## **Short Term Communicable Diseases**

A communicable disease is defined as an illness due to an infectious agent, or its toxic products, which are transmitted directly or indirectly to a person, from an infected person or animal. Short-term communicable diseases are those which generally last no more than ten days.

Students are excluded from school in cases of communicable diseases. When a student is suspected of having one of the following communicable diseases, it is the responsibility of the parent to take the child to the local health department or family physician for verification and treatment before that student can return to school. The parent/guardian of a student with a communicable disease or infestation shall be encouraged to notify the school as soon as they have knowledge of their child's diagnosis. School guidelines for exclusion due to a communicable disease will follow recommendations from local, state, and federal agencies that address communicable disease standards.

The principal and/or his/her designee and/or the school nurse will make the initial decision to exclude a child from school attendance. Persons involved in the care and education of communicable disease-infected children shall respect the child's right to privacy, including the maintenance of confidential records.

If a parent/guardian notices any discharges, such as yellowish-green drainage from the eyes, ears, and /or nose, the parent is to/should have the physician send a note advising the school of the child's condition and return date.

All children with fevers of 100 degrees Fahrenheit or greater will be excluded from school until fever-free for 24 hours without the use of fever-reducing medications (Tylenol, Ibuprofen, Motrin, Aspirin, etc.)

A sick child will be cared for until the parent/guardian arrives, however, the comfort of the child will be increased if the parent/guardian arrives at the school as quickly as possible. If an ill or injured child warrants immediate action, 911 will be called, with parent/guardian as the responsible party.

| <u>Disease</u>          | Incubation (Before symptoms)* | Contagious*   | Return to School*   |
|-------------------------|-------------------------------|---|---|
| Chicken pox (Varicella) | 14-16 days                    | 10-21 days  | When free of symptoms and all pox have crusted (usually 6 days). Face and hands must be free of scabs. Student must be checked by school personnel before return to school. |
| Fifth Disease           | Less than 1 month             | 4-14 days after<br>being infected.<br>Once rash<br>appears no<br>longer infectious. | When free of fever. After rash appears no longer contagious, but rash may remain for several weeks.   |
| Impetigo                | 4-10 days                     | Until all lesions have healed or  | Must have doctor's note to return to school. Will be excluded from  |

|  |  | person has been treated with antibiotics.   | school for 24 hours after treatment begins. Area will be covered during school hours.   |
|--|--|---|---|
| Diarrhea & Vomiting  | Varies   | As long as<br>diarrhea and<br>vomiting are<br>present.  | No diarrhea or vomiting for 24 hours.   |
| Pediculosis (Head Lice)                                      | Lice eggs hatch in 7-10 days   | Until lice and eggs are destroyed.  | "No nits" policy requires treatment of live lice and removal of all nits before reentry to school The parent/guardian will present the child to the School Nurse, who will determine if the child is nit free. The School Nurse will do inspections only once daily.  [See Pediculosis (Head Lice) Policy 4232]** |
| Pink Eye<br>(Conjunctivitis)                                 | Usually 24-72 hours  | During the course of active infection (presence of eye drainage).                             | When cleared by physician. Note from physician must be presented to school for reentry.   |
| Ring Worm (other than scalp)                                 | Varies. Usually 4-<br>10 days.   | As long as lesions are present.   | When course of treatment has begun and only with the lesions covered. Upon verification of treatment.   |
| Ring Worm of Scalp   | Varies. Usually, 10-<br>14 days.   | As long as lesions are present.   | Upon verification of treatment and doctor's note.   |
| Scabies  | 2-6 weeks without previous exposure. 1-4 days with previous infestation. | Until mites and eggs are destroyed by treatment. Usually takes 1-2 treatments one week apart. | 24 hours after treatment and with doctor's note.  |
| Streptococcal Infections<br>(Scarlet fever, Strep<br>throat) | 1-3 days   | Until 24 hours<br>after antibiotic<br>treatment has<br>begun.                                 | 24 hours after antibiotic treatment has begun and with doctor's note.   |
| MRSA   |  | During course of infection.   | When cleared by Physician. Open wounds must be covered at all times. Sports will be allowed when cleared by a Physician. Doctor's note must be presented on re-entry to school.   |

<sup>\*</sup>Information for above table obtained from references listed below:

- DPI and DHHS. NC School Health Program Manual, 2005. Section E 1.60.

- Heymann, MD, David L. Control of Communicable Diseases Manual, 18<sup>th</sup> Edition. American Public Health Association. 2004.

<sup>\*\*</sup>Cross reference: Columbus County Schools Pediculosis (Head Lice) Policy 8-60.