainage that cannot be covered or contained with a waterproof bandage
- **Cough:** Persistent cough with or without fever, serious sustained coughing
- **Shortness of Breath (SOB):** Inability to move enough air into or out of the lungs, or doing so only with an usually great effort; inability to “catch” one’s breath, difficulty breathing
- **Abdominal cramps:** painful pulling or squeezing sensation in the abdomen/gastrointestinal tract
- **Muscle aches:** pain or discomfort in the muscles

Exclusion can also be recommended if:

- The child is unable to participate in routine activities due to symptoms
- Care required for the ill child by staff compromises the health and safety of other children.

Cleaning Guidelines can be found following the chart.

All suspected or diagnosed cases must be reported to DC Health through the Epidemiology Investigation Team (EIT) Portal (dccovid.my.site.com/NonHealthcareConsultRequestForm/s/).

If you require any urgent epidemiological support, please call (844) 493-2652

DISEASE	INCUBATION PERIOD	TRANSMISSION	SYMPTOMS	CONTAGIOUS PERIOD	REPORTABLE TO DC HEALTH	EXCLUSION* (Review Section Above)	SCHOOL’S RECOMMENDED CONTROL MEASURES (School nurse should share these measures with the school or daycare principal or director)	SCHOOL NURSE/ HEALTH SUITE ACTION/FOLLOW-UP
Chickenpox (Varicella)	10- 21 days	From person to person by <i>direct contact</i> with blisters Through breathing in <i>airborne</i> virus particles that come from the blisters that get in the air when an infected person breathes, coughs, sneezes, or talks	Fever, Tiredness, Loss of appetite, Headache, Itchy fluid-filled blisters that may first show up on the face, chest and back then spread to the rest of the body	1 - 2 days before rash onset until all blisters are crusted over (usually 5 -7 days)	YES Immediately report individual cases	YES until all rashes/blisters have crusted over and no new lesions or blisters appear for 24 hours	<ul style="list-style-type: none"> • Clean and sanitize items and surfaces in the facility • Encourage proper handwashing • Encourage practice of proper covering of mouth and nose when coughing, or sneezing <p><i>In consultation with DC Health</i></p> <ul style="list-style-type: none"> • Notify all individuals who share room/ dorm space of exposure • Check vaccination status and Encourage vaccinations • Exclude unimmunized close contacts for 21 days from their last date of exposure or until 24 hours after receiving a varicella vaccine 	<ul style="list-style-type: none"> • Quarantine student in health suite • Disinfect all areas student has come into contact with • Call parent/guardian for immediate pick up • Student can return to school once asymptomatic, 4-7 days after chickenpox rashes have scabbed.

Common Colds (Upper respiratory illness)	1-2 days	Through contact with respiratory droplets (when an infected person talks, sneezes, or coughs) Through direct contact with objects or surfaces contaminated with respiratory droplets	Fever, Sore throat, Runny nose, Cough, Sneeze, Watery eyes, Headaches, Body aches	Usually within the first 24 hours until 3 days after symptoms started	NO	YES -until 24 hours after fever resolves and other symptoms improve	<ul style="list-style-type: none"> Encourage proper handwashing Encourage practice of proper covering of mouth and nose when coughing or sneezing Clean and sanitize items and surfaces in the facility (e.g., doorknobs, toys, etc.) 	<ul style="list-style-type: none"> Quarantine student in health suite until parent/guardian can pick student up Disinfect all areas student has come into contact with Student can return to school once asymptomatic and fever free for 24 hours without the aid of fever reducing medication
Conjunctivitis (Pink Eye) - Bacterial or Viral	1-3 days	Through <i>direct contact</i> with discharge or secretion from an infected eye Through <i>direct contact</i> with contaminated objects or surfaces	Pink or red color, swelling of conjunctiva, Itching, Irritation or burning, discharge (pus or mucus), Crusting of eyelids or lashes	During the period of symptoms	Cluster of 3 or more cases occurring within a 7-day period (not single cases)	YES --until symptoms resolve or 24 hours after treatment begins	<ul style="list-style-type: none"> Clean and sanitize items and surfaces in the facility Notify all individuals who share room/dorm space/bathrooms Encourage proper handwashing Clean and sanitize items and surfaces in the facility that may have been in contact with eye secretions of the infected person 	<ul style="list-style-type: none"> Quarantine student in health suite until parent/guardian can pick student up for Disinfect all areas student has come into contact with Call parent/guardian for immediate pick up Student can return to school once asymptomatic status post treatment and with medical clearance for student to return to normal activity
COVID-19	2-14 days	Through contact with respiratory droplets (when an infected person talks, sneezes, or coughs)	Fever, Chills, Shortness of breath or difficulty breathing, Sore throat, Congestion or runny nose, New loss of taste or smell, Fatigue, Muscle or body aches, Headache, Nausea or vomiting, Diarrhea	2 days before symptom onset to 8-10 days after symptoms begin		YES -until 24 hours after fever resolves and other symptoms improve	<ul style="list-style-type: none"> Encourage proper handwashing Encourage practice of proper covering techniques when coughing or sneezing Consider strategies to prevent the spread of COVID-19 including masking, vaccination, physical distancing Clean and sanitize items and surfaces in the facility, especially mouthed toys/items 	<ul style="list-style-type: none"> Quarantine student in health suite until parent/guardian can pick student up Disinfect all areas student has come into contact with Student can return to school once asymptomatic and fever free for 24 hours without the aid of fever reducing medication
Coxsackie (Hand, Foot, and Mouth Disease)	3-7 days	Through <i>direct contact</i> with blisters Through contact with respiratory droplets (when an infected person talks, sneezes, or coughs) Through direct contact with feces or items and surfaces contaminated with respiratory droplets	Fever, Sore throat, Blister-like rash on hands, feet, and in the mouth	During the first week of illness but can be contagious for weeks after symptoms are gone	Cluster of 3 or more cases occurring within a 7-day period (not single cases)	CONDITIONAL -- exclude if blisters in the mouth with uncontrollable drooling or weeping blisters cannot be covered	<ul style="list-style-type: none"> Notify all individuals who share room/dorm space/bathrooms of exposure Encourage proper handwashing Encourage practice of proper covering techniques when coughing, or sneezing Clean and sanitize items and surfaces in the facility especially mouthed toys/items 	<ul style="list-style-type: none"> Quarantine student in health suite until parent/guardian can pick student up Disinfect all areas student has come into contact with Student can return to school once asymptomatic and fever free for 24 hours without the aid of fever reducing medication
Croup	2-7 days	Through contact with respiratory droplets (when an infected person talks, sneezes, or coughs) Through direct contact with items or surfaces contaminated with respiratory droplets	Fever, Runny nose, Barking cough, Sore throat	1 week before to 1-3 weeks after symptom onset	NO	NO	<ul style="list-style-type: none"> Notify parents/guardians of classmates of exposure Encourage proper handwashing Encourage practice of proper covering of mouth and nose when coughing or sneezing Clean and sanitize items and surfaces in the facility 	<ul style="list-style-type: none"> Quarantine student in health suite until parent/guardian can pick student up Disinfect all areas student has come into contact with Student can return to school once asymptomatic and fever free for 24 hours without the aid of fever reducing medication.

Haemophilus influenzae Type B (Hib)	Unknown	Through contact with respiratory droplets (when an infected person talks, sneezes, or coughs)	Depends on the site of infection; can include: Fever, Vomiting, Irritability, Rapid onset of difficulty breathing, Cough, Warm red and swollen joints, or Welling and discoloration of the skin, particularly of the cheek and around the eye	Until treatment has begun	YES -- Immediately report individual cases	YES --until 24 hours after antibiotic treatment begins	<ul style="list-style-type: none"> • Clean and sanitize items and surfaces in the facility • Notify all individuals who share room/dorm space/bathrooms of exposure <p><i>In consultation with DC Health</i></p> <ul style="list-style-type: none"> • Review vaccination status close contacts; recommend post-exposure prophylaxis and vaccination if needed 	<ul style="list-style-type: none"> • Quarantine student in health suite until parent/guardian can pick student up • Disinfect all areas student has come into contact with • Student can return to school once asymptomatic and fever free for 24 hours without the aid of fever reducing medication
Fifth Disease (Human parvovirus B19)	4-14 days (up to 21 days)	Through contact with respiratory droplets (when an infected person talks, sneezes, or coughs)	Fever, runny nose, Headache, "Slapped Cheek" red rash, Painful or swollen joints	During "cold like" symptoms and before rash onset or joint pain/swelling	NO	YES --until cold-like symptoms have resolved and rash develops	<ul style="list-style-type: none"> • Clean and sanitize items and surfaces in the facility • Encourage proper handwashing • Encourage practice of proper covering techniques when coughing or sneezing • Notify parents/guardians of classmates of the exposure • Notify teacher/caregivers- those who are pregnant should be aware of the potential risks to their baby. Encourage them to discuss with their doctor and employer to decide what is best for them. 	<ul style="list-style-type: none"> • Quarantine student in health suite until parent/guardian can pick student up • Disinfect all areas student has come into contact with • Student can return to school once asymptomatic rash free, with no new sores and fever free for 24 hours without the aid of fever reducing medication.
Head Lice	Nits hatch in 8-9 days; adult lice live up to 30 days	Through <i>direct contact</i> (head to head) with an infested person's hair Through contact with personal belongings such as combs, brushes, and hats, etc., of an infested person	Severe itching, scratching, or tickling feeling of something moving in the hair	As long as live lice are present	Cluster of 3 or more cases occurring within a 7-day period (not single cases)	NO	<ul style="list-style-type: none"> • Notify all individuals who share room/dorm space/bathrooms of exposure • Recommend washing beddings and clothing in hot water • No sharing of hats or helmets at school without proper disinfection • Clean facility by vacuuming carpeted floor and washing possibly contaminated items 	<ul style="list-style-type: none"> • Quarantine student in health suite until parent/guardian can pick student up • Disinfect all areas student has come into contact with • Student can return to school after head lice treatment as long as there are no live lice upon re-inspection by school personnel
Hepatitis A	15-50 days (average 28 days)	Fecal-oral spread (through contact with items or surfaces contaminated with feces from an infected person) Through consumption of contaminated food or water	Fatigue, Poor appetite, Fever, Nausea, Vomiting, Abdominal pain, diarrhea, Joint pain, Jaundice (yellowing of skin or whites of eyes), Dark brown urine	In the 2 weeks before onset of symptoms - to - 1 week after onset of jaundice	YES -- immediately report individual cases	YES --until 24 hours after fever, vomiting, and/or diarrhea resolves	<ul style="list-style-type: none"> • Notify all individuals sharing room/dorm space/bathrooms of exposure • Clean and sanitize items and surfaces in the facility • Encourage proper handwashing, especially after toileting or changing diaper and before handling food <p><i>In consultation with DC Health</i></p> <ul style="list-style-type: none"> • Review vaccination status of close contacts and recommend vaccination for non-immunized contacts within 2 weeks of exposures/assess the need for using vaccine or immune globulin for contacts 	<ul style="list-style-type: none"> • Student can return to school at least one week after the onset of illness if there are no longer any symptoms and medical clearance has been given.
Herpes simplex (cold sores, fever blisters)	2-12 days (may be longer)	Through direct contact with infected person's saliva or blisters	Red bumps on the lips and/or edge of the mouth (can appear in gums or throat) that blister, itching or burning sensation of the bumps	As long as blisters are present or until 4-5 days after treatment	NO	NO	<ul style="list-style-type: none"> • Notify parents/guardians of classmates • Encourage proper handwashing and avoid sharing food/drinks • Recommend avoiding contact with blisters or close contact with an infected person • Clean and sanitize items and surfaces in the facility especially mouthed toys/items 	<ul style="list-style-type: none"> • Student can remain in school during active infection, however younger students have to be closely monitored and reminded to not touch their sores and to wash their hands • Extreme infection may cause student to stay home and return when sores have healed
Influenza (Flu/Influenza-Like Illness)	1-4 days (2 days on average)	Through contact with <i>respiratory droplets</i> (when an infected person talks, sneezes, or coughs) Through <i>direct contact</i> with items or surfaces contaminated with	Fever, Chills, Cough, Sore throat, Runny and stuffy nose, Muscles or body aches, Headaches, Tiredness, Children may sometime experience vomiting and diarrhea	1 day before to about 5-7 days after symptom onset date	Cluster of 3 cases occurring within a 7-day period (not single cases) OR -- hospitalization or death in	YES -until 24 hours after fever resolves	<ul style="list-style-type: none"> • Notify all individuals sharing room/dorm space/bathrooms of exposure • Encourage proper handwashing • Encourage practice of proper covering techniques when coughing or sneezing • Consider vaccination against flu during flu season • Clean and sanitize items and surfaces in the facility, especially mouthed toys/items 	<ul style="list-style-type: none"> • Quarantine student in health suite until parent/guardian can pick student up • Disinfect all areas student has come into contact with • Student can return to school once asymptomatic and fever free for 24 hours without the aid of fever reducing medication

		respiratory droplets			children <18 years old			
Methicillin - Resistant Staphylococcus Aureus (MRSA)	1 - 10 days	Through <i>direct contact</i> with an infected person's wound/blisters Through contact with contaminated items such as towels or razors	Bump or infected area on the skin that may be red, swollen, warm to touch, painful and full of pus or other drainage accompanied by a fever	As long as wounds/blisters are present on the skin	YES -- immediately report individual cases	CONDITIONAL -- exclude if infection is related to a wound with drainage that cannot be covered and contained with a clean and dry bandage	<ul style="list-style-type: none"> Notify all individuals sharing room/dorm space/bathrooms of exposure Encourage proper handwashing and body hygiene practices Recommend keeping cut and scrapes clean and covered with bandages Recommend avoiding the sharing of personal items like towels and s p o r t /workout equipment Clean and sanitize items and surfaces in the facility for cases with wound and blisters 	<ul style="list-style-type: none"> Student may return to school if medical clearance is granted
Measles (Rubeola)	7 - 21 days (most common is 14 days after exposure)	Through breathing in <i>airborne</i> virus particles that stay in the air when an infected person coughs, sneezes, or talks	Fever (lasting couple of days), Cough, Conjunctivitis, Runny nose, Rash on the face and upper neck that can spread to other areas of the body	4 days prior rash onset to 4 days afterwards	YES -- immediately report individual cases	YES -- until 4 days after onset of the rash	<ul style="list-style-type: none"> Clean and sanitize items and surfaces in the facility <p><i>In consultation with DC Health</i></p> <ul style="list-style-type: none"> Notify all individuals living and working at the facility of the exposure Check vaccination status of any individual who was in the same space or area with the case) and recommend vaccination if needed <ul style="list-style-type: none"> - Exclude unimmunized close contacts until immunized or until 21 days from last day of potential exposure to the case if immunization refused - Exclude individuals who are exhibiting symptoms until they are cleared by a healthcare provider 	<ul style="list-style-type: none"> Quarantine student in health suite until parent/guardian can pick student up Disinfect all areas student has come into contact with Student can return to school 4 days after onset of rash pending medical clearance
Meningitis (Bacterial)	Varies by causative agent but usually 3 - 7 days	Through contact with <i>respiratory droplets</i> (when an infected person sneezes or coughs) or when sharing eating utensils, Through eating contaminated food	Fever, Headache, Stiff neck, Nausea, Vomiting, Increased sensitivity to light and confusion	Until 24 hours after treatment has begun	YES -- immediately report individual cases	YES -- until 24 hours after antibiotics treatment has begun	<ul style="list-style-type: none"> Notify all individuals sharing room/dorm space/bathrooms of exposure Clean and sanitize items and surfaces in the facility especially eating and drinking utensils Recommend that people avoid contact with infected individual <p><i>In consultation with DC Health</i></p> <ul style="list-style-type: none"> Check vaccination status close contacts; recommend post-exposure prophylaxis and vaccination if needed 	<ul style="list-style-type: none"> Student can return after 14 days of antibiotics pending medical clearance
Meningitis (Viral)	Varies by virus	Varies based on the virus causing the illness but generally involves having close <i>direct contact</i> with an infected person	In children, symptoms include fever, irritability, lack of energy, sleepiness; Adults may experience severe headache, stiff neck, nausea, vomiting, lack of energy, and drowsiness	Varies by causative virus	YES -- immediately report individual cases	CONDITIONAL -- exclude if causative virus is (e.g. measles, mumps, varicella zoster)* <i>*Refer to disease specific section for more information on exclusion</i>	<ul style="list-style-type: none"> Notify all individuals sharing room/dorm space/bathrooms of exposure Encourage proper handwashing Encourage practice of proper covering techniques when coughing, or sneezing Recommend avoiding close contact with infected individual, sharing eating and drinking utensils Clean and sanitize items and surfaces in the facility <p><i>In consultation with DC Health</i></p> <ul style="list-style-type: none"> Check vaccination status of close contacts and encourage vaccination if needed (depending on causative virus) 	<ul style="list-style-type: none"> Student can return when asymptomatic pending medical clearance

Molluscum Contagiosum	2-7 weeks	Through direct contact with an infected person's rash Through contact with contaminated items such as clothing, towels, and toys Can also spread through sexual contact	Smooth, firm, circular lesions or pimple like rash on the face, trunk, and limbs but can also appear on other areas of the body	As long as lesions are present	NO	CONDITIONAL --exclude from close contact sports if lesions/rash cannot be covered with bandages or clothing	<ul style="list-style-type: none"> Notify parents/guardians of classmates of exposure Encourage proper handwashing and body hygiene Recommend keeping lesions covered with bandages Recommend avoiding sharing of personal items like towels and sport/workout equipment Recommend avoiding close contact activities Clean and sanitize items and surfaces in the facility 	<ul style="list-style-type: none"> Health Suite staff should isolate bumps and cover as soon as possible Student can remain in school as long as bumps are covered pending medical clearance
Mononucleosis (Epstein-Barr virus)	4-6 weeks	Through intimate direct contact with the saliva of an infected person	Extreme fatigue, Fever, Sore throat, Swollen lymph glands	Several weeks or months during and after the initial infection	NO	YES --exclude during the period of time that a child feels ill and is unable to tolerate much general activity -- exclude if child is drooling uncontrollably	<ul style="list-style-type: none"> Notify parents/guardians or classmates of exposure Encourage proper handwashing Recommend avoiding sharing eating or drinking utensils Clean and sanitize items and surfaces in the facility especially eating and drinking utensils 	<ul style="list-style-type: none"> Quarantine student in health suite until parent/guardian can pick student up Disinfect all areas student has come into contact with Student can return to school when fever free for 24 hours without the aid of fever reducing medication with no swallowing deficits
Mumps	12-25 days (usually 16-18 days)	Through contact with <i>respiratory droplets</i> (when an infected person sneezes or coughs)	Fever, Headache, Muscle aches, Parotitis (swollen and tender salivary glands), Orchitis	2 days before parotitis (swelling of salivary glands) to 5 days after parotitis	YES -- immediately report individual cases	YES --until 5 days after glands begin to swell	<ul style="list-style-type: none"> Clean and sanitize items and surfaces in the facility <p><i>In consultation with DC Health</i></p> <ul style="list-style-type: none"> Notify all individuals sharing room/dorm space/bathrooms of exposure Check vaccination status of close contacts and recommend vaccination if needed. This does not prevent infection if child is already exposed but can stop future spread. Exclude unimmunized close contacts until immunized, or until 25 days if immunization refused 	<ul style="list-style-type: none"> Quarantine student in health suite until parent/guardian can pick student up Disinfect all areas student has come into contact with Student can return to school after 5 days of onset of swelling pending medical clearance
Pertussis (Whooping Cough)	5 - 21 days (usually 7- 10 days)	Through contact with <i>respiratory droplets</i> (when an infected person sneezes or cough)	In early stage people experience cold-like symptoms, runny nose, mild cough or low-grade fever. Within 2 weeks, people experience rapid coughs with high-pitched whoop and vomiting	Until after 5 days of treatment or 3 weeks after cough onset	YES -- immediately report individual cases	YES -- until 5 days after treatment or 3 weeks after cough onset (if untreated)	<ul style="list-style-type: none"> Clean and sanitize items and surfaces in the facility <p><i>In consultation with DC Health</i></p> <ul style="list-style-type: none"> Notify all individuals sharing room/dorm space/bathrooms of exposure Check their vaccination status and recommend post-exposure prophylaxis, and vaccination if needed Exclude any exposed individuals who are coughing until appropriate evaluation and treatment 	<ul style="list-style-type: none"> Quarantine student in health suite until parent/guardian can pick student up Disinfect all areas student has come into contact with Student can return to school after 5 days of antibiotic treatment pending medical clearance
Pinworm	1-2 months	<i>Fecal-oral spread</i> (through contact with items or surfaces contaminated with feces from an infected person) Through consumption of contaminated food or water	Itching around the anus that can lead to difficulty sleeping (some cases are asymptomatic)	As long as eggs are present	Cluster of 3 or more cases occurring within a 7 day period (not single cases)	NO	<ul style="list-style-type: none"> Notify all individuals sharing room/dorm space/bathrooms of exposure Encourage proper handwashing especially before handling food or eating and after using the toilet or changing diapers Recommend frequent laundering of beddings, towels and clothing used by an infected person Infected persons should consider cutting fingernails regularly Clean and sanitized items and surfaces in the facility especially, toys, surfaces used for eating, toileting, hand hygiene, food preparation, and diapering 	<ul style="list-style-type: none"> Student can return to school 24 hours after treatment pending medical clearance

							· Vacuum carpeted floors throughout the facility	
Respiratory Syncytial Virus (RSV)	1-10 days	Through contact <i>with respiratory droplets</i> (when an infected person sneezes or coughs) Through <i>direct contact</i> with objects or surfaces contaminated with respiratory droplets	Fever, Runny nose, Congestion, Decreased appetite, Cough	1-2 days prior to the onset of symptoms until 3-8 days after symptoms begin	NO	NO	· Notify all individuals sharing room/dorm space/bathrooms of exposure · Encourage proper handwashing · Encourage practice of proper covering techniques when coughing or sneezing · Clean and sanitize frequently touched items and surfaces in the facility, including mouthed toys/items	· Quarantine student in health suite until parent/guardian can pick student up · Disinfect all areas student has come into contact with · Student can return to school after being fever free for 24 hours without the aid of fever reducing medication
Ringworm	4-14 days	Through <i>direct contact</i> with an infected rash on a person or animal Through contact with contaminated surfaces or items such as combs, brushes, towels, clothing or beddings Through contact with the fungi in the environment (fungi can live on surfaces)	Itchy skin, Itchy, red ring-shaped rash, Red scaly cracked skin, Hair loss that can appear on the scalp or skin of the body or feet	As long as lesions are active	Cluster of 3 or more cases occurring within a 7-day period (not single cases)	NO	· Notify all individuals sharing room/dorm space/bathrooms of exposure · Encourage proper handwashing · Recommend avoiding sharing items such as hats, combs, brushes, barrettes, scarves, clothing, bedding, or towels · Wash all items used by infected person · Vacuum carpeted floors throughout the facility	· Quarantine student in health suite until parent/guardian can pick student up · Disinfect all areas student has come into contact with · Student can return to school two weeks of treatment after initial rash pending medical clearance
Rubella (German measles)	12 - 23 days (usually 14 days)	Through contact with <i>respiratory droplets</i> (when an infected person sneezes or coughs) Through <i>direct contact</i> with objects or surfaces contaminated with respiratory droplets	Slight fever, Joint pain, Headache, Runny nose, Red eyes, Rash; Swollen lymph nodes behind ears	One week prior to rash onset - to - at least 4-7 days after rash onset	YES -- immediately report individual cases	YES -- until 7 days after rash onset	· Clean and sanitize items and surfaces in the facility <i>In consultation with DC Health</i> · Notify all individuals sharing room/dorm space/bathrooms of exposure · Check their vaccination status and recommend vaccination if needed · Exclude unimmunized close contacts · Special considerations should be taken for staff who are pregnant and unaware of their immunization status	· Quarantine student in health suite until parent/guardian can pick student up · Disinfect all areas student has come into contact with · Student can return to school 7 days after onset of rash pending medical clearance
Roseola	9-10 days	Through contact with respiratory droplets (when an infected person coughs)	High fever (> 103 F) lasting for 3-7 days, Red raised rash lasting 24-48 hours, Sore throat, Runny nose, Cough, Irritability, Decreased appetite, Mild diarrhea, Swollen eyelids	As long as the virus is present in nose and throat secretions	NO	NO	· Notify parents/guardians of classmates of exposure · Encourage proper handwashing · Recommend avoiding sharing eating or drinking utensils · Clean and sanitize items and surfaces in the facility	· Quarantine student in health suite until parent/guardian can pick student up · Disinfect all areas student has come into contact with · Student can return to school being fever free for 24 hours without the aid of fever reducing medication even with rash pending medical clearance
Streptococcal Diseases (Strep Throat, Scarlet Fever, Impetigo)	1-3 days, may take up to 7-10 days for impetigo)	Through contact with an infected person's or carrier's <i>respiratory droplets</i> (when a person talks, sneezes, or coughs) Through <i>direct contact</i> with contaminated items	Sore throat, Fever, Red and swollen tonsils or lymph nodes, Sandpaper rash (scarlet fever); Skin lesions usually on elbows, legs, and knees (impetigo)	1-3 days prior to symptom onset until 24 hours after treatment has begun	Cluster of 3 or more cases occurring within a 7 day period (not single cases)	YES --until 24 hours after treatment begins and fever resolves	· Notify individuals sharing same room/dorm/bathrooms of exposure · Encourage proper handwashing · Encourage practice of proper covering techniques when coughing or sneezing · Clean and sanitize items and surfaces in the facility, especially toys/shared items	· Quarantine student in health suite until parent/guardian can pick student up · Disinfect all areas student has come into contact with · Student can return to school being fever free for 24 hours without the aid of fever reducing medication and as soon as 12 hours with antibiotics

		and surfaces, or sores on the skin (impetigo)						
Scabies	4-6 weeks, 1-4 days in persons previously infested	Through close, prolonged <i>direct skin-to-skin contact</i> with an infested person Through <i>direct contact</i> with contaminated items such as clothing, towels or beddings	Intense itching usually between fingers, on wrist, armpit, elbow waistline (can appear on other area of the body); Pimple-like rash	As long as mites are alive	Cluster of 3 or more cases occurring within a 7 day period (not single cases)	YES -- until the day after treatment has begun	<ul style="list-style-type: none"> Notify individuals sharing same room/dorm space/bathrooms of exposure Wash all beddings and clothing worn and used during 3 days before start of treatment in hot water Disinfect items that cannot be washed or dry-cleaned by storing them in a closed plastic bag for 3 - 7 days Clean the facility by vacuuming carpeted floor <p><i>In consultation with DC Health</i></p> <ul style="list-style-type: none"> Recommend that close contacts (roommates/dormmates) be treated concurrently 	<ul style="list-style-type: none"> Quarantine student in health suite until parent/guardian can pick student up Disinfect all areas student has come into contact with Student can return to school 24 hours after first treatment is complete
Viral Gastrointestinal illnesses (e.g., Norovirus)	Generally 24-48 hours, but can be as short as 12 hours.	<i>Fecal-oral spread</i> (through contact with items or surfaces contaminated with feces or vomit from an infected person) Through consumption of contaminated food or water	Nausea, vomiting, diarrhea, abdominal pain, fever, headaches, chills, which can result in dehydration	While diarrhea and vomiting are present	Cluster of 3 or more cases occurring within a 7-day period (not single cases)	YES --until 24 hours after fever, vomiting, and/or diarrhea resolves	<ul style="list-style-type: none"> Notify individuals sharing same room/dorm space/bathrooms of exposure Encourage proper handwashing practices, especially after toileting or changing diaper and before handling food Clean and sanitize items and surfaces in the facility (e.g. toys, keyboards, doorknobs, etc.) 	<ul style="list-style-type: none"> Quarantine student in health suite until parent/guardian can pick student up Disinfect all areas student has come into contact with Student can return to school at least 48 hours after their vomiting and diarrhea have ended pending medical clearance

Glossary of Terms:

Cleaning: physical removal of germs, dirt, and impurities from objects and surfaces; uses soaps or detergents with water to scrub, wash, and rinse

Sanitizing: reduces the number of germs on objects and surfaces to levels considered safe; uses weaker bleach solutions or sanitizing sprays; objects or surfaces should be cleaned first before sanitizing

Disinfecting: kills remaining germs on surfaces which can further lower the risk of spreading disease; uses an EPA-registered disinfecting product or a stronger bleach solution; objects or surfaces should be cleaned first before disinfecting

Respiratory droplets: "large" droplets that contain infectious particles that travel in the air but less than 3 feet

Airborne droplets : "small" droplets that contain infectious particles but are small enough to remain suspended in the air

References

Susan, S. Aronson, Timothy, R. Shope, (2017). *Managing infectious disease in child care and schools: A quick reference guide, 4th Edition*. Elk Grove Village, IL: American Academy of Pediatrics.

22-B Public Health and Medicine - Chapter 22-B2 Communicable and Reportable Diseases. DCMR § 209 (2016)

Centers for Disease Control and Prevention - communicable diseases resources

OSHA – Safety and Health Topics

Cleaning Guidances:

[When and How to Clean and Disinfect a Facility- CDC](#)

[Cleaning and Disinfecting with Bleach- CDC](#)

[The Difference Between Cleaning, Sanitizing, & Disinfecting- CDC](#)