

## **Communicable Disease Information**

### **Chickenpox**

Incubation: 10-21 days. 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. Communicable 1-2 days before rash appears until all lesions have crusted, usually 7 days. **May return to school when all scabs have crusted.**

### **Croup**

Incubation: 2-9 days, depending upon causative agent. Acute respiratory infection involving epiglottis, larynx, trachea, and bronchi. May cause respiratory distress ranging from mild to severe. Cough has "barking" or "brassy" harsh quality. May notice a high pitched sound on inhalation. Communicable during duration of disease. Exclude when fever is present or if child is uncomfortable. Medical attention is necessary as major complications can occur.

### **Fifth Disease (Erythema Infectiosum)**

Incubation: 4-14 days, usually 12-14 days. Bright red rash usually beginning on face (slapped cheek appearance), spreads to trunk and extremities with a lacy appearance. Generally clears in one week, recurs if a person gets warm or upset for up to one month. Communicable 5 days before rash appears and to a lesser extent 2 days after rash appears. Exclusion is not appropriate once diagnosis is known unless child is febrile or uncomfortable. Pregnant women, if exposed, should consult their physicians regarding potential risks.

### **Hand, Foot, Mouth Disease (Coxsackie virus)**

Incubation: 3-6 days. Raised rash, particularly on palms, soles, and area surrounding mouth. Progresses to blisters, then scabs. Also causes sore inside mouth, making swallowing painful. Communicable virus found in stool while sores are present and for about a month after they disappear. Oral secretions are infectious while sores are present. Exclude when fever is present or if child is uncomfortable. Wash, disinfect, or discard articles soiled with nose, throat or fecal discharges. Give careful attention to hand-washing after handling these items.

### **Head Lice (pediculosis)**

Incubation: Eggs (nits) hatch in 7-10 days. Adult lifespan is 30 days, females lay 3-10 eggs/day. Itching, irritation of scalp, white to yellow-brown nits attached to hair, especially at nape of neck, crown of head, and above ears. Communicable as long as live lice are present on infested person. May exclude from school until effective treatment is obtained. See Head Lice Policy on School Nurse area on school website for detailed information.

### **Impetigo**

Incubation: 2-10 days, occasionally longer. Blister-like, pus-filled bumps which progress to yellowish, crusted, painless sores with irregular outlines. Itching is common. Usually found on exposed skin areas. Communicable as long as drainage is present. Exclude from school until 24 hours of treatment by physician is completed and sores begin to heal.

**Pinkeye (conjunctivitis)**

Incubation: Viral – hours to days. Bacterial – 24-72 hours. Redness of eye, discharge (watery with viral, often thick or purulent discharge with bacterial), matted eyelashes, burning, itching are symptoms. Exclude if eye discharge is noted or until completes 24 hours of antibiotic treatment.

**Pinworms**

Incubation: 3 weeks to 3 months. Anal itching with disturbed sleep, irritability, and local irritation due to scratching are symptoms. Communicable as long as worms are present. Exclude until adequately treated by physician. Children should wash hands after each toilet use and before meals. Do not allow sharing of bedclothes.

**Ringworm**

Incubation: Scalp 10-14 days: Skin 4-10 days: Feet unknown. Scalp – scaly patches of temporary baldness. Infected hairs are brittle and break. Skin – flat, ring-like rash, inflamed. May itch or burn. Feet – scaling, cracking, especially between toes. Blisters may be present, filled with watery fluid. Communicable as long as lesions are present. Exclude until 24 hours of appropriate medical treatment completed. To prevent spread, no contact sports until lesions disappear or MD releases to play.

**Scabies**

Incubation: First infestation 2-6 weeks: subsequent 24 hours. Causes Intense itching, especially at night. Burrows under skin resemble wavy lines, often found in space between fingers, on inside of wrist, at elbows, armpits, and beltline. May have raised, fluid-filled blisters. Communicable from beginning of infestation through completion of first treatment. Second treatment required in 7-10 days in most instances. Exclude until initial treatment is received.

**Strep Throat/Scarlet Fever (streptococcal infection)**

Incubation: 1-3 days. Fever, red throat, tender and swollen glands. Variable symptoms. May begin with headache or stomachache. With scarlet fever, may also have rash on skin and inside of mouth, “strawberry tongue.” High fever, nausea and vomiting may occur. Communicable until 24 hours of appropriate antibiotic therapy completed. Exclude until 24 hours of antibiotic treatment is received.

**Whooping Cough (pertussis)**

Incubation: 7-21 days, usually 10 days. Cough, worse at night, with characteristic “whoop” developing in 2 weeks. Spells of coughing may end with vomiting. Fever present with watery nasal discharge. Transmitted through direct contact with respiratory secretions of infected person. Communicable 7 days after exposure for as long as 3-4 weeks after onset of “whooping” in untreated children: 5-10 days after onset of appropriate treatment. Exclude until 5 days after onset of antibiotic therapy or until symptoms have cleared.