

## 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 an healthcare provider, or symptoms have resolved, regardless of the specific disease.**

- Fever:** Any unexplained fever (greater than 100.4°F in a child) 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:** Any new onset of rash accompanied by fever
- Skin Lesions:** Drainage that cannot be covered or contained with a waterproof bandage
- Cough/SOB:** Persistent cough with or without fever, serious sustained coughing, shortness of breath or difficulty breathing

**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:** Routinely clean, sanitize, or disinfect surfaces and items that can possibly pose a risk for infectious disease transmission to other children by using detergent mixed with water (*Review cleaning guideline for details information on cleaning practices*).

*Cluster (≥3 cases) or Outbreaks of any disease are reportable to the Department of Health (DC Health) within 24 hours of detection.*

*School nurses should notify parents/guardians of classmates of cases with diseases not reportable to DC Health by sending disease specific fact sheets available on the DC health website (<https://dchealth.dc.gov/node/115222>)*

DISEASE	INCUBATION PERIOD	TRANSMISSION	SYMPTOMS	CONTAGIOUS PERIOD	REPORTABLE TO DC Health	EXCLUSION* ( <i>Review section above</i> )	REQUIREMENT TO RETURN TO SCHOOL	SCHOOL'S RECOMMENDED CONTROL MEASURES ( <i>School nurse should share these measures with the school or daycare principal or director</i> )
<b>Chickenpox (Varicella)</b>	10 - 21 days	<ul style="list-style-type: none"> <li>• From person to person by <i>direct contact</i> with blisters</li> <li>• 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</li> </ul>	Mild fever, 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	YES -- until rash has crusted over and no new lesions or blisters appear for 24 hours	Doctor/Physician Note	<ul style="list-style-type: none"> <li>• Clean and sanitize items and surfaces in the facility <b><i>In consultation with DC Health</i></b></li> <li>• Notify parents/guardians of classmates (e.g. day school, after care) and teachers/caregivers</li> <li>• Check their vaccination status and recommend vaccination if needed                             <ul style="list-style-type: none"> <li>- Consider exclusion of unimmunized individuals</li> <li>- On appearance of symptoms, exclude from school</li> </ul> </li> </ul>
<b>Common Colds (Upper respiratory illness)</b>	1 - 2 days	<ul style="list-style-type: none"> <li>• Through contact with <i>respiratory droplets</i> (when an infected person talks, sneezes, or coughs)</li> <li>• Through <i>direct contact</i> with objects or surfaces contaminated with respiratory droplets</li> </ul>	Fever, sore throat, runny nose, cough, sneeze, watery eyes, headaches and body aches	Usually within the first 24 hours until 3 days after symptoms started	NO	NONE	NONE	<ul style="list-style-type: none"> <li>• Recommend proper handwashing</li> <li>• Recommend practice of proper covering of mouth and nose when coughing, or sneezing</li> <li>• Clean and sanitize items and surfaces in the facility (e.g. door knobs, toys, etc..)</li> </ul>
<b>Conjunctivitis (Pink Eye) Bacterial or Viral</b>	1 - 3 days	<ul style="list-style-type: none"> <li>• Through <i>direct contact</i> with discharge or secretion from an infected eye</li> <li>• Through <i>direct contact</i> with contaminated objects or surfaces</li> </ul>	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 secretions from eye resolves, or until 24 hours after treatment has started (for bacterial)	Doctor/Physician Note OR Proof of treatment (medication bottle or tube)	<ul style="list-style-type: none"> <li>• Notify parents/guardians of classmates (e.g. day school, after care)</li> <li>• Recommend proper handwashing</li> <li>• Clean and sanitize items and surfaces in the facility that may have been in contact with eye secretions of the infected person</li> </ul>

<b>Coxsackie (Hand, Foot and Mouth)</b>	3 - 7 days	<ul style="list-style-type: none"> <li>Through <i>direct contact</i> with blisters</li> <li>Through contact with <i>respiratory droplets</i> (when an infected person talks, sneezes, or coughs)</li> <li>Through <i>direct contact</i> with feces, or items and surfaces contaminated with respiratory droplets</li> </ul>	Fever, sore throat, blister-like rash on hands, feet, and in the mouth	During the first weeks 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	NONE	<ul style="list-style-type: none"> <li>Notify parents/guardians of classmates (e.g. day school, after care)</li> <li>Recommend proper handwashing</li> <li>Recommend practice of proper covering techniques when coughing, or sneezing</li> <li>Clean and sanitize items and surfaces in the facility especially mouthed toys/items</li> </ul>
<b>Croup</b>	2-7 days	<ul style="list-style-type: none"> <li>Through contact with <i>respiratory droplets</i> (when an infected person talks, sneezes, or coughs)</li> <li>Through <i>direct contact</i> with items or surfaces contaminated with respiratory droplets</li> </ul>	Fever, runny nose, barking cough, sore throat	1 week before to 1-3 weeks after symptoms onset	NO	NONE	NONE	<ul style="list-style-type: none"> <li>Notify parents/guardians of classmates (e.g. day school, after care)</li> <li>Recommend proper handwashing</li> <li>Recommend practice of proper covering of mouth and nose when coughing, or sneezing</li> <li>Clean and sanitize items and surfaces in the facility</li> </ul>
<b>Fifth Disease (Human parvovirus B19)</b>	4 - 14 days (up to 21 days)	<ul style="list-style-type: none"> <li>Through contact with <i>respiratory droplets</i> (when an infected person talks, sneezes, or coughs)</li> </ul>	Fever, runny nose, headache, "slapped cheek" red rash, and sometimes painful or swollen joints	During "cold like" symptoms and before rash onset or joint pain or swelling	NO	CONDITIONAL -- exclude if the affected child has an underlying blood disorder, or a compromised immune system; <b>Pregnant caregiver/teachers should consult their doctor and employer about potential risks</b>	NONE	<ul style="list-style-type: none"> <li>Clean and sanitize items and surfaces in the facility</li> <li>Recommend proper handwashing</li> <li>Recommend practice of proper covering techniques when coughing, or sneezing</li> <li>Notify parents/guardians of classmates (e.g. day school, after care)</li> <li><b>In consultation with DC Health</b></li> <li>Notify teachers/caregivers - those who are <i>pregnant</i> should be aware of potential risks to their baby. They may want to discuss with their doctor and employer to decide what is best for them</li> </ul>
<b>Haemophilus influenzae Type b (Hib)</b>	Unknown	<ul style="list-style-type: none"> <li>Through contact with <i>respiratory droplets</i> (when an infected person talks, sneezes, or coughs)</li> </ul>	Depend 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	YES -- until after treatment has started <i>*Cases with meningitis or pneumonia resulting from HIB may return to school until 24 hours after completing antibiotic treatment</i>	Doctor/Physician Note OR Proof of Treatment (medication bottle or tube)	<ul style="list-style-type: none"> <li>Clean and sanitize items and surfaces in the facility</li> <li>Recommend that people avoid contact with infected individual</li> <li>Notify parents/guardians of classmates (e.g. day school, after care) and teachers/caregivers</li> <li><b>In consultation with DC Health</b></li> <li>Check vaccination status of classmates; recommend post-exposure prophylaxis and vaccination if needed</li> </ul>
<b>Head Lice</b>	Nits hatch in 8 - 9 days, adults live about 30 days	<ul style="list-style-type: none"> <li>Through <i>direct contact</i> (head to head) with an infested person's hair</li> <li>Through contact with personal belongings such as combs, brushes, and hats, etc. of an infested person</li> </ul>	Severe itching and scratching, 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)	YES -- from end of school day until next day after treatment has begun (treatment should begin after school on day of notification)	Proof of treatment (e.g. written or email note explaining treatment performed, picture or packaging of the medication, comb used, etc..)	<ul style="list-style-type: none"> <li>Notify parents/guardians of classmates (e.g. day school, after care)</li> <li>Recommend washing beddings and clothings in hot water</li> <li>No sharing of hats or helmets at school without proper disinfection</li> <li>Clean facility by vacuuming carpeted floor and washing possibly contaminated items</li> </ul>
<b>Hepatitis A (Hep A)</b>	15 - 50 days (usually 28 days)	<ul style="list-style-type: none"> <li><i>Fecal-oral spread</i> (through contact with items or surfaces contaminated with feces from an infected person)</li> <li>Through consumption of contaminated food or water</li> </ul>	Fatigue, poor appetite, fever, nausea, vomiting, abdominal pain, joint pain, jaundice (yellowing of skin or whites of eyes), and dark-brown urine	In the 2 weeks before onset of symptoms to 1 week after onset of jaundice	YES -- immediately	YES -- until 1 week after onset of illness or jaundice	Doctor/Physician Note	<ul style="list-style-type: none"> <li>Clean and sanitize items and surfaces in the facility</li> <li>Recommend proper handwashing, especially after toileting or changing diaper and before handling food</li> <li><b>In consultation with DC Health</b></li> <li>Notify parents/guardians of classmates (e.g. day school, after care)</li> <li>Check vaccination status of classmates and recommend vaccination for non-immunized contacts within 2 weeks of exposure</li> <li>- Assess the need for using vaccine or immune globulin for contacts</li> </ul>

<b>Herpes simplex (Cold Sores, Fever Blisters)</b>	2 - 12 days, may be longer	<ul style="list-style-type: none"> <li>Through <i>direct contact</i> with infected person's saliva or blisters</li> </ul>	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 to 5 days after treatment has begun	NO	CONDITIONAL -- exclude if blisters in the mouth with uncontrollable drooling or weeping blisters cannot be covered	NONE	<ul style="list-style-type: none"> <li>Notify parents/guardians of classmates (e.g. day school, after care)</li> <li>Recommend proper handwashing and avoid sharing food/drinks</li> <li>Recommend avoiding contact with blisters or close contact with an infected person</li> <li>Clean and sanitize items and surfaces in the facility especially mouthed toys/items</li> </ul>
<b>Influenza (Flu / Influenza Like Illness)</b>	1 - 4 days (2 days on average)	<ul style="list-style-type: none"> <li>Through contact with <i>respiratory droplets</i> (when an infected person talks, sneezes, or coughs)</li> <li>Through <i>direct contact</i> with items or surfaces contaminated with respiratory droplets</li> </ul>	Fever, chills, cough, sore throat, runny and stuffy nose, muscles or body aches, headaches, and tiredness, children may sometime experience vomiting and diarrhea	1 day before to about 5-7 days after symptoms onset date	NO -- unless cluster of 3 cases in the same classroom occurring within a 7 day period (not single cases) <i>OR</i> -- hospitalization or death in children <18 years old	NONE	NONE	<ul style="list-style-type: none"> <li>Notify parents/guardians of classmates (e.g. day school, after care)</li> <li>Recommend proper handwashing</li> <li>Recommend practice of proper covering techniques when coughing or sneezing</li> <li>Recommend vaccination against flu during flu season</li> <li>Clean and sanitize items and surfaces in the facility, especially mouthed toys/items</li> </ul>
<b>Methicillin -Resistant Staphylococcus aureus (MRSA )</b>	1 - 10 days	<ul style="list-style-type: none"> <li>Through <i>direct contact</i> with an infected person's wound/blisters</li> <li>Through contact with contaminated items such as towels or razors</li> </ul>	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	NO	CONDITIONAL -- exclude if infection is related to a wound with drainage that cannot be covered and contained with a clean and dry bandage	NONE	<ul style="list-style-type: none"> <li>Notify parents/guardians of classmates (e.g. day school, after care)</li> <li>Recommend proper handwashing and good body hygiene practices</li> <li>Recommend keeping cut and scrapes clean and covered with bandages</li> <li>Recommend avoiding the sharing of personal items like towels and sport/workout equipment</li> <li>Clean and sanitize items and surfaces in the facility for cases with wound and blisters</li> </ul>
<b>Measles (Rubeola)</b>	7 - 21 days (most common is 14 days after exposure)	<ul style="list-style-type: none"> <li>Through breathing in <i>airborne</i> virus particles that stay in the air when an infected person coughs, sneezes, or talks</li> </ul>	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	YES -- until 4 days after onset of the rash	<ul style="list-style-type: none"> <li>Doctor/Physician Note AND (if needed)</li> <li>Parent/Guardian Note indicating that the child stayed home for 4 days after onset of rash</li> </ul>	<ul style="list-style-type: none"> <li>Clean and sanitize items and surfaces in the facility</li> <li><b><i>In consultation with DC Health</i></b></li> <li>Notify parents/guardians of children and teachers/caregivers of the entire school</li> <li>Check vaccination status of any individual who was in the same space or area with the case) and recommend vaccination if needed</li> <li>- Exclude unimmunized contacts until immunized or until 21 days from last day of potential exposure to the case if immunization refused</li> <li>On appearance of symptoms in exposed individual, exclude from school</li> </ul>
<b>Meningitis (Bacterial)</b>	Varies by causative agent but usually 3 - 7 days	<ul style="list-style-type: none"> <li>Through contact with <i>respiratory droplets</i> (when an infected person sneezes or coughs) or when sharing eating utensils,</li> <li>Through eating contaminated food</li> </ul>	Fever, headache, and stiff neck, can sometimes cause nausea, vomiting, increased sensitivity to light and confusion	Until 24 hours after treatment has begun	YES	YES -- until 24 hours after antibiotics treatment has begun	<ul style="list-style-type: none"> <li>Doctor/Physician Note</li> <li>OR</li> <li>Proof of treatment (medication bottle or tube)</li> </ul>	<ul style="list-style-type: none"> <li>Notify parents/guardians of classmates (e.g. day school, after care) and teachers/caregivers</li> <li>Clean and sanitize items and surfaces in the facility especially eating and drinking utensils</li> <li>Recommend that people avoid contact with infected individual</li> <li><b><i>In consultation with DC Health</i></b></li> <li>Check vaccination status of classmates; recommend post-exposure prophylaxis and vaccination if needed</li> </ul>

<b>Meningitis (Viral)</b>	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	CONDITIONAL -- exclude if causative virus is (e.g. measles, mumps, varicella zoster)* <i>*Refer to disease specific section for more information on exclusion</i>	Doctor/Physician Note	<ul style="list-style-type: none"> <li>Notify parents/guardians of classmates (e.g. day school, after care)</li> <li>Recommend proper handwashing</li> <li>Recommend practice of proper covering techniques when coughing, or sneezing</li> <li>Recommend avoiding close contact with infected individual, sharing eating and drinking utensils</li> <li>Clean and sanitize items and surfaces in the facility</li> </ul> <p><b><i>In consultation with DC Health</i></b></p> <ul style="list-style-type: none"> <li>Check vaccination status of classmates and recommend vaccination if needed (depending on causative virus)</li> </ul>
<b>Molluscum Contagiosum</b>	2 - 7 weeks	<ul style="list-style-type: none"> <li>Through <i>direct contact</i> with an infected person's rash</li> <li>Through contact with contaminated items such as clothing, towels, and toys</li> <li>Can also spread through sexual contact</li> </ul>	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	NONE	NONE	<ul style="list-style-type: none"> <li>Notify parents/guardians of classmates (e.g. day school, after care)</li> <li>Recommend proper handwashing and good body hygiene</li> <li>Recommend keeping lesions covered with bandages</li> <li>Recommend avoiding sharing of personal items like towels and sport or workout equipment</li> <li>Recommend avoiding close contact activities</li> <li>Clean and sanitize items and surfaces in the facility</li> </ul>
<b>Mononucleosis (Epstein-Barr virus)</b>	4 - 6 weeks	<ul style="list-style-type: none"> <li>Through intimate <i>direct contact</i> with the saliva of an infected person</li> </ul>	Extreme fatigue, fever, sore throat, and swollen lymph glands	Several weeks or months during and after the initial infection	NO	CONDITIONAL -- exclude if child is drooling uncontrollably	NONE	<ul style="list-style-type: none"> <li>Notify parents/guardians of classmates (e.g. day school, after care)</li> <li>Recommend proper handwashing</li> <li>Recommend avoiding sharing eating or drinking utensils</li> <li>Clean and sanitize items and surfaces in the facility especially eating and drinking utensils</li> </ul>
<b>Mumps</b>	12 - 25 days (usually 16-18 days)	<ul style="list-style-type: none"> <li>Through contact with <i>respiratory droplets</i> (when an infected person sneezes or coughs)</li> </ul>	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	YES -- until 5 days after parotitis onset	<ul style="list-style-type: none"> <li>Doctor/Physician Note AND (if needed)</li> <li>Parent/Guardian Note indicating that the child remained at home for 5 days after swelling onset</li> </ul>	<ul style="list-style-type: none"> <li>Clean and sanitize items and surfaces in the facility</li> </ul> <p><b><i>In consultation with DC Health</i></b></p> <ul style="list-style-type: none"> <li>Notify parents/guardians of classmates (e.g. day school, after care)</li> <li>Check vaccination status of classmates and recommend vaccination if needed. This does not prevent infection if child is already exposed but can stop future spread. <ul style="list-style-type: none"> <li>Exclude unimmunized classmates until immunized, or until 25 days if immunization refused</li> </ul> </li> </ul>
<b>Pertussis (Whooping cough)</b>	5 - 21 days (usually 7 - 10 days)	<ul style="list-style-type: none"> <li>Through contact with <i>respiratory droplets</i> (when an infected person sneezes or coughs)</li> </ul>	In early stage people experience cold-like symptoms, runny nose, mild cough or low-grade fever. Within 2 weeks, people experience rapid coughs with a high-pitched whoop and vomiting	Until after 5 days of treatment or 3 weeks after cough onset	YES -- immediately	YES -- until 5 days after treatment or 3 weeks after cough onset (if untreated)	<ul style="list-style-type: none"> <li>Doctor/Physician Note AND (if needed)</li> <li>Parent /Guardian Note indicating child stayed home for 3 weeks after cough onset (if not treated)</li> </ul>	<ul style="list-style-type: none"> <li>Clean and sanitize items and surfaces in the facility</li> </ul> <p><b><i>In consultation with DC Health</i></b></p> <ul style="list-style-type: none"> <li>Notify parents/guardians of classmates (e.g. day school, after care) and teachers/caregivers</li> <li>Check their vaccination status and recommend post-exposure prophylaxis, and vaccination if needed <ul style="list-style-type: none"> <li>Consider excluding any exposed individuals who are coughing until appropriate evaluation and treatment</li> </ul> </li> <li>Monitor exposed staff and classmates for coughing, and exclude until evaluated</li> </ul>

<b>Pinworm</b>	1 - 2 months	<ul style="list-style-type: none"> <li>• <i>Fecal-oral spread</i> (through contact with items or surfaces contaminated with feces from an infected person)</li> <li>• Through consumption of contaminated food or water</li> </ul>	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)	NONE	<ul style="list-style-type: none"> <li>• Doctor/Physician Note OR</li> <li>• Proof of treatment (medication bottle or tube)</li> </ul>	<ul style="list-style-type: none"> <li>• Notify parents/guardians of affected patient and classmates (e.g. day school, after care)</li> <li>• Recommend that parent consult a healthcare provider for treatment</li> <li>• Recommend proper handwashing especially before handling food or eating and after using the toilet or changing diapers</li> <li>• Recommend frequent laundering of beddings, towels and clothings used by an infected person</li> <li>• Clean and sanitized items and surfaces in the facility especially, toys, surfaces used for eating, toileting, hand hygiene, food preparation, and diapering</li> </ul>
<b>Ringworm</b>	4 - 14 days	<ul style="list-style-type: none"> <li>• Through <i>direct contact</i> with an infected rash on a person or animal</li> <li>• Through contact with contaminated surfaces or items such as combs, brushes, towels, clothing or beddings</li> <li>• Through contact with the fungi in the environment (fungi can live on surfaces)</li> </ul>	Itchy skin, ring-shaped rash, red scaly, skin lesions, and 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)	<p>YES</p> <p>-- From end of school day until treatment has begun.</p> <p><i>Cover lesions if possible while waiting for end of day</i></p>	<ul style="list-style-type: none"> <li>• Doctor/Physician Note OR</li> <li>• Proof of treatment (medication bottle or tube)</li> </ul>	<ul style="list-style-type: none"> <li>• Notify parents/guardians of classmates (e.g. day school, after care)</li> <li>• Recommend proper handwashing</li> <li>• Recommend avoiding sharing items such as hats, combs, brushes, barrettes, scarves, clothing, bedding, or towels</li> <li>• Wash all items used by infected person</li> <li>• Clean the facility by vacuuming carpeted floor</li> </ul>
<b>Rubella (German measles)</b>	12 - 23 days (usually 14 days)	<ul style="list-style-type: none"> <li>• Through contact with <i>respiratory droplets</i> (when an infected person sneezes or coughs)</li> <li>• Through <i>direct contact</i> with objects or surfaces contaminated with respiratory droplets</li> </ul>	Slight fever, joint pain, headache, runny nose, red eyes, rash; lymph nodes behind ears can also be swollen	One week prior rash onset to at least 4 -7 days after rash onset	<p>YES</p> <p>-- immediately</p>	<p>YES</p> <p>-- until 7 days after rash onset</p>	<ul style="list-style-type: none"> <li>• Doctor/Physician Note AND (if needed)</li> <li>• Parent/Guardian Note indicating that the child stayed home for 7 days after onset of rash</li> </ul>	<ul style="list-style-type: none"> <li>• Clean and sanitize items and surfaces in the facility</li> <li><b><i>In consultation with DC Health</i></b></li> <li>• Notify parents/guardians of classmates (e.g. day school, after care) and teachers/caregivers</li> <li>• Check their vaccination status of and recommend vaccination if needed <ul style="list-style-type: none"> <li>- Consider exclusion of unimmunized classmates</li> </ul> </li> <li>• Special considerations should be taken for staff who are pregnant and unaware of their immunization status</li> </ul>
<b>Roseola</b>	9-10 days	<ul style="list-style-type: none"> <li>• Through contact with <i>respiratory droplets</i> (when an infected person sneezes or coughs)</li> </ul>	High fever (>103°F) lasting for 3 to 7 days, red raised rash lasting 24 to 48 hours, slightly sore throat, runny nose or cough, and sometime irritability, decrease appetite or swollen eyelids.	As long as the virus is present in nose and throat secretions	NO	NONE	NONE	<ul style="list-style-type: none"> <li>• Notify parents/guardians of classmates (e.g. day school, after care)</li> <li>• Recommend proper handwashing</li> <li>• Recommend avoiding sharing eating or drinking utensils</li> <li>• Clean and sanitize items and surfaces in the facility</li> </ul>
<b>Scabies</b>	4 - 6 weeks, 1 - 4 days in persons previously infested	<ul style="list-style-type: none"> <li>• Through close, prolonged <i>direct skin-to-skin contact</i> with an infested person,</li> <li>• Through <i>direct contact</i> with contaminated items such as clothing, towels or beddings</li> </ul>	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)	<p>YES</p> <p>-- until the day after treatment has begun</p>	<ul style="list-style-type: none"> <li>• Doctor/Physician Note OR</li> <li>• Proof of treatment (medication bottle or tube)</li> </ul>	<ul style="list-style-type: none"> <li>• Notify parents/guardians of classmates (e.g. day school, after care)</li> <li>• Wash all beddings and clothings worn and used during 3 days before start of treatment in hot water</li> <li>• Disinfect items that cannot be washed or dry-cleaned by storing them in a closed plastic bag for 3 - 7 days</li> <li>• Clean the facility by vacuuming carpeted floor</li> <li><b><i>In consultation with DC Health</i></b></li> <li>• Recommend that close contacts (household members) be treated concurrently</li> </ul>
<b>Streptococcal Diseases: Strep Throat, Scarlet Fever, Impetigo</b>	1 - 3 days, may take up to 7 - 10 days for impetigo	<ul style="list-style-type: none"> <li>• Through contact with an infected person's or carrier's <i>respiratory droplets</i> (when the person talks, sneezes, or coughs)</li> <li>• Through <i>direct contact</i> with contaminated items and surfaces, or sores on the skin (impetigo)</li> </ul>	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 symptoms onset until 24 hours after treatment has begun	Cluster of 3 or more cases occurring within a 7 day period (not single cases)	<p>YES</p> <p>-- until 24 hours after antibiotics treatment has begun</p>	<ul style="list-style-type: none"> <li>• Doctor/Physician Note OR</li> <li>• Proof of treatment (medication bottle or tube)</li> </ul>	<ul style="list-style-type: none"> <li>• Notify parents/guardians of classmates (e.g. day school, after care)</li> <li>• Recommend proper handwashing</li> <li>• Recommend practice of proper covering techniques when coughing or sneezing</li> <li>• Clean and sanitize items and surfaces in the facility, especially mouthed toys/items</li> </ul>

<b>Sty</b>	Unknown	Does not spread	Mild pain and red bump at or near the edge of the eyelid	During drainage period of pus that contain the bacteria	NO	CONDITIONAL -- exclude if the eye is actively draining	NONE	<ul style="list-style-type: none"> <li>• Notify parents/guardians of the affected child</li> <li>• Recommend proper handwashing</li> <li>• Avoid rubbing the eye</li> <li>• Clean and sanitize items and surfaces in the facility</li> </ul>
<b>Viral Gastroenteritis illnesses (e.g. Norovirus)</b>	Varies by virus (usually 1 - 2 days)	<ul style="list-style-type: none"> <li>• <i>Fecal-oral spread</i> (through contact with items or surfaces contaminated with feces or vomit from an infected person)</li> <li>• Through consumption of contaminated food or water</li> </ul>	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 diarrhea and/or vomiting have resolved	NONE	<ul style="list-style-type: none"> <li>• Notify parents/guardians of classmates (e.g. day school, after care)</li> <li>• Recommend proper handwashing practices, especially after toileting or changing diaper and before handling food</li> <li>• Clean and sanitize items and surfaces in the facility (e.g. toys, keyboards, door knobs, etc.)</li> </ul>
<b>Yeast Diaper Rash (Candidiasis)</b>	Unknown	• NONE	Redness, scaling, red bumps, shinning rash appearance, sores, or cracking of the skin in diaper region	NONE	NO	NONE	NONE	<ul style="list-style-type: none"> <li>• Notify parents/guardians of the affected child</li> <li>• Recommend proper handwashing especially for childcare workers</li> <li>• Recommend keeping the skin dry, frequent diaper changes, and skin air exposure</li> <li>• Clean and sanitize facility diapering areas</li> </ul>

**Definition:**

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