

COMMUNICABLE DISEASES



If your child is complaining of being sick in the morning, please take their temperature *before* sending them to school. If the temperature is **100°F or greater**, **your child has a fever and must stay home from school until they are fever-free (without the use of medicine, such as Tylenol or ibuprofen) for 24 hours.** Don't forget to call the office to let us know your child is home ill.

When your child has a communicable (contagious) disease, you may wonder how long he/she needs to stay home from school. Gahanna-Jefferson students with a communicable disease are excluded from school in accordance with the recommendations from the Ohio Department of Health. Listed below are some of the most common communicable diseases we see in school-aged children.

*All information was taken from the 09/2009 Ohio Department of Health Communicable Disease Chart

| DISEASE | CONTROL MEASURES |
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| <p>Chickenpox (Varicella)-skin rash which progresses to blisters, then scabs. Eruptions occur in crops, so all three stages may be present simultaneously. Covered body areas are often most affected. Slight fever and malaise are also typical. Reactivating the virus results in shingles.</p> | <p><i>Communicable period:</i> 1-2 days before rash appears, through maximum of 6 days after appearance of vesicles. <i>Control:</i> Exclude until the 6th day after onset of rash, or until all lesions (sores) are dry. Children with shingles shall keep sores covered by clothing or a dressing until sores have crusted. Handwashing should be emphasized for those touching lesions.</p> <p style="text-align: center;">VACCINE AVAILABLE</p> |
| <p>Common Cold-sore throat, watery discharge from nose and eyes, sneezing, fever, chills, generalized discomfort.</p> | <p><i>Communicable period:</i> 24 hours before onset of symptoms through 5 days after onset (may vary). <i>Control:</i> Exclude children with a fever and those who feel ill; other exclusion is impractical.</p> |
| <p>Conjunctivitis-Bacterial (Pink-Eye)-redness of eye or eyelid, thick or purulent (pus) discharge, matted eyelashes, burning, itching or eye pain.</p> | <p><i>Communicable period:</i> Until 24 hours of antibiotic treatment completed. <i>Control:</i> Exclude those with purulent (pus) eye discharge, or eye pain, or eyelid redness or fever until after 24 hours of treatment with an antibiotic.</p> |
| <p>Fifth Disease (Erythema Infectiosum)-bright red rash, usually beginning on face: "slapped cheek" appearance. Spreads to trunk and extremities, clears centrally, looking "lacy." Generally clears in 1 week, recurs if person gets warm, upset, etc. for up to 1 month.</p> | <p><i>Communicable period:</i> Up to 5 days prior to, and, to a lesser extent, for 2 days after appearance of rash. <i>Control:</i> Exclusion not appropriate once diagnosis is known, unless child has a fever or is uncomfortable.</p> |
| <p>Flu (Influenza)-abrupt onset of fever, chills, headache, sore muscles. Runny nose, sore throat, and cough also common.</p> | <p><i>Communicable period:</i> Most adults may be able to infect others beginning 1 day before symptoms develop and up to 5 days after the onset of symptoms. Children may be infectious for 10 days or more after the onset of symptoms. <i>Control:</i> Exclusion from school based on symptoms that exclude children (i.e., fever)</p> <p style="text-align: center;">VACCINE AVAILABLE</p> |

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| <p>Head lice** (Pediculosis)-itching, irritation of scalp, feeling of something moving in the hair and sores on the head caused by scratching. White to yellow-brown nits (eggs) attach very <i>firmly</i> to hair and are most <i>commonly found</i> at the nape of the neck, crown of head and above the ears.</p> | <p><i>Communicable period:</i> As long as lice remain alive on the infested person or on objects. Head lice survive 24-48 hours off host. Life span is about 30 days. Eggs can survive 7-10 days off host but will not hatch below 72°.</p> <p><i>Control:</i> A person with head lice shall be excluded from a school or childcare center until application of an effective pediculicide. For children under 2 years of age, contact your physician for directions <u>before</u> treatment. Refer to the pamphlet, <i>What Should I Do If My Child Gets Head Lice?</i> for complete treatment and home cleaning instructions. Pamphlet available online: http://www.odh.ohio.gov/ASSETS/5F00C057376F4B1782836023BC7295BD/head%20lice.pdf or from the school clinic.</p> <p>**Gahanna-Jefferson Schools require that students be lice free and checked by a school nurse or clinic aide before they can re-enter school**</p> |
| <p>Impetigo-blister-like, pus-filled bumps which progress to yellowish crusted, painless sores with irregular outlines. Itching is common. Usually found on exposed skin areas and around the nose/mouth</p> | <p><i>Communicable period:</i> As long as drainage is present.</p> <p><i>Control:</i> Exclude until 24 hours after treatment has begun and all lesions (sores) are dry.</p> |
| <p>Ringworm (Tinea)-Scalp-scaly patches of temporary baldness, infected hairs are brittle and break easily. Skin-flat, ring-like rash, inflamed, may itch or burn. Feet-scaling and cracking of skin especially between toes, blisters may be present, filled with watery fluid</p> | <p><i>Communicable period:</i> As long as lesions are present.</p> <p><i>Control:</i> Exclude those with scalp and skin lesions until 24 hours of appropriate treatment completed. Continue to avoid swimming and exclude from contact sports until lesions are gone to prevent spread. Do not allow sharing of hair items such as brushes, ribbons, or combs.</p> |
| <p>Scabies-Parasitic disease of the skin caused by a mite, whose penetration is visible as papules (bumps), vesicles, or tiny linear burrows. Lesions are often found in space between fingers, on or inside wrist, elbows, armpits, belt-line and genital area. A patchy red rash is often present. Intense itching, especially at night. Manifestations may mimic other skin diseases.</p> | <p><i>Communicable period:</i> From beginning of infestation (even before symptoms have occurred) through completion of treatment.</p> <p><i>Control:</i> Exclude for 24 hours following treatment with an appropriate scabicide. Symptoms generally do not stop immediately after treatment. Washing and drying of clothes, bedding and personal articles or sealing inside plastic bags for 3-4 days is sufficient to kill the scabies mite. Search for unrecognized cases among contacts and household members. Treat prophylactically those who have had skin-to-skin contact with infested people.</p> |
| <p>Scarlet Fever/Strep Throat (Streptococcal Infections)-Strep throat-fever, red throat with pus spots, tender and swollen lymph nodes (glands). Symptoms are variable. Scarlet fever-all of the above, plus sandpaper-like rash on skin and inside of mouth, “strawberry tongue.” High fever, nausea and vomiting may occur.</p> | <p><i>Communicable period:</i> Until 24 hours of appropriate antibiotic therapy completed.</p> <p><i>Control:</i> Exclude until 24 hours of appropriate antibiotic therapy completed.</p> |

For further information, or questions regarding these or other contagious diseases, please contact your school nurse.