APPENDIX B

Exclusion Policies and School Control Measures, by Diagnosis

Chicken Pox (Varicella)

- Exclude students and staff who have the characteristic rash until the rash has crusted over (usually 6 days after onset of rash). Note: It's possible for children to get chickenpox even after being vaccinated.
- If there is an active chicken pox case in school:
 - o Parents of pupils with severe immune deficiencies should be notified (as their doctor may wish to give them immune globulin).
 - o Parents of all children should be reminded to be vaccinated
 - o Adults who may have been exposed and are not vaccinated (especially those who are or may be pregnant) should be notified and suggest that they check with their health provider about what to do.
- If there is a cluster of cases (5 or more in a preschool, elementary or middle school setting within 2 months; 3 or more in a high school setting within 2 months), the district's Nursing and Wellness office will contact the public health department.
- Good hand washing hygiene and maintain usual surface sanitation

CMV or Cytomegalovirus

- Students with CMV may be admitted to school. It is a prevalent infection in children and knowing about the excretion status of one student does not make him or her any more communicable than the many others likely to have this virus in a normal pool of children.
- Any woman, who anticipates pregnancy and is involved with toileting and diapering of others, should consult her physician regarding the need for a screening test (blood titer). If CMV screening test is "negative" (meaning the woman has never had CMV before), and the woman is in her first trimester of pregnancy, that woman and her physician need to decide if that woman will continue working intimately with children (diapering, etc) or if another job assignment is required.

Conjunctivitis/Pink Eye

- It is recommended that persons suspected of having conjunctivitis be seen by a physician so that appropriate diagnosis, treatment, and follow up can be obtained. But documentation of the visit is not required Refer student to physician for telephone or office visit
- Refer immediately for office visit if there is severe photophobia (very sensitive to light), pain, or swelling
- Reach school district's health office if more than 5 children in same group have same symptoms within two weeks.
- Assist with applying antibiotic drops or ointment, if they were prescribed, when child returns
- Good hand washing technique before and after touching the eyes, nose and mouth
- Careful sanitation of objects that are commonly touched by hands/faces (e.g. cuddle blankets, toys)
- <u>Only exclude from school if:</u> child too ill to participate, if accompanied with fever, if recommended by student's doctor, if requested by health department because of an outbreak, or if child's behavior is such that close contact with other students cannot be avoided (e.g., very young children). Antibiotics are not required to return to school.

Developed by Howard Taras, M.D., Consulting School Physician, San Diego Unified School District, used by permission of San Diego Unified School District

Fifth Disease

- Students presenting with the classic rash of Fifth Disease are permitted to remain in school. They are not infectious to others.
- Parents are encouraged to notify the school if their child has a diagnosis of "Fifth Disease".
- All school personnel should: wash their hands carefully, cover their noses and mouths with disposable facial tissues when sneezing or coughing, and wash their hands after using facial tissue; or cough/sneeze into the crook of their elbow or their shoulder. Preventive measures are most important for pregnant caregivers, pregnant teachers, and pregnant mothers of fellow students.
- School nurses should notify pregnant staff members about the disease at their school. Pregnant staff members are permitted to continue working during Fifth Disease outbreaks, but the decision to do so should be based on discussion between pregnant staff member s and their own physician

Hand, Foot, Mouth Disease

- There is no treatment for this disease. The disease takes its course and resolves without treatment.
- Medications may be taken to alleviate fever and discomfort (e.g., Tylenol / Acetaminophen); Cold foods (popsicles) may make mouth sores feel better.
- Exclude students from school if they:
 - o Have fever
 - o Feel too ill to attend school
 - o Blisters that are in the mouth are accompanied by drooling
 - o The sores on the student's hands are wet or "weeping"
 - o Stools are too loose to be contained.
- Remind students to avoid close contact (e.g., kissing, sharing utensils)
- Remind custodians to clean surfaces contaminated with drool or stool

Scabies

- Exclude from school until after treatment is completed (usually overnight).
- Family members and close contacts should be treated at the same time.
- Encourage contact with healthcare professional if itching continues several weeks after treatment.

Strep Throat

- Exclude students and staff who are diagnosed with Strep until they have been on antibiotics for 24 hours.
- If 5 or more people are diagnosed with Strep during the same two-week period in a school setting (e.g., the same classroom, after-school club, an athletic team), parents can be notified (by letter and fact sheet). Need to first notify the district Nursing & Wellness Program Office.
- During outbreaks, children would only need to visit their doctor if there are symptoms of Strep Throat. Their doctor may choose to perform a throat swab and treat with antibiotics, if indicated.