

FLORIDA DEPARTMENT OF HEALTH IN SANTA ROSA COUNTY

# COMMUNICABLE DISEASE SCHOOL HEALTH MANUAL

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## DEFINITIONS

### What is an outbreak?

**A.** Two or more linked cases of gastrointestinal illness with similar symptoms occurring within 72 hours among children or staff in the same facility that do not live in the same household.

**B.** If the causative organism is known, an outbreak is defined as two or more linked cases occurring within the incubation period for the disease.

### What are the different steps in handling symptomatic individuals?

#### Step I

If an individual (student or sensitive worker) is symptomatic but NO laboratory test results are available, the facility is responsible for following the exclusion and readmission guidelines. If necessary, the facility staff may request assistance/from the DOH- Santa Rosa Epidemiology Program.

#### Step II

An individual has a positive test result. If the disease is reportable, the facility must report to the Florida Department of Health in Santa Rosa County Epidemiology Program. Sensitive workers may have to be excluded from work.

#### Step III

An outbreak situation is identified in a school (K-12). Sick individuals may or may not have positive test results. Testing shall be carried out to identify etiology for targeted treatment and infection control measures.

#### Step IV

Outbreak situation shows continued transmission in the facility past one (1) incubation period (the mean incubation period of identified pathogen or as determined from the epi curve) after infection control measures were implemented in stage III.

# DIARRHEAL ILLNESS GUIDELINES FOR SCHOOL AGE CHILDREN

## General Information

This information is a general guide to help schools when a student(s) become sick with symptoms of diarrheal illness (defined as an abnormal increase in the number of loose, semi-solid or watery stools in a 24 hour period). The goal of the Florida Department of Health in Santa Rosa County (DOH- Santa Rosa) Epidemiology program is to work with each facility to prevent illness and promote a healthy environment.

**It is important to notify the DOH assigned school nurse immediately when 2 or more students and/or staff become ill with similar symptoms.**

Early detection of illness, prompt exclusion of sick students and/or staff, and implementation of the infection control measures recommended by DOH- Santa Rosa will keep the rest of the students and staff healthy thereby saving the facility time and money.

Under most circumstances, the guidelines allow students to return to school quickly once symptoms disappear and do not return for at least 24 hours. These rules will apply as long as the facility is able to exclude and report sick students and/or staff with diarrheal illness in a timely manner. The length of time for which the sick individual is excluded from the facility may depend on the severity and cause of the illness as well as the extent of the outbreak.

## Facility Disease Management Information

A student must stay out of school if he/she has any of the following symptoms: fever, diarrhea, stools that contain blood or mucus, vomiting and/or stomach cramps. Other symptoms that may or may not be associated with diarrheal illness but need to be reported are unusual irritability, abnormal persistent crying, difficulty breathing, rash, or other symptoms of severe illness.

### **What to do if there is a single sick student or staff member has any of these symptoms (Step I)**

If the illness occurs at the facility, the sick student must be kept away from others until picked up. The student or staff member must be excluded until symptom-free for **AT LEAST** 24 hours.

### **What should I do if 2 or more students/staff are sick or a student/staff member in your facility has a positive stool test? (Steps II-IV)**

- Fill out a communicable disease tracking report (see attached document) and email to your assigned DOH school nurse contact by the end of the school day.
- Separate the sick students from the other students until they can be picked up.
- Sick staff members should be relieved of their duties and sent home.
- Stool testing may be required of sick individuals. Stool testing kits and/ or disease specific letters can be provided to the affected classroom/facility.
- Infection control guidelines specific for each outbreak can be provided by the DOH- Santa Rosa.

## DIARRHEAL ILLNESS GUIDELINES FOR SENSITIVE WORKERS

A sensitive worker must be relieved of their duty if he/she has any of the following symptoms: fever, diarrhea (defined as an abnormal increase in the number of loose, semi-solid or watery stools in a 24 hour period), stools that contain blood or mucus, vomiting and/or stomach cramps. Other symptoms that may or may not be associated with diarrheal illness, but need to be reported are; unusual irritability, difficulty breathing, rash or other symptoms of severe illness. If the illness occurs at the facility, the sick worker must be relieved of their duties and sent home immediately.

### Who is a Sensitive Worker?

A sensitive worker is defined as a food handler, food service employee, childcare employee participating in direct personal care such as feeding and diapering, or a health care employee participating in direct patient care, as specified under 64D-3.028(22) Florida Administrative Code.

### General Information

The Florida Department of Health in Santa Rosa County (DOH-Santa Rosa) Administrator has the authority to change the policy for enteric illnesses and other diseases at any time, as appropriate.

If any form of non-compliance is identified in the staff member, the School District representative will notify the DOH-Santa Rosa. This will be evaluated on a case by case basis.

**Step I-** If there is no confirmatory laboratory result for an individual case **AND** no other cases identified at the facility then the staff member may return to work once they remain symptom free for AT LEAST 24 hours.

\* It is recommended that a sensitive worker who remains symptomatic for multiple days to seek medical care.

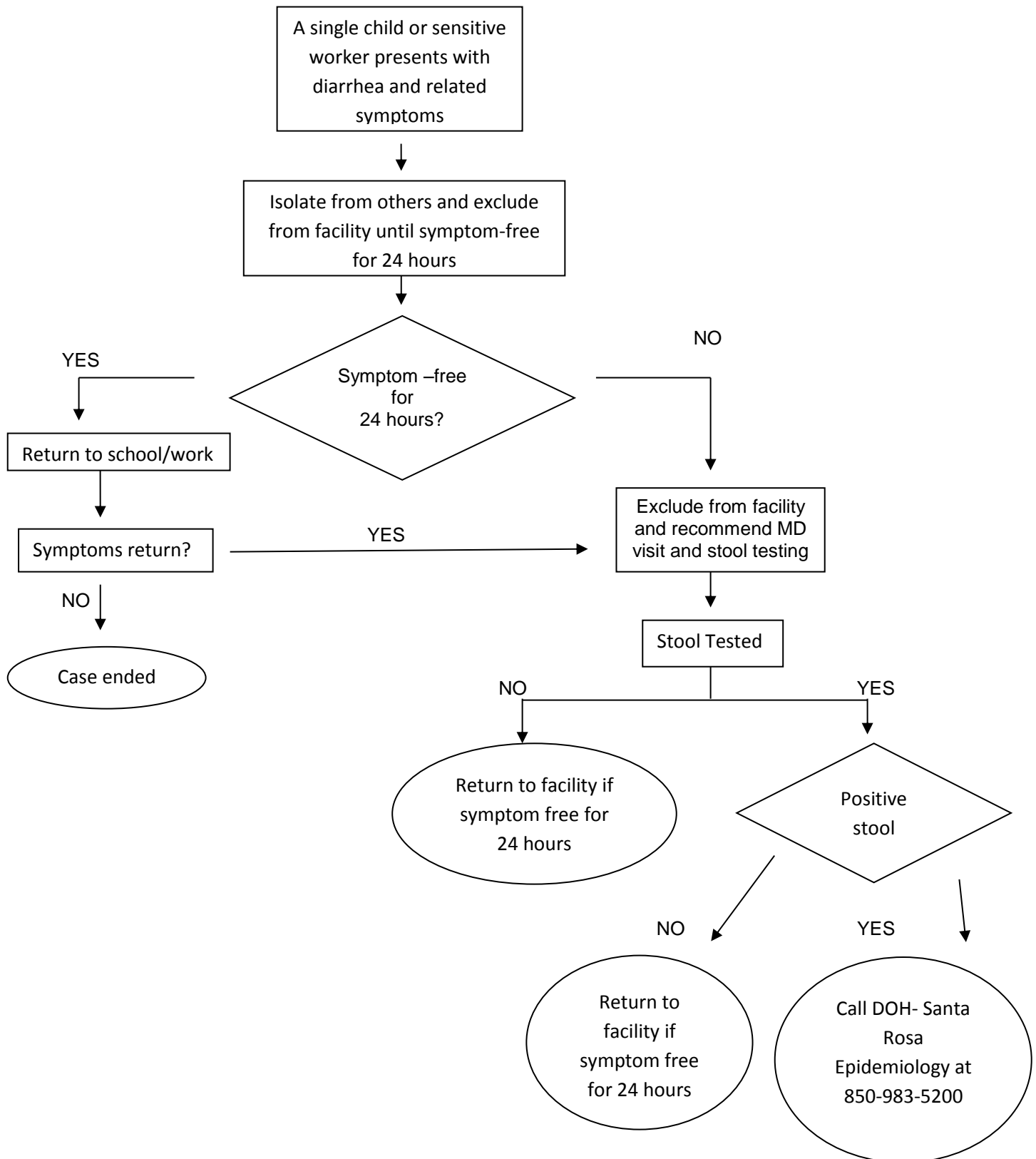
If the sensitive worker tests positive for Salmonella, Shigella or E. coli O157, they will be excluded and may return after being symptom-free for AT LEAST 24 hours AND/ or cleared by a medical provider.

If the sensitive worker tests positive for Campylobacter, Giardia or other enterics not otherwise specified, they will be excluded until symptom-free for AT LEAST 24 hours after their LAST symptom.

If a sensitive worker tests positive for Hepatitis A, they may return one week after the onset of symptoms.

## Enteric Disease Guidelines: Step 1 (Single Case)

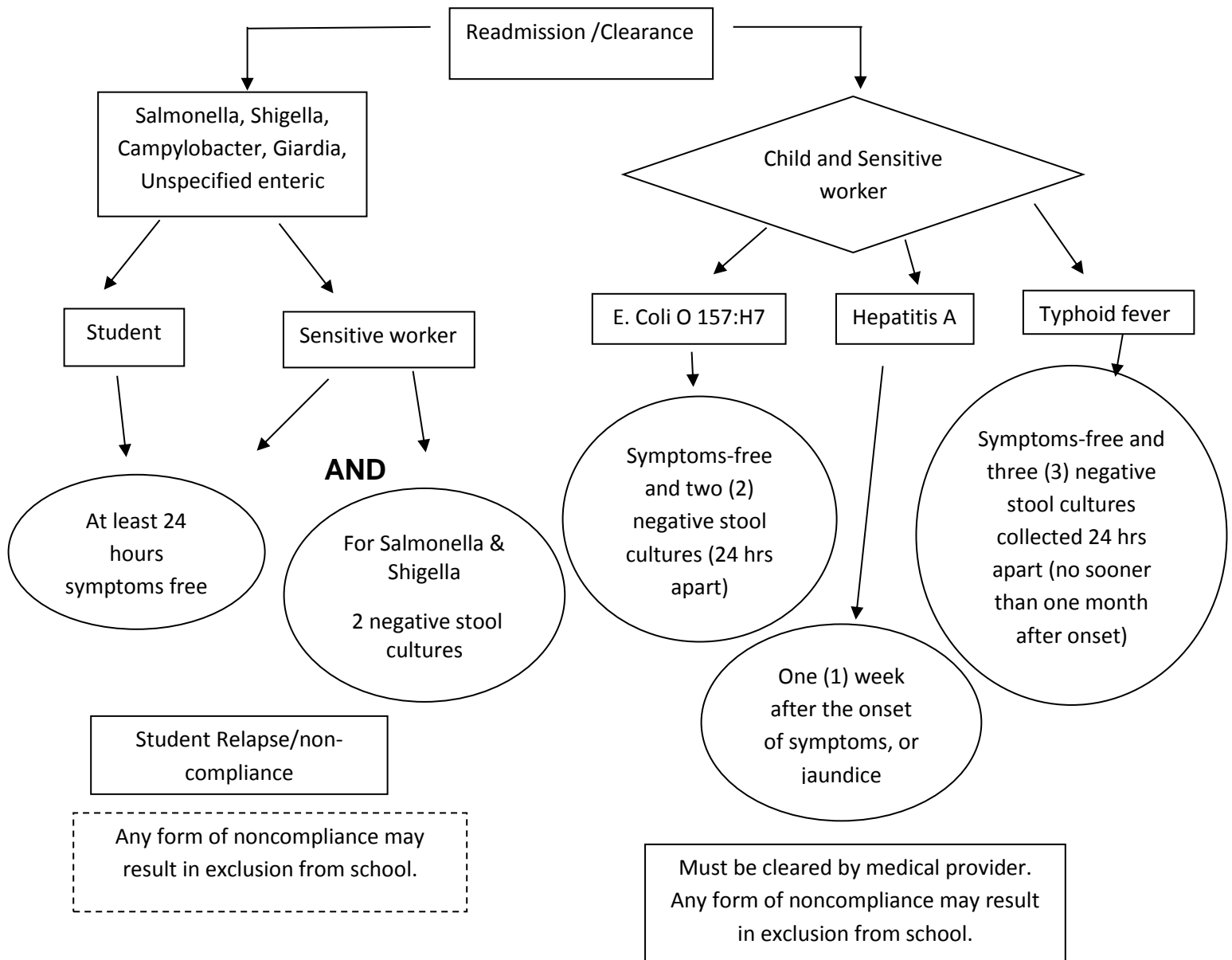
\*For multiple cases contact your school's DOH- Santa Rosa school nurse contact



## Guidelines for Enteric Disease Readmission: Step 2 (Single Case)

\*For multiple cases call the DOH-Santa Rosa Epidemiology Department at 850-983-5200

For any of the following diseases with positive laboratory tests



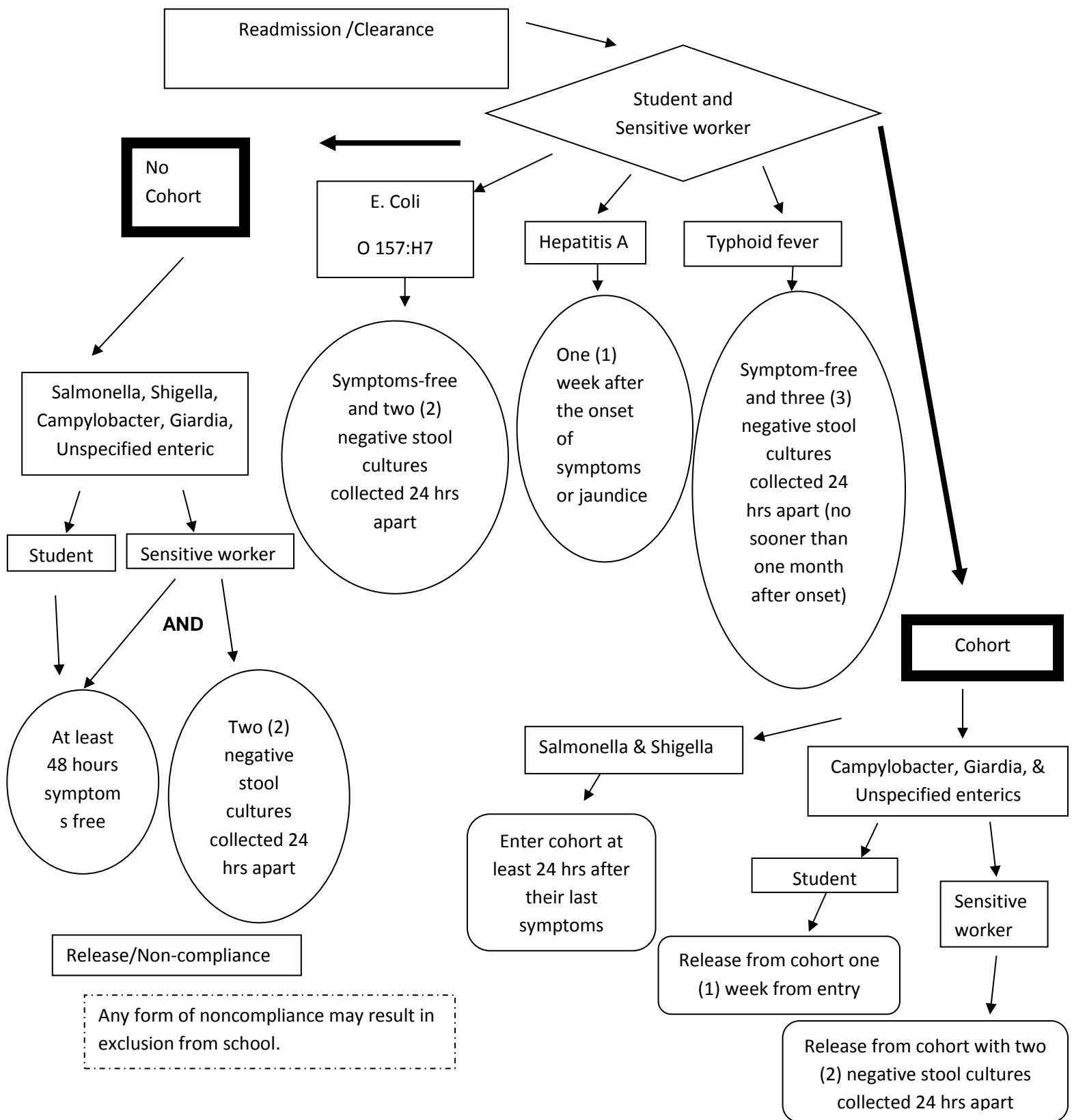
Definitions: **Sensitive Worker**- is defined as a food handler, food service employee, daycare and/or school employees participating in direct personal care such as feeding and diapering, or a health care employee participating in direct patient care, as specified under 64D-3.028 (22) Florida Administrative Code.



# Guidelines for Enteric Disease Readmission: Step 3 (Outbreak situation)

**\*Call the DOH-Santa Rosa Epidemiology Department at 850-983-5200**

*Cohort: - is defined a group of like individuals.*

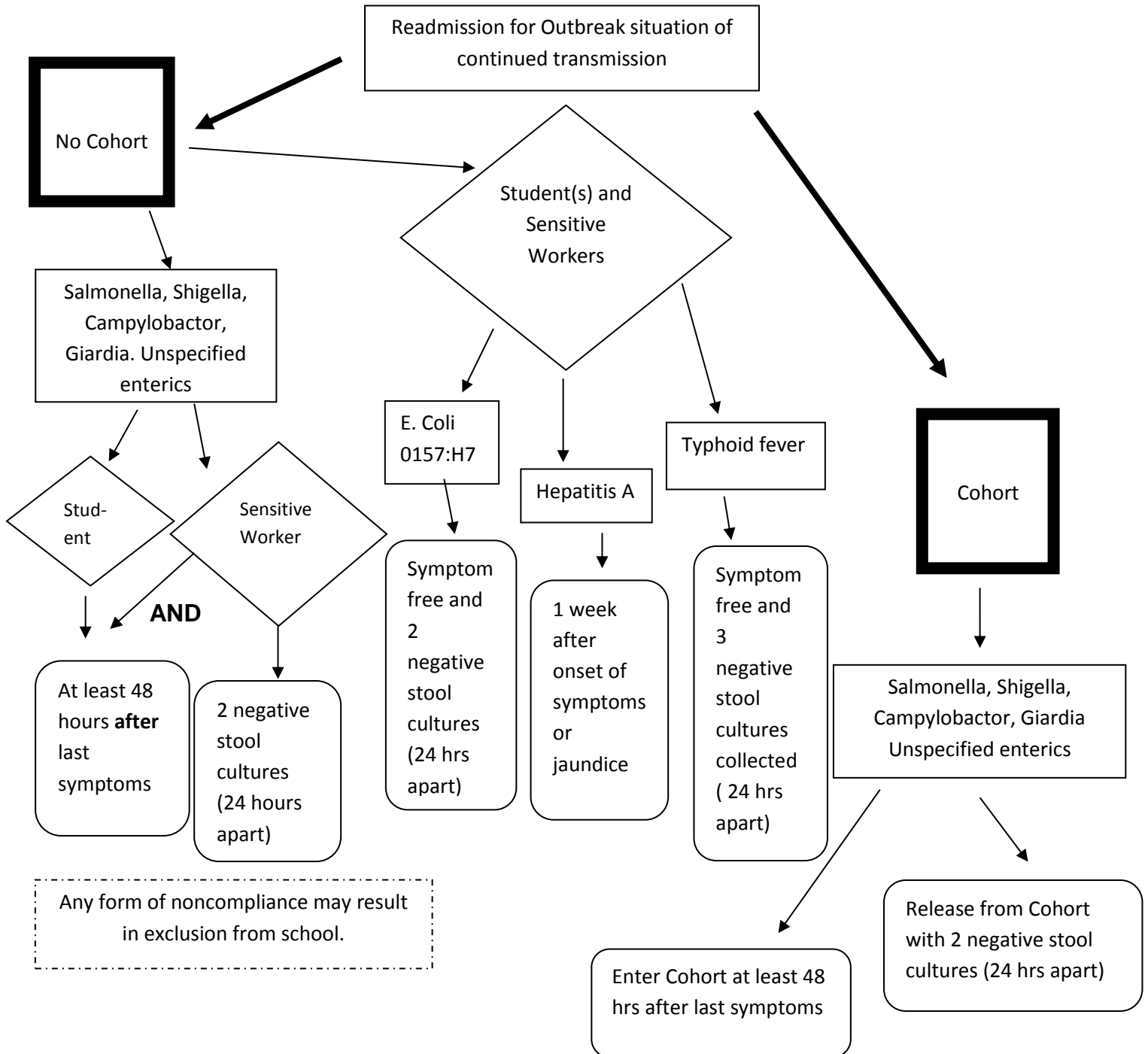


## Guidelines for Enteric Disease Readmission: Step 4 (Outbreak situation – Continued Transmission)

*Cohort: - is defined a group of like individuals.*

**\*Call the DOH-Santa Rosa Epidemiology Department at 850-983-5200**

### For Continued transmission after 2 incubation periods



## **INFECTION CONTROL MEASURES**

Infection Control Measures consist of:

- Distributing disease specific letters to staff/parents/guardians
- Providing staff training regarding hand-washing and infection control practices
- Inspecting the facility for source of transmission and proper implementation of control measures
- Implementing personal control measures
  - Increased hand washing
  - Staff assigned to food preparation should not also be assigned to toileting assistance
- Implementing environmental control measures, as appropriate

# PROTOCOL FOR COMMUNICABLE DISEASE REPORTING

If you suspect or receive a letter/lab/phone call from a student or guardian that indicates that the child is positive for one of the reportable diseases (see list of reportable diseases):

**Step 1.** Collect demographic data on the student including:

- Name
- Date of Birth
- Address
- Telephone Number
- Parent/ Guardian's Name
- Parent/ Guardian's Work Telephone Number
- Transportation (Bus, Carpool, Daycare transportation)
- Identify student's extracurricular activities

**Step 2.** Collect illness information including:

- Onset Date
- Symptoms
- Last Day Attended School
- Physician's Name
- Hospital

**Step 3.** If the illness is suspected to be a vaccine preventable disease (such as chickenpox, pertussis or measles) collect the following additional information. If not, go to step 4:

- Immunization History
- Are others ill in the student's Classroom? If yes, how many?
- Identify classmates whose immunizations are not up to date (may need to pull records and vaccinate)
- Identify students with Religious or medical exemptions

**Step 4.** Notify the assigned DOH-Santa Rosa School Nurse contact

**Step 5.** Notify the DOH-Santa Rosa Epidemiology Program at 850-983-5200

# HAND WASHING

The best way to reduce disease risk in your facility is to see that staff and children follow recommended hand washing procedures.

## How?

Staff should use this method to make sure their hands are free of germs.

- Use soap and running water
- Rub your hands vigorously as you wash them
- Wash all surfaces, including:
  - Backs of hands
  - Wrists
  - Between fingers
  - Under fingernails
- Rinse your hands well. Leave the water running
- Dry your hands with a single-use towel
- Turn off the water using a paper towel instead of bare hands

## When?

Caregivers should wash their hands

- When they enter the facility in the morning
- Before preparing or serving food
- After diapering a child or wiping his nose or cleaning up messes
- After they have been to the bathroom-either with a child or by themselves
- When coming back from the playground area

## Be sure the children's hands are washed, too!

Especially:

- When they arrive at the facility
- Before they eat or drink
- After they use the toilet or have their diapers changed
- After they have touched a child who may be sick
- After playing on the playground

## Hand sanitizer

Washing hands with soap and water is the best way to reduce the number of germs on them in most situations. If soap and water are not available, use an alcohol-based hand sanitizer that contains at least 60% alcohol. Alcohol-based hand sanitizers can quickly reduce the number of germs on hands in some situations, but sanitizers do **not** eliminate all types of germs and might not remove harmful chemicals. **Hand sanitizers are not as effective when hands are visibly dirty or greasy.**

## How do you use hand sanitizers?

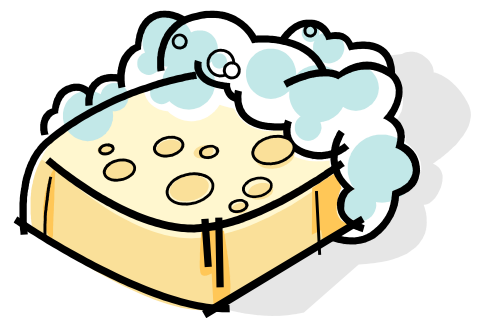
- Apply the product to the palm of one hand (read the label to learn the correct amount).
- Rub your hands together.
- Rub the product over all surfaces of your hands and fingers until your hands are dry.

Reference: CDC.gov

# Handwashing Steps



- Step 1      Wet Hands**
- Step 2      Apply Soap**
- Step 3      Rub soapy hands for 20 seconds**
- Step 4      Scrub fingertips and between fingers**
- Step 5      Scrub forearm to just below elbow**
- Step 6      Rinse forearms and Hands**
- Step 7      Use towel to dry hands**

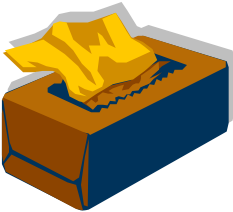


# FLU SEASON RESPIRATORY ETIQUETTE

GERMS ARE OFTEN SPREAD BY COUGHING,  
SNEEZING OR BY UNWASHED HANDS.



COVER YOUR MOUTH AND NOSE



BLOW YOUR NOSE INTO A TISSUE  
DISCARD IN THE TRASH



WASH YOUR HANDS  
BEFORE TOUCHING SOMEONE

Stay healthy; help protect yourself and your family from getting sick.

See your health care provider or contact the Florida Department of Health in Santa Rosa County about getting this year's flu shot.

The Florida Department of Health in Santa Rosa County (850) 983-5200

# TO ALL STUDENTS/STAFF:

*For your protection and the protection of others:*

**If you have:**

**Cold symptoms (cough, shortness of breath, runny nose or difficulty breathing)**



**OR**

**A fever *along* with a new cough and/or sore throat...**

**You may be asked to wear a mask.**



***PLEASE:***

1. Wear the mask given to you from the clinic to put over your nose and mouth.
2. Inform the clinic at your school of your symptoms.

**Thank you for protecting other students & school employees!**

**The Florida Department of Health in Santa Rosa County (850) 983-5200**



## **DISEASE FACT SHEETS AND INFECTION CONTROL GUIDELINES**

### **Fact Sheets**

- Adenovirus
- Bed Bugs
- Body Lice
- Campylobacteriosis
- Chickenpox
- Conjunctivitis (Pink Eye)
- E coli 0157:H7
- Fifth Disease
- Giardiasis
- Hand, Foot and Mouth Disease
- Head Lice
- Hepatitis A
- Impetigo
- Influenza
- Meningitis
- MRSA
- Mononucleosis
- Norovirus
- Pinworms
- Pertussis
- Respiratory Syncytial Virus (RSV)
- Ringworm
- Rotavirus
- Salmonella
- Scabies
- Shigellosis
- Staph
- Strep Throat

CDC Standard Precautions for Infection Control

Cohorting

Hand Washing

**\*Note: Diseases with an asterisk by the title indicate that they are reportable diseases to the Florida Department of Health in Santa Rosa County.**

# ADENOVIRUS

## What is Adenovirus?

Adenoviruses are a group of viruses that most commonly affects the respiratory tract causing from mild cold-like symptoms to pneumonia or bronchiolitis (infants). Depending on virus type, the organism may also cause other illnesses such as gastroenteritis, conjunctivitis, bladder infection and rash illness.

## How is Adenovirus spread?

Adenoviruses are spread from person to person through poor hand washing after an infected person has a bowel movement (fecal-oral) or by breathing in airborne droplets when someone sneezes or coughs, or by touching hands and articles freshly soiled by the nose, throat, or eye discharges of an infected person. Sometimes infection can occur from inadequately chlorinated swimming pools or small lakes.

## What are the signs and symptoms of Adenovirus?

The signs and symptoms of adenovirus infection may vary and include headache, fever, runny-nose, sore throat, red-watery eyes, nausea, vomiting, and diarrhea.

## What is the incubation period and how long is it communicable?

The symptoms usually start 4-5 days after coming in contact with the virus, may appear as early as two days or as late as 14 days. The sick individual may infect someone else as long as they are symptomatic and even up to one week after symptoms stop.

## How can Adenovirus infection be prevented?

The best prevention is to frequently wash your hands vigorously with soap and water before eating and after using the restroom, handling diapers (use gloves), and cleaning after/caring for a symptomatic individual. Also proper disposal of diapers and disinfection of changing tables will help stop the spread of the virus. Adults and children should be encouraged to sneeze or cough in a tissue or their elbows and dispose of used tissue into a waste basket.

*It is recommended to use spray bottles to apply the disinfectant (1 part bleach to 9 part cool water; prepared daily) to contaminated surfaces such toilets, sinks, floors, tables, water fountains or any areas where a sick individual has been.*

## What should I do about it?

If the fever lasts more than a few days, the symptoms are getting worse or last more than a week, the child has problems breathing or is under three (3) months of age or shows signs of dehydration (tired, lack of energy, dry mouth, or sunken eyes), please seek medical care. Patients with poor immune systems are especially at risk of severe and life-threatening infections.

Student and sensitive workers can NOT attend school and will need to be symptom free for 24 hours before being readmitted.

Clusters of two or more persons are considered a reportable disease to the Florida Department of Health in Santa Rosa County (DOH-Santa Rosa).

For more information, please contact the DOH-Santa Rosa Epidemiology Program at 850-983-5200.

# BED BUGS

## What are Bed Bugs?

Bed bugs are small, brownish, wingless, flattened insects that feed on the blood of people and animals while they sleep.

## How is it spread?

While bed bug infestations in schools are uncommon, bed bugs tend to get into the school from people on clothing or belongings brought to school from home. By the same nature bed bugs can crawl off of one person and onto another.

## What are the signs and symptoms of Bed Bugs?

Bed bugs cause itchy bites to human hosts. The bites usually show up as a welt, almost like a mosquito bite and typically happen in the night since the bugs are nocturnal. Bite responses can lead to a range of reactions, from a small bite mark, to a serious allergic reaction.

## What is the incubation period and how long is it communicable?

Bed bug infestations usually occur around or near where people sleep (CDC). They are not known to spread any disease. However, bed bugs can be a nuisance due to causing itching and loss of sleep. The excessive itching can sometimes lead to a chance of secondary skin infection.

## Can Bed Bugs in the classroom be prevented?

Infestation can be avoided by the following:

- Make sure pesticides are being applied at the school by a trained professional, in compliance with the school plan.
- Backpacks, lunchboxes, and other items that travel back and forth from home to school can be inspected daily if a student is having a bed bug problem at home.
- Hard surfaces can be cleaned with standard cleaning products.
- If bed bugs are found in a particular part of the school or classroom, it should be inspected by a pest management professional or other trained staff.

## What should I do about it?

If a bed bug is found on a student, it may indicate that the student has bed bugs at home. It is important to note that bed bugs can crawl off or onto a person (or their belongings) at any time. Students with bed bugs should **not** be excluded from school/daycare unless there have been repeat attempts to remedy the infestation. If a confirmed bed bug is found on a student, then school officials or the school nurse should inform the parent of the child about the presence of the bug on the student.

For more information, please contact the DOH- Santa Rosa Epidemiology Program at 850-983-5200.

Information found on: [http://www.floridahealth.gov/environmental-health/group-care-facilities/Bed\\_bugs\\_schools%20MI%20Doc%207%205-10.pdf](http://www.floridahealth.gov/environmental-health/group-care-facilities/Bed_bugs_schools%20MI%20Doc%207%205-10.pdf)

# **BODY LICE**

## **What are Body Lice?**

Body Lice are parasitic insects that live on clothing and bedding used by infected people. The lice usually lay their eggs on or near the seams of clothing and feed on blood. Like head lice, body lice have three stages the egg (nit), the nymph, and the adult.

## **How is Body Lice spread?**

Body lice are spread by direct contact with an infected person or through contact with belongings such as clothing, beds, bed linens, or towels that have been on contact with an infected person. Personal hygiene or cleanliness in home or school is the main cause of a student getting body lice.

## **What are the signs and symptoms?**

Body lice are characterized by intense itching and rash caused by an allergic reaction to the bites. Like head lice, body lice can cause severe itching which then can cause sores on the body. Lice found on the head or scalp are **NOT** body lice and are instead head lice.

## **What is the incubation period and how long is it communicable?**

Body lice can spread diseases such as typhus, trench fever, and louse-borne relapsing fever. The eggs of body lice hatch in 6-9 days and are usually laid at the base of the hair shaft nearest to the skin. The eggs release a nymph which become adults in about 7 days. The adults are about the size of a sesame seed and can live up to 30 days on a person's body. To live the adult needs to feed on blood several times a day.

## **Can Body Lice be prevented?**

Infestation can be avoided by the following:

- Avoid physical contact with infested individuals and their belongings, especially clothing and bedding
  - Launder clothing and bedding in hot water (over 129 °F) or dry clean to destroy lice and nits.
  - Dry clothes in hot clothes dryer.
- Improvement of personal hygiene of the infected student

## **What should I do about it?**

Students with body lice should not return to school/daycare until cleared by a medical provider.

For more information, please contact the DOH-Santa Rosa Epidemiology Program at 850-983-5200.

## **CAMPYLOBACTERIOSIS/ (CAMPYLOBACTER)\***

### **What is Campylobacteriosis?**

Campylobacteriosis is an infection of the intestines caused by the Campylobacter bacteria. Animals may also be infected but rarely show signs of illness.

### **How is Campylobacteriosis spread?**

Campylobacter organisms can be found in uncooked food such as raw milk, raw milk products, meat, meat products, and poultry. Ready-to-eat items may be contaminated by infected products or utensils. Infected individuals, that do not properly wash their hands after using the restroom or changing diapers, may transfer fecal material and the bacteria to food or object that others will put in their mouth. Also, anyone may contract this illness by having contact with the feces of infected animals.

### **What are the signs and symptoms of Campylobacteriosis?**

The signs and symptoms of this illness may include diarrhea (frequently bloody), abdominal pain, fever, nausea and sometimes vomiting. Loss of appetite and loose stools often persist for several days. Dehydration, especially among infants, may be severe.

### **What is the incubation period and how long is it communicable?**

The incubation period is usually two to five (2-5) days with a range of one to ten (1-10) days depending on the dose ingested. Persons are contagious throughout the course of infection, usually from several days to several weeks (2-7). The period of communicability may be shortened to a few days with the use of antibiotics.

### **How can Campylobacteriosis be prevented?**

The best prevention is to frequently wash your hands vigorously with soap and water before eating and after using the restroom, handling diapers (use gloves), and cleaning after/caring for a symptomatic individual. Proper disposal of diapers and disinfection of changing tables will help stop the spread of the virus. Also, when preparing food, thoroughly cook all foods derived from animal sources, particularly poultry and eggs, pasteurize all milk and chlorinate or boil all water supplies. Finally, recognize and control diarrhea among household animals and pets.

*It is recommended to use spray bottles to apply the disinfectant (1 part bleach to 9 part cool water; prepared daily) to contaminated surfaces such as toilets, sinks, floors, tables, water fountains or any areas where a sick individual has been.*

### **What should I do about it?**

Persons who have these symptoms should see their physicians.

Students can NOT be in school and will need to be symptom free for 24 hours before being readmitted. Sensitive workers should not work when sick.

This is a reportable disease to the Florida Department of Health in Santa Rosa County (DOH-Santa Rosa). For more information, please contact the DOH-Santa Rosa Epidemiology Program at 850-983-5200.

# CHICKENPOX (VARICELLA)\*

## What is Chickenpox?

Chickenpox is a common childhood disease caused by the varicella zoster virus. It is usually mild, but it can be serious in infants, pregnant women, and persons with weakened immune systems.

## How is Chickenpox spread?

Chickenpox is highly contagious and spread from person to person by direct contact or indirectly through articles freshly soiled by discharges from the blisters. It is also spread by droplet or airborne spread of secretions of the respiratory tract released into the air from sneezing and coughing.

## What are the signs and symptoms of Chickenpox?

The early sign is a slight fever and general fatigue followed by itchy rash (red bumps) on trunk and face that later turn into fluid-filled blisters. These usually dry and scab over in four to five (4-5) days. The blisters tend to come in crops. The most distressing symptom is the itching that accompanies the blisters. An infected individual can have just a few pox to more than 500. Some children who have been vaccinated can get a mild case of chickenpox with a small number of spots that never go to blister or crust over stage.

## What is the incubation period and how long is it communicable?

The incubation period is two to three (2-3) weeks. Persons are contagious one (1) or two (2) days before the onset of the rash and until the last crop of blisters scabs over. Scabs themselves are not considered infectious.

## How can Chickenpox be prevented?

There is a vaccine available. Most children get their first dose at 12-15 months of age and should receive a second dose at 4-6 years of age. People 13 years of age and older (who never had chickenpox or did not receive the vaccine) should get two (2) doses at least 28 days apart. Talk to your or your child's healthcare provider about getting vaccinated.

If you have already had chickenpox, you do not need the vaccine. If you are not sure whether you have had chickenpox, your primary physician may offer a blood test.

## What should I do about it?

Persons with the above symptoms should see their physicians. Immunocompromised persons, pregnant women, and premature infants who may have been exposed to someone with chickenpox should contact their healthcare provider immediately. **NEVER GIVE ASPIRIN TO A CHILD** as it may cause a rare but serious complication called Reye's syndrome.

Students can NOT be in school until blisters are scabbed over.

This is a **reportable disease** to the Florida Department of Health in Santa Rosa County (DOH-Santa Rosa). For more information, please contact the DOH-Santa Rosa Epidemiology Program at 850-983-5200.

**Students with religious exemptions to vaccinations may be excluded from school with the occurrence of any vaccine preventable disease up to a period of twenty-one (21) days after the last case develops.**

# CONJUNCTIVITIS (PINK EYE)

## What is Conjunctivitis?

Conjunctivitis begins with excess tearing and irritation of the eye, usually pink/red in color, and 'sticky'. It may be followed by swelling of the eyelids, photophobia and white/yellow discharge (pus). It can be due to a viral or bacterial infection.

Pink eye due to allergies are often associated with other signs of hay fever such as itchy nose and is not contagious and do not have pus.

## How is Conjunctivitis spread?

It is spread by contact with discharge from the eyes or upper respiratory tracts of infected persons, from contaminated fingers, clothing and other articles including shared eye makeup applicators.

## What is the incubation period and how long is it communicable?

The incubation period is 24 to 72 hours but it may vary depending on the cause.

Bacterial infections can be treated with antibiotics and are no longer contagious 24 hours after beginning of treatment. Viral infections are communicable as long as symptoms are present and no treatment is currently available.

## How can Conjunctivitis be prevented?

Anyone with symptoms of conjunctivitis or anyone in contact with someone with conjunctivitis should wash hands before and after touching or wiping your eyes with soap and water, throw away or carefully wash items that touch the eyes, do not share eye make-up or other items used on the eyes (towels, tissues, or cotton ball). Adults and children should be encouraged to sneeze or cough in a tissue or their elbows and dispose of used tissue into a waste basket.

*It is recommended to use spray bottles to apply the disinfectant (1 part bleach to 9 part cool water; prepared daily) to contaminated surfaces such as door handles or any object the sick individual has touched.*

## What should I do about it?

If the eye discharge is yellow, if the eye or eyelid is red, or if symptoms don't start improving after two (2) or three (3) days, please seek medical attention. Be aware of the signs of more severe eye infection: severe eye pain, change in vision, extreme sensitivity to light, and marked heat and swelling of the eyelids. If any of these symptoms occur, contact your healthcare provider IMMEDIATELY!

Students and sensitive workers can NOT attend school until drainage is no longer present or 24 hours after beginning antibiotic treatment for bacterial conjunctivitis.

Clusters of two or more persons are considered a **reportable disease** to the Florida Department of Health in Santa Rosa County (DOH-Santa Rosa).

For more information, please contact the DOH-Santa Rosa Epidemiology Program at 850-983-5200.

## **E. COLI 0157:H7 \***

### **What is E. coli 0157:H7?**

E. coli are bacteria that normally live in the intestines of humans and animals. There are many strains of E. coli bacteria and most of them are harmless. However, one particular strain, E. coli O157:H7, may cause serious illness in some individuals.

### **How is E.Coli 0157:H7 spread?**

E. coli 0157:H7 is transmitted through fecal-oral route. The bacteria live in the gut of healthy cattle, deer, goats, and sheep. It can spread to people through raw or undercooked meat, or unpasteurized milk or juice. Other food items may be contaminated either by manure in the field or by raw beef or raw beef juices in the kitchen. Sick individuals, that do not properly wash their hands after using the restroom or changing diapers, may transfer fecal material and the bacteria to food or objects and infect others.

### **What are the signs and symptoms of E.coli 0157:H7?**

The most common symptoms are severe stomach cramps and diarrhea (which often becomes bloody), sometimes vomiting but little or no fever. Dehydration, especially among infants and the elderly, may be severe. Hemolytic Uremic Syndrome (HUS) is a serious complication of E. coli 0157:H7 infection which starts about one (1) week after the onset of the diarrhea. HUS damages kidneys and blood vessels. Most people do not develop HUS; however, young children and the elderly are at greater risk of developing HUS. Antibiotics are NOT recommended to treat this infection.

### **What is the incubation period and how long is it communicable?**

The incubation period ranges from two (2) to ten (10) days with a median of three (3) to four (4) days. The pathogen may be transmitted for one (1) week in adults to three (3) for children. Prolong carrier state (having the bacteria in one's gut without any symptoms) is uncommon.

### **How can E. coli 0157:H7 be prevented?**

The best prevention is to wash your hands vigorously with soap and water especially:

After:

- Toilet visits
- Cleaning up vomitus or diarrhea
- Handling diapers (use glove)
- Handling soiled clothes or linens
- Contact with a symptomatic person

Before:

- Eating
- Preparing food

This disease can also be prevented by proper disposal of soiled diapers, human waste, and prevention of food and beverage contamination. It is recommended to use only pasteurized milk and dairy products, and heat beef to an internal temperature of 155°F for at least 15-16 seconds. Kitchen counters and cutting boards should be sanitized after use.



*It is recommended to use spray bottles to apply the disinfectant (1 part bleach to 9 part of cool water to be prepared daily) to contaminated surfaces such as toilets, sinks, floors, tables, water fountains or any areas where a sick individual has been.*

**What should I do about it?**

This may potentially be a serious illness. Persons who have these symptoms should see their physicians. Students and/ or staff members should be cleared by a health care provider before they return to school/ work. Antibiotics are generally not used.

This is a reportable disease to the Florida Department of Health in Santa Rosa County (DOH-Santa Rosa).

For more information, please contact the DOH-Santa Rosa Epidemiology Program at 850-983-5200.

## **FIFTH DISEASE**

### **(Erythema Infectiosum; Human Parvovirus B19 Infection)**

#### **What is Fifth Disease?**

Fifth Disease is a mild, self-limiting rash illness caused by a virus (parvovirus B19) and primarily affects school age children. Occasionally, the rash may itch.

#### **How is Fifth Disease spread?**

It is spread mainly through contact with respiratory secretions from the nose and throat of infected individuals and their saliva. It can be passed from mother to fetus. It can also be spread through transfusion of blood and blood products, and is resistant to inactivation by various methods.

#### **What are the signs and symptoms of Fifth Disease?**

Fifth Disease is a mild, lace-like rash occurring on the body, arms and legs; usually with low grade fever. It usually presents with 'cold-like' symptoms (malaise and fatigue, runny nose). Diagnosis is made when the most striking symptom, the redness of the cheeks ('slapped-cheek'), appears. This rash usually resolves in seven (7) to ten (10) days, but may re-appear and fade away with changes in temperature, sunlight and emotional stress for up to six (6) weeks.

#### **What is the incubation period and how long is it communicable?**

The incubation period varies from four (4) to twenty (20) days. It is more communicable in the week before the rash appears and is probably not after the rash begins.

#### **How can Fifth Disease be prevented?**

There is no vaccine at this time. Approximately 50% of adults have had the disease and have developed lifelong immunity. Since individuals are infectious before the rash appears, the best prevention is to practice good hygiene:

- Wash hands frequently with soap and water and cover nose and mouth when coughing or sneezing.
- Students should be taught to blow their noses into a tissue, discard the tissue into the trash, and then wash their hands with soap and water.
- Students and adults should also avoid sharing drinking cups or utensils.

#### **How is it treated?**

Under normal circumstances, treatment of symptoms such as fever, pain, or itching is all that is needed. Antibiotics are not useful because this is a viral disease.

#### **What should I do about it?**

Persons who have these symptoms should see their physicians, in particular, people with sickle-cell disease, immunocompromised, or pregnant since they are at risk for serious complications. Students and adults with fifth disease should NOT be excluded from schools unless they have a fever. When their fever subsides and they feel well, they can return to school and daycare.

Clusters of two or more persons are considered a reportable disease to the Florida Department of Health in Santa Rosa County (DOH-Santa Rosa).

For more information, please contact the DOH-Santa Rosa Epidemiology Program at 850-983-5200.

# **GIARDIASIS \***

## **(GIARDIA INFECTION)**

### **What is Giardiasis?**

Giardiasis is a diarrheal disease caused by a protozoan parasite *Giardia lamblia*. Once an animal or a person is infected, the parasite lives in the intestine and is passed in the stool. Because the parasite has a protective shell, it can survive outside the body and in the environment for long periods of time. It is one of the most common causes of waterborne disease (found in drinking and recreational water).

### **How is Giardiasis spread?**

Giardiasis is spread from person to person through hand-to-mouth contact and from swallowing contaminated water. Children are infected more frequently than adults and it is a common occurrence in day care centers where diapers are changed. Though it may not cause symptoms for some people, they can still be carriers and pass it on to others.

### **What are the signs and symptoms of Giardiasis?**

*Giardia* infection can cause multiple intestinal symptoms including: diarrhea, gas or flatulence, greasy stools that tend to float, stomach cramps, and upset stomach or nausea. These symptoms may lead to weight loss and dehydration. Some people with giardiasis have no symptoms at all.

### **What is the incubation period and how long is it communicable?**

Symptoms normally begin in three (3) to twenty-five (25) days (on average 7-10) after becoming infected and may last two (2) to six (6) weeks and transmission may occur for the length of the infection. Asymptomatic carrier's rate is high.

### **Can I prevent this disease?**

The best prevention is to wash your hands vigorously with soap and water especially:

After:

- Toilet visits
- Handling soiled clothes or linens
- Cleaning up vomitus or diarrhea
- Contact with a symptomatic person
- Handling diapers (use glove)

Before:

- Eating
- Preparing food

*Also protect others by not swimming if you are experiencing diarrhea.*

*It is recommended to use spray bottles to apply the disinfectant (1 part bleach to 9 part of cool water to be prepared daily) to contaminated surfaces such as toilets, sinks, floors, tables, water fountains or any areas where a sick individual has been.*

### **What should I do about it?**

Persons with the above symptoms should see their physician. Several medications are available for the treatment of this infection. Students and sensitive workers can NOT attend school and will need to be symptom free for 24 hours before being readmitted.

This is a **reportable disease** to the Florida Department of Health in Santa Rosa County (DOH-Santa Rosa). For more information, please contact the DOH-Santa Rosa Epidemiology Program at 850-983-5200.

# **HAND, FOOT AND MOUTH DISEASE (COXSACKIEVIRUS)**

## **What is Hand, Foot and Mouth disease?**

Hand, foot and mouth disease is an infection that is usually caused by a virus called the coxsackie A virus.

## **How is Hand, Foot and Mouth disease spread?**

It is mainly spread by direct contact with nose and throat discharges and feces of infected persons (who may be asymptomatic) and by aerosol droplet spread.

## **What are the signs and symptoms of Hand, Foot and Mouth disease?**

It usually affects children under 10 years of age and starts with a feeling of general malaise. Some may have low grade fever and a loss of appetite, followed by a sore throat and small spots inside the mouth. These spots soon progress into small mouth ulcers. A day or so later, small spots usually appear on the hands and feet and sometimes on the buttocks, legs and genitals, but rarely on other parts of the body. The spots are similar to chickenpox but are smaller and tender and usually not itchy. The fever and spots usually clear within a few days but the mouth ulcers may last up to a week. In a very small number of cases, the virus can cause more severe illness such as inflammation of the heart muscle or brain.

## **What is the incubation period and how long is it communicable?**

The symptoms start 3-6 days after being infected from another person. It is infectious until spots and mouth ulcers have disappeared. However, children remain mildly infectious for several weeks as the virus may be passed through the feces.

## **How can Hand, Foot and Mouth disease be prevented?**

It is impractical to exclude children from school or nursery once the symptoms are gone. However, it is sensible to maintain good hygiene to reduce the chance of passing on the virus. Give careful attention to prompt hand washing when handling discharges, feces and any soiled articles.

*It is recommended to use spray bottles to apply the disinfectant (1 part bleach to 9 part cool water; prepared daily) to contaminated surfaces such as toilets, sinks, floors, tables, water fountains or any areas where a sick individual has been.*

## **What should I do about it?**

Persons who have these symptoms should see their physicians. NEVER GIVE ASPIRIN TO A CHILD as it may cause a rare but serious complication called Reye's syndrome.

A student may return to school once the fever and the spots/mouth ulcers have disappeared.

Clusters of two or more persons are considered a reportable disease to the Florida Department of Health in Santa Rosa County (DOH-Santa Rosa)

For more information, please contact the DOH-Santa Rosa Epidemiology Program at 850-983-5200.

# HEAD LICE

## What are Lice?

Lice are the infestation of the head with adult lice, larvae and mites.

## How is Lice spread?

Lice are spread by direct contact (head to head) with an infected person and by indirect contact with their personal belongings, especially shared headgear, combs and clothing. Lice from pets do not infest man, although they may be present temporarily. Personal hygiene or cleanliness in home or school has nothing to do with getting head lice.

## What are the signs and symptoms of Lice?

Lice are characterized by a tickling feeling of something moving in the hair, severe itching due to allergic reaction to bites, and sores of the scalp or body which may become infected. Individuals may show signs of irritability.

## What is the incubation period and how long is it communicable?

The eggs or nits of lice hatch in 7-10 days and mature 8 to 10 days after hatching. The egg to egg cycle lasts about three (3) weeks. Lice can be transferred to another person as long as lice or eggs remain alive on the infested person or in clothing. Nits remain viable for approximately one (1) month on clothing.

## Can Lice be prevented?

Infestation can be avoided by the following:

- Avoid physical contact with infested individuals and their belongings, especially clothing and bedding
- Launder clothing and bedding in hot water (over 129 °F) or dry clean to destroy lice and nits.
- Dry clothes in hot clothes dryer.
- Storing clothes in a plastic bag for 10 days is also effective in killing lice or nymphs. Regularly inspect all children for head lice and excuse those infested until treatment has been done.

## What should I do about it?

Students with head lice should not return to school/daycare until they are clear of both lice and nits. Several medicated shampoos are available for treatment and should be used as directed.

- Following the shampoo, it is necessary to comb the hair thoroughly using a specially designed comb for nits.
- Applying vinegar to the hair helps the nits adhere to the comb. (1/4 cup vinegar and 3/4 cup of water)
- A thorough laundry and soaking of hair equipment needs to be done. A spray is available for furniture, mattresses pillows, car upholstery and carpets.
- Retreatment after 7 to 10 days is recommended to assure that no eggs have survived.

CAUTION: Kwell is not recommended for infants, young children and pregnant or breastfeeding women.

For more information, please contact the DOH-Santa Rosa Epidemiology Program at 850-983-5200.

# HEPATITIS A \*

## What is Hepatitis A?

Hepatitis A (formerly known as infectious hepatitis) is a virus that causes infection of the liver. The disease is fairly common. Anyone can get Hepatitis A but it is most common in children and young adults. Unlike Hepatitis B and C, the infection does not become long term or chronic.

## How is Hepatitis A spread?

The Hepatitis A virus enters through the mouth, multiplies in the liver, and is passed in the stool. The virus is spread when an infected individual does not wash his/her hands after using the bathroom. The virus enters another person when hands, food, or objects contaminated with stool are put in the mouth. In some cases, it can be spread by consuming water or shellfish contaminated with sewage.

Hepatitis A virus is not normally spread to classroom contacts or work associates. It is not spread by kissing, sneezing or saliva.

## What are the signs and symptoms of Hepatitis A?

The symptoms of Hepatitis A may include nausea, fatigue, poor appetite, fever, diarrhea and vomiting. Urine may become darker in color and jaundice (a yellowing of the skin and whites of the eyes) may appear. The disease is rarely fatal. Infants and young children tend to have very mild or no symptoms and are less likely to develop jaundice than are older children and adults. Not everyone who is infected will have all of the symptoms.

## What is the incubation period and how long is it communicable?

Symptoms may appear two to six weeks after exposure, but usually between three to four weeks after exposure. The contagious period begins about two weeks before the symptoms appear and continues up to one week after onset of jaundice. Most people recover within three weeks without any complications.

Once an individual recovers from Hepatitis A, he/she is immune for life and does not continue to carry the virus.

## How can Hepatitis A be prevented?

There is a Hepatitis A vaccine. It is recommended for all children between 12 to 23 months of age. The two doses in the series should be administered at least six months apart. Children not fully vaccinated by age two can be vaccinated at subsequent visits. International travelers to regions with high rate of infections should also be vaccinated at least one month prior to departure. Persons with chronic liver disease should also be vaccinated.

The best prevention for all diseases that are transmitted through fecal-oral route is to wash your hands vigorously with soap and water especially:

After:

- Toilet visits
- Handling soiled clothes or linens
- Handling diapers (use glove)
- Cleaning up vomit or diarrhea

- Contact with a symptomatic person

Before:

- Eating
- preparing food

*It is recommended to use spray bottles to apply the disinfectant (1 part bleach to 9 part of cool water to be prepared daily) to contaminated surfaces such as toilets, sinks, floors, tables, water fountains or any areas where a sick individual has been.*

### **What should I do about it?**

There are no special medicines or antibiotics that can be used to treat a person once the symptoms appear. Generally, bed rest and a low fat diet is all that is needed. Avoid alcohol and check with your healthcare provider before taking any medicine.

This is a reportable disease to the Florida Department of Health in Santa Rosa County (DOH-Santa Rosa). Students and sensitive workers can NOT be in school or any sensitive employment and need to be excluded for one (1) week after the onset of symptoms. Immune globulin (IG) may be given within 14 days of exposure to prevent persons at risk from becoming ill.

For more information, please contact the DOH-Santa Rosa Epidemiology Program at 850-983-5200.

# IMPETIGO

## **What is Impetigo?**

Impetigo is a bacterial skin infection caused by either streptococcus or staphylococcus that occurs in people of any age but most frequently in children. Often bites and cuts become infected; the infection scratching the sores and then touching unaffected areas of the body.

## **How is Impetigo spread?**

Impetigo is spread by direct contact with the moist discharges of the lesions or less commonly through touching articles (such as clothing, bedding, towels, etc.).

## **What are the signs and symptoms of Impetigo?**

The infection begins as a sore that becomes pustular and may be itchy. It then ruptures producing a discharge and forms a thick yellow crust and is surrounded by a characteristic red ring. If not properly treated, it may cause scarring and can be serious or even fatal to newborn infants.

## **What is the incubation period and how long is it communicable?**

The incubation period varies, but is generally between one and ten days. All types are communicable for as long as purulent lesions continue.

## **How can Impetigo be prevented?**

Good personal hygiene is the best way to prevent infection. Keeping fingernails short, frequent hand washing with soap and water, and using personal or disposable towels may prevent the spread of the infection. Infectious individuals should avoid contact with others. Wounds should be thoroughly cleaned with soap and water.

## **What should I do about it?**

Treatment consists of cleansing the lesions with soap and water and then wiping the surrounding skin with an antiseptic. Local applications of an antibiotic ointment may clear up the lesions; however, administration of oral antibiotics usually is recommended for severe cases. The lesions should be kept dry and should be left open to the air as much as possible to allow proper healing since the organism thrive in environments without air.

Persons with these symptoms should see their physician. Complications arise if the bacteria invade beyond the skin, though this is very rare. Some of the organisms causing impetigo are more dangerous than others. One bacterium, *Streptococcus pyogenes*, can cause damage to the kidneys or heart. It can also affect other major organs.

A student or sensitive worker should not be in school or at work until 24 hours after initiation of antibiotic treatment.

Clusters of two or more persons are considered a reportable disease to the Florida Department of Health in Santa Rosa County (DOH-Santa Rosa).

For more information, please contact the DOH-Santa Rosa Epidemiology Program at 850-983-5200.



# INFLUENZA (The Flu)

## What is the Flu?

Influenza (flu) is a virus of the upper respiratory tract. Many people who are sick with the flu may recover without requiring medical treatment. However, some people have been hospitalized for the flu, so early evaluation by a doctor is important.

## What are the symptoms of the flu?

- Fever/chills\*
- Cough
- Sore throat
- Headache
- Runny Nose
- Muscle Aches
- Weakness and Fatigue
- Sometimes diarrhea and vomiting

\*Not everyone with influenza gets fever

## How does the flu spread from person to person?

The flu is spread when an infected person coughs or sneezes into the air around them. Tiny droplets that hold the flu virus are coughed into the air and are inhaled by the next person. Nasal secretions can also be spread from the infected person through a handshake or touching a surface.

## How do I protect myself from getting the flu?

- ✓ Avoid contact with people who have been diagnosed with flu or who appear to have symptoms.
- ✓ Keep a distance of 6 feet from infected people.
- ✓ Wash your hands frequently.
- ✓ Keep surfaces clean that you touch.

## What do I do if I think my child has the flu?

- ✓ Call a doctor and ask about testing and treatment options.
- ✓ Give your child plenty of fluids and get rest.
- ✓ Cover coughs and sneezes and wash hands frequently.
- ✓ Do NOT send your child to school with fever reducing medications. Make sure they are clear of all symptoms (fever, cough, sore throat) for at least 24-48 hours before return.
- ✓ Do not go out in public except to see a doctor if possible. Avoid group settings—football games, church etc.
- ✓ Keep surfaces that are touched sanitized with a mild bleach solution (1 part bleach, 9 parts water) or other disinfectant.  
Avoid contact with immune compromised people: pregnant women, elderly, infants, small children, and anyone with HIV, Diabetes, Cancer, Asthma, or any other immune compromising condition.

Clusters of two or more persons are considered a reportable disease to the Florida Department of Health in Santa Rosa County (DOH-Santa Rosa). For more information, please contact the DOH-Santa Rosa Epidemiology Program at 850-983-5200.

# **BACTERIAL MENINGITIS\***

## **What is bacterial meningitis?**

Bacterial meningitis is usually severe. While most people with meningitis recover, it can cause serious complications such as brain damage, hearing loss, and/or learning disabilities. Some of the leading causes of bacterial meningitis in the United States include Haemophilus influenza (often caused by type b, Hib), Streptococcus pneumoniae, group B Streptococcus, Listeria monocytogenes, and Neisseria meningitidis.

## **What are the signs and symptoms of bacterial meningitis?**

Meningitis infection may show in a person by a sudden onset of fever, headache, and/or stiff neck. Other symptoms include nausea, vomiting, increased sensitivity to light (photophobia), and/or altered mental status (confusion).

## **How is bacterial meningitis spread?**

The germs that cause bacterial meningitis can be contagious. Some bacteria can spread through the exchange of respiratory and throat secretions. Fortunately, most of the bacteria that can cause meningitis are not as contagious as viruses that can cause the common cold or the flu. The bacteria are also not spread by casual contact or by simply breathing the area where a person with meningitis has been. Other meningitis-causing bacteria are not spread person-to-person, but can cause disease because the person has certain risk factors such as a weakened immune system or head trauma.

## **How long is a person with bacterial meningitis contagious?**

The symptoms of bacterial meningitis can appear quickly or over several days. Typically symptoms develop within 3-7 days after exposure.

## **How can bacterial meningitis be prevented?**

The most effective way to protect you and your child against certain types of bacterial meningitis is to complete the recommended vaccine schedule. There are vaccines available for the three types of bacteria that can cause meningitis:

- Neisseria meningitidis (meningococcal)
- Streptococcus pneumonia (pneumococcus)
- Haemophilus influenza type b (Hib)

## **What should I do if I think I have bacterial meningitis?**

Bacterial meningitis can be treated effectively with antibiotics. It is important that treatment be started as soon as possible. Appropriate antibiotic treatment of the most common types of bacterial meningitis can reduce the risk of dying from meningitis to below 15%, although the risk remains higher among infants and the elderly. Children should not return to school until cleared by a healthcare provider.

This is a reportable disease to the Florida Department of Health in Santa Rosa County (DOH-Santa Rosa).

For more information on bacterial meningitis, please contact the DOH-Santa Rosa Epidemiology Program at 850-983-5200.

# **STAPHYLOCOCCUS AUREUS AND METHICILLIN-RESISTANT STAPHYLOCOCCUS AUREUS (MRSA) INFECTIONS**

## **What is MRSA?**

Staphylococcus aureus or “staph” are bacteria that live on the skin and in the nose of healthy individuals. The name Methicillin-resistant Staphylococcus aureus (MRSA) is used for the drug resistant strain of the bacteria. This infection may lead to internal organ involvement.

## **What are the symptoms of a MRSA infection?**

A “staph” infection, including MRSA, can appear as a pimple, rash, boil or an open wound that does not heal on its own. Symptoms of a MRSA infection may include redness, warmth, swelling, pus and tenderness of the skin. Some people may also have fever and chills.

## **How are MRSA infections spread?**

Anyone can get a MRSA infection. MRSA is most commonly spread through direct physical contact (skin-to-skin) with an infected person. Poor hand washing plays an important role in the spread of the bacteria. A person can also become infected by touching or sharing objects that have been contaminated (such as towels, bed sheets, clothes, razors and even athletic equipment).

## **How can I prevent others and myself from getting a MRSA infection?**

- Wash hands frequently with soap and warm water, especially after changing your own bandages or the bandages of another person.
- Do not share personal items (such as: razors, towels, bed sheets, clothes, deodorant, sporting equipment).
- Wash all cuts, scratches and abrasions with soap and water. Keep them covered with a clean, dry bandage until healed.
- Avoid contact with any open wounds and cuts.
- Wash soiled towels, bed sheets and clothes in hot water with soap and bleach. Dry clothes in a hot dryer; heat helps kill the bacteria.
- Never touch, squeeze or pop any boils. This can spread the bacteria to other parts of your body or to other people. The pus is full of bacteria.
- Keep all common areas, like bathrooms and kitchens clean. A water and bleach cleaning solution (9 parts water, 1 part bleach prepared daily with cool water) will kill the bacteria.

## **What should I do if I think I have a MRSA infection?**

See a healthcare provider as soon as possible. MRSA infections are treatable. Do not try to drain, pop or squeeze any boils, pimples or other pus-filled skin infections. Early treatment can help keep the infection from getting worse. Depending on how serious the infection is, your doctor may drain the fluid and send a sample for laboratory testing. The doctor will probably bandage the infected area and may prescribe antibiotics. Follow all of the doctor's instructions, even if you begin to feel better or the infection looks like it is healing, to prevent the infection coming back or becoming worse.

Students and adults should not be in school or at work until 24 hours after initiation of antibiotic treatment. In addition, he/she must keep the lesions covered while in the facility.

Clusters of two or more persons are considered a reportable disease to the Florida Department of Health in Santa Rosa County (DOH-Santa Rosa). For more information on MRSA, please contact the DOH-Santa Rosa Epidemiology Program at 850-983-5200.

# **MONONUCLEOSIS (MONO)/ EPSTEIN-BARR VIRUS**

## **What is Mononucleosis?**

Mononucleosis, also called “mono,” is a contagious disease. Epstein-Barr virus (EBV) is the most common cause of mononucleosis, but other viruses can also cause this disease. It is common among teenagers and young adults, especially college students. At least 25% of teenagers and young adults who get infected with EBV will develop infectious mononucleosis.

## **What are the signs and symptoms of Mononucleosis?**

Symptoms of mononucleosis may develop slowly and may not all occur at the same time. These symptoms include extreme fatigue, fever, sore throat, headache, body aches, swollen lymph nodes in the neck and armpits, swollen liver, swollen spleen, and/or rash.

## **How is Mononucleosis spread?**

EBV is the most common cause of mononucleosis, but other viruses can cause this disease. Typically, these viruses spread most commonly through bodily fluids, especially saliva. However, these viruses can also spread through blood and semen during sexual contact, blood transfusions, and organ transplants.

## **How long is a person with Mononucleosis contagious?**

Typical symptoms of mononucleosis usually appear 4 to 6 weeks after an individual is infected with EBV. The illness lasts anywhere from 1 to 4 weeks. Persons infected may be able to spread the virus for several weeks. The virus can be found in the saliva of an infected person for a year or longer after the infection.

## **How can Mononucleosis be prevented?**

There is no vaccine to protect against mononucleosis. You can help protect yourself by not sharing drinks, food, or personal items like toothbrushes with people who have mononucleosis. Also do not kiss people who have mononucleosis.

## **What should I do about it?**

Individuals with the above symptoms should see their healthcare providers. You can help relieve symptoms of mononucleosis by drinking fluids to stay hydrated, getting plenty of rest, and taking over-the-counter medications for pain and fever. Based on the severity of symptoms, a healthcare provider may recommend treatment of specific organ systems affected by mononucleosis. Because your spleen may become enlarged as a result of the infectious mononucleosis, you should avoid contact sports until you fully recover. Individuals with mononucleosis should not be excluded from school unless other exclusion criteria are present, such as fever.

Clusters of two or more persons are considered a reportable disease to the Florida Department of Health in Santa Rosa County (DOH-Santa Rosa).

For more information, please contact the DOH-Santa Rosa Epidemiology Program at 850-983-5200.

# NOROVIRUS

## What are Noroviruses?

Noroviruses are a group of viruses that cause the “stomach flu,” or gastroenteritis, in people. Viruses are not affected by treatment with antibiotics, and cannot grow outside of a person’s body.

## How is Norovirus spread?

Noroviruses are spread mainly by fecal-oral route. People can become infected with the virus in several ways including: eating food or drinking liquids that are contaminated; touching contaminated surfaces and then placing their hand in their mouth; or having direct contact with another person who is infected and showing symptoms. Schools, daycare centers and nursing homes should pay special attention to infected children or residents because this virus is very contagious and can spread rapidly throughout such environments.

## What are the signs and symptoms?

The signs and symptoms are nausea, vomiting, diarrhea, low-grade fever, chills, headache, muscle aches and a general sense of tiredness. Dehydration, especially in infants and the elderly, may occur.

## What is the incubation period and how long is it communicable?

The incubation period is approximately 24 to 48 hours after digestion of the norovirus, but can sometimes be as short as 12 hours after exposure. Recovery time is usually 1-2 days after exposure, but a person is still considered contagious 3 days after they recover from their illness.

## How can Norovirus infections be prevented?

*\*Noroviruses are not affected by alcohol based hand sanitizers!\** The best prevention is to wash your hands vigorously with soap and water especially:

After:

- Toilet visits
- Cleaning up vomitus or diarrhea (use gloves)
- Handling diapers (use gloves)
- Handling soiled clothes or linens (use gloves)
- Contact with a symptomatic person

Before:

- Eating
- Preparing Foods

*It is recommended to use spray bottles to apply the disinfectant (1 part bleach to 9 part cool water to be prepared daily) to contaminated surfaces such as toilets, sinks, floors, tables, water fountains or any areas where a sick individual has been.*

## What should I do if I think I have Norovirus?

No treatment is available; the best thing to do is drink plenty of fluids to prevent dehydration. Persons who experience severe symptoms should see their physician. Students and adults with this illness should be free of symptoms for a minimum of 24 hours before returning to school/work.

Clusters of two or more persons are considered a reportable disease to the Florida Department of Health in Santa Rosa County (DOH-Santa Rosa). For more information, please contact the DOH-Santa Rosa Epidemiology Program at 850-983-5200.

# PINWORMS

## **What is pinworm infection?**

Pinworms are parasites that look like tiny half-inch long white threads and live in the bowel. They usually travel to the rectal opening during the night while the person is sleeping and lay eggs on the outside skin.

## **What are the symptoms of a pinworm infection?**

The worms sometimes cause itching, which may be very annoying. If it is a severe infection, symptoms may include: nervousness, restlessness, loss of appetite, weight loss, and girls may experience vaginal itching and irritation (vaginitis), if pinworms are near the vagina.

## **How is pinworm infection spread?**

Scratching will cause pinworm eggs to stick to the fingers. The pinworms then infect other or even re-infect the individual if the fingers are placed in the mouth. The eggs, which are too small to see, will contaminate whatever they come in contact with: bedclothes, underwear, hands and food touched by contaminated hands. Even pinworm eggs floating in the air can be swallowed and cause infection. Pinworms are very contagious. Even the cleanest and most careful people can get them.

## **What is the incubation period and how long is it communicable?**

Pinworm eggs are infective within a few hours after being deposited on the skin. They can survive up to two (2) weeks on clothing, bedding, or other objects. The pinworms grow to adult size within two (2) to six (6) weeks. Pinworm infections can be spread as long as either worms or eggs are present.

## **How can pinworms infestation be prevented?**

To help prevent re-infection follow these rules:

- Consult your physician to treat pinworms with medication.
- Wash hands and fingernails with soap often during the day, especially before eating and after using the toilet.
- Daily morning bathing with showers (or stand up baths) is preferred to tub baths.
- Wear clean underpants both day and night. Change them daily.
- For several days after treatment, clean the bedroom floor by vacuuming or damp mopping.
- After treatment, wash bed lines and night clothes (don't shake them". Boiling or using a washing machine set on the hot cycle can destroy eggs.
- Keep the toilet seats clean.

## **What should I do about it?**

If you suspect a pinworm infection, consult your health-care provider for diagnosis and treatment. The treatment usually consists of one (1) tablet taken by mouth. Re-infection is possible and repeated treatment of the patient and close family contacts may be recommended two (2) weeks after initial treatment.

Students must receive treatment prior to returning to school.

For more information, please contact the DOH-Santa Rosa Epidemiology Program at 850-983-5200.

# **PERTUSSIS \***

## **Whooping Cough**

### **What is Pertussis?**

Pertussis (whooping cough) is a highly contagious, bacterial disease marked by severe coughing. It is named after the "whoop" sound children and adults make when they try to breathe in during or after a severe coughing spell.

### **Who gets it?**

Pertussis can occur at any age, but infants and young children are at highest risk of life threatening consequences. Undiagnosed mild disease in older children, adolescents, and adults contribute to the spread of the illness among infants and young children.

### **How is Pertussis spread?**

Pertussis is caused by a bacteria found in the mouth, nose and throat of an infected person. Transmission to others occurs during close contact with an infected person, most commonly by airborne droplets of respiratory secretions.

### **What are the symptoms of Pertussis?**

Pertussis usually starts with cold or flu-like symptoms such as runny nose, sneezing, fever and a mild cough. These symptoms can last up to 2 weeks and are followed by increasingly severe coughing spells. The coughing attacks may last for many months in the "classic illness" or just a few days in the mild form of the disease. Mild pertussis disease is difficult to diagnose because its symptoms mimic those of a cold. Usually a prolonged cough is present, but without the "whoop". Recovery occurs gradually over 2 to 3 weeks. Fever, if present, is usually mild.

### **How soon do symptoms appear?**

Symptoms appear between 6 to 21 days (average 7-10) after exposure to the bacteria.

### **When and for how long can it be spread?**

The contagious period is from 7 days following exposure to 3 weeks after onset of severe coughing spells. It is most contagious during the first two to three weeks of infection, often before the beginning of severe coughing spells.

### **Does past infection with pertussis make a person immune?**

Students who have recovered from culture-confirmed pertussis do not need further doses of pertussis vaccine.

### **How do you treat it?**

Pertussis is treated with antibiotics and patients are advised to take all prescribed medication and avoid contact with anyone, particularly small infants and children. Anyone who is exposed to pertussis should also be given antibiotics to prevent the disease.

### **What are some potential complications of Pertussis?**

Pneumonia is the most common complication and cause of pertussis-related deaths. Young infants are at highest risk for pertussis-related complications, including seizures, encephalopathy (swelling of the brain), and otitis media (severe ear infection). There are about 10-15 deaths each year in the United States.

### **How do you prevent it?**

Immunization against pertussis with DTaP vaccine is required by both the Advisory Committee on Immunization Practices (ACIP) and the American Academy of Pediatrics (AAP) and should be administered in 5 doses: at 2, 4, 6, and 15-18 months of age and 4 – 6 years of age. The vaccine is not given to people 7 years of age and older.

Tdap is required for adolescents who got DTaP or DTP as children but have not yet gotten a dose of Td. The preferred age is 11-12. Tdap is not available for anybody who has already gotten Tdap, adults 65 years of age and older and children 7 through 9 years of age.

Pertussis is a **reportable disease** to the Florida Department of Health in Santa Rosa County (DOH-Santa Rosa).

For more information, contact the DOH-Santa Rosa Epidemiology Program at 850-983-5200.

**Students with religious exemptions to vaccinations may be excluded from school with the occurrence of any vaccine preventable disease up to a period of twenty-one (21) days after the last case develops.**



# **RESPIRATORY SYNCYTIAL VIRUS (RSV)**

## **What is RSV?**

RSV is a viral infection that is the major cause of pneumonia, croup, bronchiolitis, ear infection and upper respiratory illness with fever.

## **How is RSV spread?**

RSV is spread by ingesting or inhaling droplets, by handling soiled objects such as handkerchiefs, and the eating utensils of infected persons. The feces also contain the virus.

## **What are the signs and symptoms of RSV?**

Symptoms may include fever, chills, headache, general aching, tiredness and a loss of appetite. Other signs may include inflammation of the lining of the nose, throat, tonsils, upper breathing tubes or bronchial tubes of the lungs. In premature infants, the signs may be minimal and often include lethargy, irritability, poor feeding and apnea (temporary cessation of breathing).

## **What is the incubation period and how long is it communicable?**

The incubation period is from one to ten days. It is communicable prior and for the duration of the illness. It may be found for several weeks in the stool after symptoms are gone.

## **How can RSV be prevented?**

There is no vaccine at this time; however, RSV—IGIV (Immune Globulin) may be given to premature infants and other infants with chronic lung disease to prevent serious complications in these high risk groups. Consult your physician for the schedule.

Good and frequent hand washing and disinfecting changing tables will help stop the spread of the virus. Also, children and adults should not share items such as cups, glasses, and utensils. It is recommended to use spray bottles to apply the disinfectant (1 part bleach to 9 part of cool water to be prepared daily) to contaminated surfaces such as toilets, sinks, floors, tables, water fountains or any areas where a sick individual has been.

## **What should I do about it?**

Persons who have these symptoms should see their physicians.

A student or sensitive worker should not be in school or at work until 24 hours after symptoms subside. If more than one case is identified, the individual must be excluded until 48 hours after symptoms subside.

Clusters of two or more persons are considered a reportable disease to the Florida Department of Health in Santa Rosa County (DOH-Santa Rosa).

For more information, please contact the DOH-Santa Rosa Epidemiology Program at 850-983-5200.

# **RINGWORM**

## **(TINEA)**

### **What is Ringworm?**

Ringworm is a fungus that affects different parts of the body such as scalp, groin (jock itch), toe nails and feet (Athlete's Foot).

### **How is Ringworm spread?**

Ringworm is spread by direct skin-to-skin contact or indirectly from furniture, hair equipment, toilet articles, clothing and even pets (cats and dogs). Common areas like gyms, shower stalls, floors, and even the soil harbor the fungus.

### **What are the signs and symptoms of Ringworm?**

A small, circular sore develops on the scalp and spreads leaving scaly patches or temporary baldness. Infected hairs become brittle and break off easily. Circular patches with a characteristic raised edge may develop on the hairless body parts. Athlete's Foot is characterized by itchy, scaly, soggy skin between the toes. Swelling and/or open sores may develop around the toes. If the nail is diseased, it will be humped, cracked, broken and appear dark and dirty. There is no pain or itch.

### **What is the incubation period and how long is it communicable?**

Ringworm of the scalp has an incubation period of 10 to 14 days. The incubation period for other types of ringworm is 4-10 days. All types are communicable for as long as an active lesion is present.

### **How can Ringworm be prevented?**

Avoiding direct skin contact with infected persons or animals can prevent ringworm. Athlete's Foot can be prevented by:

- Wearing shoes that are not too tight.
- Bathing your feet daily and scrubbing away loose, dead skin.
- Wearing socks and putting on clean ones daily.
- Using talcum powder to keep your shoes and feet dry.
- Changing or alternating shoes daily so they can dry out.
- Wearing shower shoes when using public showers

### **What should I do about it?**

Persons who have these symptoms should see their physicians. Systemic and topical medications may be used. Contaminated articles and floors need to be disinfected. Students and adults should be excluded from school center or work until 24 hours after the antifungal treatment is initiated. When readmitted to the facility, lesions must remain covered. It is necessary to wear a cap for scalp ringworm and individuals with athlete's foot should not be allowed to walk barefoot. Individuals with any form of ringworm should NOT use swimming pools.

Clusters of two or more persons are considered a reportable disease to the Florida Department of Health in Santa Rosa County (DOH-Santa Rosa) at 983-5200.

For more information, please contact the DOH-Santa Rosa Epidemiology Program at 850-983-5200.

# ROTAVIRUS

## What is Rotavirus?

Rotavirus is a viral infection affecting the intestines which affects mostly children.

## How is Rotavirus spread?

Rotavirus is spread mainly by the fecal-oral route and is extremely contagious. People can become infected with the virus in several ways including: eating food or drinking liquids that are contaminated; touching contaminated surfaces and then placing their hand in their mouth; or having direct contact with another person who is infected and showing symptoms. Viruses may also be spread through the respiratory tract.

## What are the signs and symptoms of Rotavirus?

The signs and symptoms of rotavirus may include vomiting, fever and watery diarrhea. It is sometimes associated with severe dehydration and death in young children.

## What is the incubation period and how long is it communicable?

The incubation period is approximately 24 to 72 hours. It is communicable during the acute stage of the disease and for approximately thirty days after symptoms cease.

## How can Rotavirus be prevented?

The best prevention is to wash your hands vigorously with soap and water especially:

After:

- Toilet visits
- Cleaning up vomitus or diarrhea (use gloves)
- Handling diapers (use gloves)
- Handling soiled clothes or linens (use gloves)
- Contact with a symptomatic person

Before:

- Eating
- Preparing Food

*It is recommended to use spray bottles to apply the disinfectant (1 part bleach to 9 parts water, prepared daily) to contaminated surfaces such as toilets, sinks, floors, tables, water fountains or any areas where a sick individual has been.*

## What should I do about it?

Persons who have these symptoms should see their physicians.

Students and adults with this illness should be free of symptoms for a minimum of 24 hours before returning to school/work.

Clusters of two or more persons are considered a reportable disease to the Florida Department of Health in Santa Rosa County (DOH-Santa Rosa).

For more information, please contact the DOH-Santa Rosa Epidemiology Program at 850-983-5200.

# **SALMONELLA INFECTION \***

## **(SALMONELLOSIS)**

### **What is Salmonellosis?**

Salmonellosis is an infection with bacteria called Salmonella and is diagnosed by testing stools for the organism. It may be found in the blood stream of some patients but not always.

### **How is Salmonella spread?**

Salmonella is classified as a foodborne disease because contaminated food is the predominate mode of transmission. However, fecal-oral person-to-person transmission also occurs especially when children are not toilet-trained. Some family members may not have symptoms but be infected and able to transmit the disease to others. These family members are considered carriers. Some domestic animals and pets, particularly chicks, ducklings, and reptiles (turtles, snakes, and iguanas), often carry the Salmonella bacteria and can pass it on to humans.

### **What are the signs and symptoms of Salmonella?**

Symptoms are headache, abdominal pain, diarrhea, nausea, sometimes vomiting, and fever is almost always present. Dehydration, especially in infants and the elderly, may be severe.

### **What is the incubation period and how long is it communicable?**

The incubation period is 6 to 72 hours with most occurring within 12-36 hours. The individual is contagious throughout the course of the infection, usually several days to several weeks. A temporary carrier state occasionally continues for months and is prolonged by using antibiotics. A sensitivity study should be done to show which antibiotics will be effective in clearing the disease.

### **Can I prevent this disease?**

The best prevention is to wash your hands vigorously with soap and water especially:

After:

- Toilet visits
- Cleaning up vomit or diarrhea (use gloves)
- Handling diapers (use gloves)
- Handling soiled clothes or linens (use gloves)
- Contact with a symptomatic person

Before:

- Eating
- Preparing food

*It is recommended to use spray bottles to apply the disinfectant (1 part bleach to 9 part of cool water to be prepared daily) to contaminated surfaces such as toilets, sinks, floors, tables, water fountains or any areas where a sick individual has been.*

Salmonellosis is also prevented by thoroughly cooking all foods that come from animal sources, particularly poultry, egg products (do NOT consume raw cake batter, or use raw egg in eggnog and homemade ice cream) and meat dishes; keeping hot foods HOT and cold food COLD, only using pasteurized milk and milk products. Kitchen counters and cutting boards should be sanitized after use.

**What should I do about it?**

Persons who have these symptoms should see their physicians.

This is a reportable disease and should be reported to the Florida Department of Health in Santa Rosa County (DOH-Santa Rosa). Students and adults with this illness should be free of symptoms for a minimum of 24 hours before returning to school/work.

For more information, please contact the DOH-Santa Rosa Epidemiology Program at 850-983-5200.

# SCABIES

## **What is Scabies?**

Scabies is a parasitic disease of the skin caused by a mite. A diagnosis is made by recovering the mite from its burrow and identifying it microscopically.

## **How is Scabies spread?**

Scabies is spread by direct skin-to-skin contact. It can also be transferred from clothing, bed linens and furniture of infected persons.

## **What are the signs and symptoms of Scabies?**

The mite burrows beneath the skin laying its eggs and leaving tracks. Lesions are prominent between fingers, wrists, elbows, the belt line, thighs and external genitalia in men, nipples, abdomen and lower portion of the buttocks in women. In infants the head, neck, palms and soles may be involved. Itching is intense, especially at night. Secondary infections often occur from scratching the skin lesions.

## **What is the incubation period and how long is it communicable?**

The incubation period varies from one to four days for previously infected individuals to as long as two to six weeks for first time infection. It is communicable until the mites and eggs are destroyed by treatment, ordinarily after one or two courses of treatment a week apart.

## **What should I do about it?**

Persons affected should see a physician for diagnosis, take a hot soapy bath or shower, and dry thoroughly with a freshly laundered towel. A thin layer of medicated lotion should be applied to all portions of the skin except the head and neck. Dress in freshly laundered clothing and leave the medication on the skin for 24 hours before washing. A second treatment should usually occur a week later. Because the parasite can reside in clothing and linens, they should be thoroughly washed and dried in clothes dryer. A spray may be obtained for furniture and mattresses. Students should NOT remain in a school and must be excluded until 24 hours after the first topical treatment.

**CAUTION:** Itching may persist for one to two weeks and should NOT be regarded as a drug failure or reinfestation. Over treatment is common and should be avoided because of the toxicity of some of the medicated lotions.

For more information, please contact the Florida Department of Health in Santa Rosa County Epidemiology Program at 850-983-5200.

# SHIGELLOSIS \*

## What is Shigellosis?

Shigellosis is an infection of the intestines caused by the shigella bacteria.

## How is it spread?

Shigellosis is spread mainly by the fecal-oral route. People can become infected in several ways including: eating food or drinking liquids that are contaminated; touching contaminated surfaces and then placing their hand in their mouth; or having direct contact with another person who is infected and showing symptoms.

## What are the signs and symptoms of Shigellosis?

The signs and symptoms of shigellosis may include headache, abdominal pain, diarrhea, fever, nausea and sometimes vomiting. Loss of appetite and loose stools often persist for several days. Dehydration, especially in infants and the elderly, may occur.

## What is the incubation period and how long is it communicable?

The incubation period is usually one (1) to three (3) days but may range from 12 to 96 hours. It is communicable during the acute infection and until the shigella bacteria is no longer present in the feces, usually in about four weeks. Appropriate antibiotic treatment should reduce the carriage to a few days.

## How can Shigellosis be prevented?

The best prevention is to wash your hands vigorously with soap and water especially:

After:

- Toilet visits
- Cleaning up vomitus or diarrhea (use gloves)
- Handling diapers (use gloves)
- Handling soiled clothes or linens (use gloves)
- Contact with a symptomatic person

Before:

- Eating
- Preparing Food

It is recommended to use spray bottles to apply the disinfectant (1 part bleach to 9 part of cool water to be prepared daily) to contaminated surfaces such as toilets, sinks, floors, tables, water fountains or any areas where a sick individual has been.

## What should I do about it?

Persons who have these symptoms should see their physicians.

This is a reportable disease and should be reported to the Florida Department of Health in Santa Rosa County (DOH-Santa Rosa). Students and adults with this illness should be free of symptoms for a minimum of 24 hours before returning to school/work.

For more information, please contact the DOH-Santa Rosa Epidemiology Program at 850-983-5200.

# STAPHYLOCOCCUS AUREUS

## What is Staph?

Staphylococcus aureus or “staph” are bacteria that live on the skin and in the nose of healthy individuals.

## What are the symptoms of a Staph infection?

A “staph” infection can appear as a pimple, rash, boil or an open wound that does not heal on its own. Symptoms of a staph infection may include redness, warmth, swelling, pus and tenderness of the skin. Some people may also have fever and chills.

## How are Staph infections spread?

Anyone can get a staph infection. Staph is most commonly spread through direct physical contact (skin-to-skin) with an infected person. Poor hand washing plays an important role in the spread of the bacteria. A person can also become infected by touching or sharing objects that have been contaminated (such as towels, bed sheets, clothes, razors and even athletic equipment).

## How can I prevent others and myself from getting a Staph infection?

- Wash hands frequently with soap and warm water, especially after changing your own bandages or the bandages of another person
- Do not share personal items (such as: razors, towels, bed sheets, clothes, deodorant, sporting equipment)
- Wash all cuts, scratches and abrasions with soap and water. Keep them covered with a clean, dry bandage until healed
- Avoid contact with any open wounds and cuts
- Wash soiled towels, bed sheets and clothes in hot water with soap and bleach. Dry clothes in a hot dryer; heat helps kill the bacteria
- Never touch, squeeze or pop any boils. This can spread the bacteria to other parts of your body or to other people. The pus is full of bacteria.
- Keep all common areas, like bathrooms and kitchens clean. A water and bleach cleaning Solution (9 parts water, 1 part bleach prepared daily with cool water) will kill the bacteria.

## What should I do if I think I have a Staph infection?

See a healthcare provider as soon as possible. Staph infections are treatable. Do not try to drain, pop or squeeze any boils, pimples or other pus-filled skin infections. Early treatment can help keep the infection from getting worse. Depending on how serious the infection is, your doctor may drain the fluid and send a sample for laboratory testing. The doctor will probably bandage the infected area and may prescribe antibiotics. Follow all of the doctor’s instructions, even if you begin to feel better or the infection looks like it is healing, to prevent the infection coming back or becoming worse. Student and adults should not be in school or at work until 24 hours after initiation of antibiotic treatment. In addition he/she must keep the lesions covered while in the facility.

Clusters of two or more persons are considered a reportable disease to the Florida Department of Health in Santa Rosa County (DOH-Santa Rosa)

For more information on Staph, please contact the DOH-Santa Rosa Epidemiology Program at 850-983-5200.



## **STREP THROAT**

### **(STREPTOCOCCAL THROAT INFECTION)**

#### **What is Strep Throat?**

Strep Throat is a throat infection caused by the streptococcal bacteria.

#### **How is it spread?**

Strep throat is spread through large respiratory droplets or direct contact with someone who has the disease. Nasal carriers are particularly likely to spread the disease.

#### **What are the signs and symptoms of Strep Throat?**

The symptoms of strep throat may include an elevated temperature, sore throat, and swollen neck glands.

#### **What is the incubation period and how long is it communicable?**

The incubation period is usually one to three days. It is communicable for ten to twenty-one days possibly weeks or months in untreated cases. Antibiotic therapy is usually given to prevent complications involving the heart and kidneys.

#### **How can Strep Throat be prevented?**

Good and frequent hand washing will help stop the spread of the virus. Also, children and adults should not share items such as cups, glasses, and utensils.

Preventive measures include covering mouth and nose when coughing or sneezing, blowing the nose into a tissue, and discarding the tissue into the trash. Avoid public places when sick and avoid eating or drinking from another's plate, glass or utensils.

It is recommended to use spray bottles to apply the disinfectant (1 part bleach to 9 parts of cool water to be prepared daily) to contaminated surfaces such as toilets, sinks, floors, tables, water fountains or any areas where a sick individual has been.

#### **What should I do about it?**

Persons who have these symptoms should see their physicians. Contaminated articles and floors need to be disinfected.

Students can NOT attend school and may be readmitted 24 hours after the initiation of antibiotic treatment.

Clusters of five or more persons are considered a reportable disease to the Florida Department of Health in Santa Rosa County (DOH-Santa Rosa).

For more information, please contact the DOH-Santa Rosa Epidemiology Program at 850-983-5200.

## **CDC STANDARD PRECAUTIONS FOR INFECTION CONTROL**

The following standard precautions measures replace the old universal precaution system in the recently finalized patient isolation guidelines by the Centers for Disease Control and Prevention. Key tenets of the new standard infection control precautions are summarized as follows:

**HANDWASHING** – Wash hands after touching blood, body fluids, secretions, excretions and contaminated items, whether or not gloves are worn. Wash hands immediately after gloves are removed, between patient contacts and when otherwise indicated to avoid transfer of microorganisms to the other patients or environments. It may be necessary to wash hands between tasks and procedures on the same patient to prevent cross contamination of different body sites. Use a plain, non-antimicrobial soap for routine hand washing. Use an antimicrobial agent or a waterless antiseptic agent for specific circumstances such as outbreaks.

**GLOVES** – Wear clean, non-sterile gloves when touching blood, body fluids, secretions, excretions and contaminated items. Put on clean gloves just before touching mucous membranes and non-intact skin. Change gloves between tasks and procedures on the same patient after contact with material that may contain a high concentration of microorganisms. Remove gloves promptly after use, before touching non-contaminated items and environmental surfaces and before going to another patient, wash hands immediately to avoid transfer of microorganisms to other patients or environments.

**MASKS, EYE PROTECTION, FACE SHIELDS** – Wear a mask and eye protection or a face shield to protect mucous membranes of the eyes, nose and mouth during procedures and patient care activities that are likely to generate splashes or sprays of blood, body fluids, secretions and excretions.

**APRONS/GOWNS** – Wear a clean, non-sterile apron or gown to protect skin and to prevent soiling of clothing during procedures and patient care activities that are likely to generate splashes or sprays of blood, body fluids, secretions or excretions. Select a gown or apron appropriate for the activity and amount of fluid likely to be encountered. Remove a soiled gown or apron as promptly as possible and wash hands to avoid transfer of microorganisms to other patients or environments.

**PATIENT CARE EQUIPMENT** – Handle used patient care equipment soiled with blood, body fluids, secretions and excretions in a manner that prevents skin and mucous membrane exposures, contamination of clothing and transfer of microorganisms to other patients and environment. Ensure that reusable equipment is not used for the care of another patient until it has been cleaned and reprocessed appropriately. Make sure single-use items are discarded properly.

**LINEN** – Handle transports and process used linen soiled with blood, body fluids, secretions and excretions in a manner that prevents skin and mucous membrane exposures and contamination of clothing and that avoids transfer of microorganisms to other patients and environments.

**OCCUPATIONAL HEALTH AND BLOODBORNE PATHOGENS** – Take care to prevent injuries when using needles, scalpels and other sharp instruments or devices; when handling sharp instruments after procedures; when cleaning used instruments; and when disposing of used needles. Never recap used needles or otherwise manipulate them using both hands, or use any other technique that involves directing the point of a needle toward any part of the body. Instead use either a non-handed “scoop” technique or a mechanical device designed for holding the needle sheath. Do not remove used needles from disposable syringes by hand and do not bend, break or otherwise manipulate used needles by hand. Place used disposable syringes and needles, scalpel blades and other sharp items in appropriate puncture-resistant containers, which are located as close as practical to the area in which the items were used. Use mouthpieces, resuscitation bags or other ventilation

devices as an alternative to mouth-to-mouth resuscitation methods in areas where the need for resuscitation is predictable.

For more information, please contact the Florida Department of Health in Santa Rosa County at 850-983-5200.

References: 1. Centers for Disease Control and Prevention. Hospital Infection Control Practices Advisory Committee. Guidelines for isolation precautions in hospitals. *Infection Control Hosp Epidemiology* 1996; 17:53-80.

## COHORTING

Cohorting is a term used to describe grouping sick individuals of like illness with caregiver(s) apart from the well individuals. It should only be done under the direction of the Florida Department of Health in Santa Rosa County (DOH-Santa Rosa).

Cohorting is an effective way to provide continuing childcare during outbreaks. Individuals will be cohorted and released from the cohort area only under the direction of the Santa Rosa County Health Department based on the disease in question and necessary control measures.

- Provide separate classroom/room.
- Provide separate restroom facilities.
- Provide separate eating facilities.

(Note: Do not allow ill students in the common eating area, even if well students are not there, unless the eating and serving areas are **totally** disinfected after each feeding.)

- Frequent hand washing and other sanitation measures implemented by the DOH-Santa Rosa.
- Surfaces and toys should be sanitized frequently.

At the end of the outbreak, as declared by the DOH-Santa Rosa, the room, furniture, and fixtures should be terminally disinfected.

*A one-part bleach to nine-parts water solution is the recommended agent for sanitization purposes, because it has a short kill time (3-5 minutes) and works against common viruses and bacteria.*

As a reminder under Section 381.0031, Florida Statutes, and Chapter 64-3.029, Florida Administrative Code, all cases of reportable disease and all outbreaks (two or more related cases) of both reportable and non-reportable disease in all settings, are reportable to the Florida Department of Health in Santa Rosa County Epidemiology Program at 850-983-5200. This is done for the purposes of epidemiologically-based intervention and education.

# Reportable Diseases/Conditions in Florida

## Practitioner List (Laboratory Requirements Differ)

Effective June 4, 2014



Did you know that you are required\* to report certain diseases to your local county health department (CHD)?

You are an invaluable part of disease surveillance in Florida!

Please visit <http://floridahealth.gov/diseasereporting> for more information. To report a disease or condition, contact your local CHD epidemiology program (<http://floridahealth.gov/chdepcontact>). If unable to reach your CHD, please call the Bureau of Epidemiology at (850) 245-4401.

- ! Report immediately 24/7 by phone upon initial suspicion or laboratory test order
- 📞 Report immediately 24/7 by phone
- Report next business day
- + Other reporting timeframe

<ul style="list-style-type: none"> <li>! Outbreaks of any disease, any case, cluster of cases, or exposure to an infectious or non-infectious disease, condition, or agent found in the general community or any defined setting (e.g., hospital, school, other institution) not listed that is of urgent public health significance</li> <li>+ Acquired immune deficiency syndrome (AIDS)</li> <li>📞 Amebic encephalitis</li> <li>! Anthrax</li> <li>• Arsenic poisoning</li> <li>• Arboviral diseases not otherwise listed</li> <li>! Botulism, foodborne, wound, and unspecified</li> <li>• Botulism, infant</li> <li>! Brucellosis</li> <li>• California serogroup virus disease</li> <li>• Campylobacteriosis</li> <li>+ Cancer, excluding non-melanoma skin cancer and including benign and borderline intracranial and CNS tumors</li> <li>• Carbon monoxide poisoning</li> <li>• Chancroid</li> <li>• Chikungunya fever</li> <li>📞 Chikungunya fever, locally acquired</li> <li>• Chlamydia</li> <li>! Cholera (<i>Vibrio cholerae</i> type O1)</li> <li>• Ciguatera fish poisoning</li> <li>+ Congenital anomalies</li> <li>• Conjunctivitis in neonates &lt;14 days old</li> <li>• Creutzfeldt-Jakob disease (CJD)</li> <li>• Cryptosporidiosis</li> <li>• Cyclosporiasis</li> <li>• Dengue fever</li> <li>📞 Dengue fever, locally acquired</li> <li>! Diphtheria</li> <li>• Eastern equine encephalitis</li> <li>• Ehrlichiosis/anaplasmosis</li> <li>• <i>Escherichia coli</i> infection, Shiga toxin-producing</li> <li>• Giardiasis, acute</li> <li>! Glanders</li> <li>• Gonorrhea</li> </ul>	<ul style="list-style-type: none"> <li>• Granuloma inguinale</li> <li>! <i>Haemophilus influenzae</i> invasive disease in children &lt;5 years old</li> <li>• Hansen's disease (leprosy)</li> <li>📞 Hantavirus infection</li> <li>📞 Hemolytic uremic syndrome (HUS)</li> <li>📞 Hepatitis A</li> <li>• Hepatitis B, C, D, E, and G</li> <li>• Hepatitis B surface antigen in pregnant women or children &lt;2 years old</li> <li>📞 Herpes B virus, possible exposure</li> <li>• Herpes simplex virus (HSV) in infants &lt;60 days old with disseminated infection and liver involvement; encephalitis; and infections limited to skin, eyes, and mouth; anogenital HSV in children &lt;12 years old</li> <li>+ Human immunodeficiency virus (HIV) infection</li> <li>• HIV, exposed infants &lt;18 months old born to an HIV-infected woman</li> <li>• Human papillomavirus (HPV), associated laryngeal papillomas or recurrent respiratory papillomatosis in children &lt;6 years old; anogenital papillomas in children &lt;12 years old</li> <li>! Influenza A, novel or pandemic strains</li> <li>📞 Influenza-associated pediatric mortality in children &lt;18 years old</li> <li>• Lead poisoning</li> <li>• Legionellosis</li> <li>• Leptospirosis</li> <li>📞 Listeriosis</li> <li>• Lyme disease</li> <li>• Lymphogranuloma venereum (LGV)</li> <li>• Malaria</li> <li>! Measles (rubeola)</li> <li>! Melioidosis</li> <li>• Meningitis, bacterial or mycotic</li> <li>! Meningococcal disease</li> <li>• Mercury poisoning</li> <li>• Mumps</li> <li>+ Neonatal abstinence syndrome (NAS)</li> <li>📞 Neurotoxic shellfish poisoning</li> <li>📞 Pertussis</li> <li>• Pesticide-related illness and injury, acute</li> </ul>	<ul style="list-style-type: none"> <li>! Plague</li> <li>! Poliomyelitis</li> <li>• Psittacosis (ornithosis)</li> <li>• Q Fever</li> <li>📞 Rabies, animal or human</li> <li>! Rabies, possible exposure</li> <li>! Ricin toxin poisoning</li> <li>• Rocky Mountain spotted fever and other spotted fever rickettsioses</li> <li>! Rubella</li> <li>• St. Louis encephalitis</li> <li>• Salmonellosis</li> <li>• Saxitoxin poisoning (paralytic shellfish poisoning)</li> <li>! Severe acute respiratory disease syndrome associated with coronavirus infection</li> <li>• Shigellosis</li> <li>! Smallpox</li> <li>📞 Staphylococcal enterotoxin B poisoning</li> <li>📞 <i>Staphylococcus aureus</i> infection, intermediate or full resistance to vancomycin (VISA, VRSA)</li> <li>• <i>Streptococcus pneumoniae</i> invasive disease in children &lt;6 years old</li> <li>• Syphilis</li> <li>📞 Syphilis in pregnant women and neonates</li> <li>• Tetanus</li> <li>• Trichinellosis (trichinosis)</li> <li>• Tuberculosis (TB)</li> <li>! Tularemia</li> <li>📞 Typhoid fever (<i>Salmonella</i> serotype Typhi)</li> <li>! Typhus fever, epidemic</li> <li>! Vaccinia disease</li> <li>• Varicella (chickenpox)</li> <li>! Venezuelan equine encephalitis</li> <li>• Vibriosis (infections of <i>Vibrio</i> species and closely related organisms, excluding <i>Vibrio cholerae</i> type O1)</li> <li>! Viral hemorrhagic fevers</li> <li>• West Nile virus disease</li> <li>! Yellow fever</li> </ul>
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\*Section 381.0031 (2), *Florida Statutes* (F.S.), provides that "Any practitioner licensed in this state to practice medicine, osteopathic medicine, chiropractic medicine, naturopathy, or veterinary medicine; any hospital licensed under part I of chapter 395; or any laboratory licensed under chapter 483 that diagnoses or suspects the existence of a disease of public health significance shall immediately report the fact to the Department of Health." Florida's county health departments serve as the Department's representative in this reporting requirement. Furthermore, Section 381.0031 (4), F.S. provides that "The department shall periodically issue a list of infectious or noninfectious diseases determined by it to be a threat to public health and therefore of significance to public health and shall furnish a copy of the list to the practitioners..."