

Controlling Communicable Disease in the Child Care Setting



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Chickenpox (Varicella)

caused by varicella-zoster virus

Signs and Symptoms	Rash illness with blister-like, fluid-filled (vesicular) lesions occurring in groups, that form crusts and eventually fall off; usually accompanied by fever, malaise and mild respiratory symptoms.
Incubation	10–21 days (usually 14–16 days)
Contagious Period	1–2 days before rash onset until crusting of all lesions.
Mode of Transmission	Person to person by direct contact with vesicular fluid, may be airborne via mouth or nose droplets from coughing or sneezing.
Management of Other Children	When exposed, consult with the local health department. Contacts who are not fully immunized should receive age appropriate varicella vaccine or varicella-zoster immune globulin as soon as possible after exposure.
When to Exclude a Child	Case should be excluded until rash has dried and crusted completely.
Vaccine Requirements	Immunization with varicella-zoster vaccine is required for all children aged ≥12 months who attend child care or school.
Reporting Requirements	Breakthrough illness (disease after being vaccinated) and multiple cases of chickenpox must be reported to your local health department.
Remarks	Immunosuppressed children who are susceptible may develop severe disease.

E. coli, including Shiga toxin-producing *E. coli* (STEC)

caused by toxin-producing strains of *E. coli*, a bacterium

Signs and Symptoms	Mild or severe diarrhea (which may be watery or bloody), abdominal pain, sometimes fever.
Incubation	1–10 days (usually 3–4 days)
Contagious Period	As long as organism is present in stool.
Mode of Transmission	Person-to-person transmission by exposure to feces during diapering or toileting, ingestion of contaminated food/water, contact with animal feces or contaminated surfaces.
Management of Other Children	Symptomatic children should be seen by a health-care provider for stool testing. Encourage careful hand washing by all staff. Institute supervised hand washing for all children. Avoid water play or other recreational water usage.
When to Exclude a Child	Exclude child until asymptomatic and two negative stool tests taken 24 hours apart, unless a cohorting plan has been approved by the local health department.
Vaccine Requirements	There is currently no vaccine available for this disease.
Reporting Requirements	Must be reported to your local health department.
Remarks	<i>E. coli</i> O157:H7 is the most frequently diagnosed STEC strain. Hemolytic uremic syndrome (HUS) is a life-threatening complication of STEC infection that occurs most commonly in children <5 years of age.

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Fifth Disease (Erythema Infectiosum) caused by parvovirus B19

Signs and Symptoms	Intensely red facial rash (“slapped-cheek” appearance). Lace-like rash proceeding from trunk to arms, buttocks, and thighs. Fever is not common.
Incubation	4–21 days
Contagious Period	Until the rash appears (usually 1–7 days before rash onset).
Mode of Transmission	Direct contact with respiratory secretions of an infected person. Exposure to blood or blood products.
Management of Other Children	Watch for symptoms. Encourage careful hand washing by all children and staff. Teach children and staff to properly cover their noses and mouths when coughing and sneezing.
When to Exclude a Child	Children with Fifth Disease need not be excluded as the infectious period precedes the rash.
Vaccine Requirements	There is currently no vaccine available for this disease.
Reporting Requirements	Report to your local health department only if multiple cases occur.
Remarks	People with sickle cell disease and pregnant women are at risk for complications and should consult their healthcare provider if exposed.

Giardiasis (Beaver Fever) caused by Giardia, an intestinal parasite

Signs and Symptoms	Diarrhea (persistent or recurring), gas, stomach cramps, bloating, nausea and weight loss. Some infected children may show no symptoms.
Incubation	1–4 weeks, usually 7–10 days.
Contagious Period	Until Giardia cysts are no longer in stools.
Mode of Transmission	Person-to-person, transmission by exposure to feces during diapering or toileting or by ingestion of contaminated drinking water.
Management of Other Children	Symptomatic children should be tested and treated. Institute supervised hand washing for all children. Avoid water play or other recreational water usage.
When to Exclude a Child	Exclude the child until asymptomatic unless a cohorting plan has been approved by local health department.
Vaccine Requirements	There is currently no vaccine available for this disease.
Reporting Requirements	Must be reported to your local health department.
Remarks	

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Haemophilus influenzae type b (Hib) caused by Haemophilus influenzae serotype B, a bacterium

Signs and Symptoms	Hib is a severe infection. Symptoms vary, but may include fever, vomiting, skin infections, lethargy and stiff neck.
Incubation	Unknown
Contagious Period	Until treated with antibiotics for at least 24 hours.
Mode of Transmission	Direct contact with respiratory secretions of an infected person.
Management of Other Children	When exposed, watch for symptoms. For this reportable disease consult local health department and primary health-care provider regarding need for antibiotic treatment.
When to Exclude a Child	Child should be excluded until treatment with antibiotics is completed and child is cleared by health-care provider.
Vaccine Requirements	Immunization with Hib vaccine is required for all children aged ≥ 2 months who attend child care.
Reporting Requirements	Must be immediately reported to your local health department by phone.
Remarks	Complications may include meningitis, epiglottitis, septic arthritis, osteomyelitis, pericarditis, cellulitis and pneumonia.

Hand, Foot and Mouth Disease (Coxsackie Virus) caused by coxsackie A16 virus

Signs and Symptoms	Generally, a mild illness with a blister-like rash on the hands, feet and/or mouth. A low-grade fever, poor appetite and sore throat may also occur.
Incubation	3–6 days
Contagious Period	When the first symptoms appear until the lesions disappear. Viral shedding may occur for several weeks in stool.
Mode of Transmission	Direct contact with droplets from nose and throat discharges of infected people. It can also be spread by exposure to feces during diapering or toileting.
Management of Other Children	Encourage careful hand washing by all children and staff, especially after diaper changing or toileting. Coughs should be covered and used tissues promptly discarded
When to Exclude a Child	Exclude child until fever is gone and child is able to participate in normal activities; skin lesions may still be present.
Vaccine Requirements	There is currently no vaccine available for this disease.
Reporting Requirements	Must be reported to your local health department.
Remarks	Most adults are immune.

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Hepatitis A caused by hepatitis A virus	
Signs and Symptoms	A liver infection with abrupt onset of fever, malaise, abdominal pain, fatigue and poor appetite, followed by jaundice (yellowing of skin or whites of eyes). Young children may show few or no signs/symptoms.
Incubation	15–50 days (usually 25–30 days)
Contagious Period	From 2 weeks before onset through the first week of symptoms.
Mode of Transmission	Person-to-person, transmission by exposure to feces during diapering or toileting or by ingesting contaminated foods prepared by an infected person.
Management of Other Children	All children in the classroom should receive either immune globulin shots or hepatitis A vaccine (if child aged ≥12 months) within 2 weeks of exposure. Encourage careful hand washing by all children and staff, especially after diaper changing.
When to Exclude a Child	Exclude child for 1 week after onset of illness and after all contacts have received vaccine or immune globulin as recommended.
Vaccine Requirements	All children should receive 2 doses of hepatitis A vaccine between 12–23 months of age. Catch-up vaccination for unvaccinated children ages 2–18 years is recommended.
Reporting Requirements	Must be reported to your local health department.
Remarks	

Hepatitis B caused by hepatitis B virus	
Signs and Symptoms	A liver infection with fever, malaise, abdominal pain, fatigue, poor appetite, nausea, vomiting and arthritis, followed by jaundice (yellowing of skin or whites of eyes). Infected persons may show few or no signs/symptoms.
Incubation	6 weeks to 6 months with an average of 90 days for acute infection
Contagious Period	As long as virus is present in the blood of the infected person (can be for the lifetime of the infected individual).
Mode of Transmission	Person-to-person transmission by exposure to blood or body fluids or exposure to contaminated surfaces.
Management of Other Children	Ensure vaccinations are up-to-date. Follow local health department recommendations regarding treatment of contacts.
When to Exclude a Child	Children with known hepatitis B infection need only be excluded if they exhibit weeping sores that cannot be covered, a bleeding problem, biting or scratching behavior that would lead to bleeding by the child with hepatitis B, or generalized dermatitis that may produce wounds or weepy tissue fluids.
Vaccine Requirements	Immunization with 3 doses of hepatitis B vaccine is required for all children who attend child care or school.
Reporting Requirements	Must be reported to your local health department.
Remarks	Risk of hepatitis B transmission in child care and school settings is low. Hepatitis B virus can remain contagious on surfaces for 7 days. Sanitize surfaces that may have been contaminated with blood, bloody fluids or other body fluids using a dilute bleach solution.

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Impetigo

caused by *Staphylococcus* (“Staph”) or *Streptococcus* (“Strep”) bacteria

Signs and Symptoms	A skin infection that is usually red and tender with blisters, pimples and/or honey-colored crusted sores and/or pus.
Incubation	1–10 days
Contagious Period	Until sores are healed or person has been treated with antibiotics for 24 hours.
Mode of Transmission	Person-to-person transmission by direct contact with an infected person or from contaminated surfaces.
Management of Other Children	Minimize skin contact among children. Encourage careful hand washing by all children and staff.
When to Exclude a Child	CASE: Exclude until topical, oral or other systemic antibiotics are started if the sores can be covered and kept dry. CONTACTS: Other children with symptoms should be referred to their health-care provider.
Vaccine Requirements	There is currently no vaccine available for this disease.
Reporting Requirements	Report to your local health department only if multiple cases occur.
Remarks	

Influenza (Flu)

caused by influenza virus

Signs and Symptoms	An infection with sudden onset of fever, chills, headache, malaise, myalgia and nonproductive cough. Sore throat, nasal congestion, abdominal pain, nausea, and vomiting can occur especially in children.
Incubation	1–4 days, average of 2 days
Contagious Period	1–2 days before to within 7 days after onset of symptoms but can be prolonged in young or immunosuppressed children.
Mode of Transmission	Person-to-person transmission by direct contact with airborne respiratory droplets; highly contagious.
Management of Other Children	Encourage careful hand washing by all children and staff. Coughs and sneezes should be covered and tissues promptly discarded. Annual immunization of all persons aged ≥6 months is recommended. Refer exposed high-risk children and staff to their health-care provider.
When to Exclude a Child	Exclude child until fever resolved for ≥24 hours.
Vaccine Requirements	Annual immunization with influenza vaccine is recommended for all persons aged ≥6 months.
Reporting Requirements	Report to your local health department only if multiple cases occur.
Remarks	Consult local/state health department or CDC materials for high risk definitions.

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Measles (Rubeola) caused by measles virus

Signs and Symptoms	A serious illness with fever, runny nose, cough, conjunctivitis and a rash lasting more than 3 days.
Incubation	7–18 days (usually 8–12 days)
Contagious Period	4 days before to 4 days after onset of rash.
Mode of Transmission	Person-to-person transmission through respiratory secretions or exposure to contaminated surfaces; highly contagious.
Management of Other Children	Consult with the local health department immediately. Contacts who are not fully immunized should be vaccinated within 72–96 hours with age appropriate measles-mumps-rubella (MMR) vaccine or immune globulin (IG).
When to Exclude a Child	CASE: Child should be excluded until 4 days after the onset of the rash. CONTACTS: Exclude unvaccinated children until 21 days after the onset of the rash in the last case of measles.
Vaccine Requirements	Immunization with the measles mumps-rubella (MMR) vaccine is required for all children aged ≥ 12 months who attend child care or school.
Reporting Requirements	Must be immediately reported to your local health department by phone.
Remarks	Complications may be serious and result in hospitalization, pneumonia, brain inflammation, convulsions, deafness, mental retardation or death.

Meningococcal Disease caused by *Neisseria meningitidis*, a bacterium

Signs and Symptoms	A severe infection with abrupt onset of vomiting, fever, headache, stiff neck and occasionally rash. Usually presents as meningitis.
Incubation	1–10 days (usually 3–4 days)
Contagious Period	Until treated with antibiotics for at least 24 hours.
Mode of Transmission	Direct contact with respiratory secretions of an infected person.
Management of Other Children	Consult with the local health department. Family members and other close contacts should receive antibiotic prophylaxis. Antibiotics may be recommended for classroom contacts.
When to Exclude a Child	Case should be excluded as soon as meningococcal disease is suspected and may return once treated and cleared by a healthcare provider.
Vaccine Requirements	Meningococcal vaccine is routinely recommended for children aged 11–12 years with a booster at age 16. The vaccine may be recommended for certain high-risk children as young as 2 years.
Reporting Requirements	Must be immediately reported to your local health department by phone.
Remarks	Complications may include hearing loss, neurologic disability, digit or limb amputation, skin scarring and death.

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MRSA

caused by Methicillin-resistant (drug resistant) *Staphylococcus aureus*, a bacterium

Signs and Symptoms	Most MRSA infections are skin infections that may appear as pustules or boils which often are red, swollen, painful or have pus/other drainage.
Incubation	Unknown
Contagious Period	As long as organism is present.
Mode of Transmission	Direct skin-to-skin contact. Contact with contaminated items, such as a towels, clothing or toys.
Management of Other Children	Encourage careful handwashing by children and staff. Sores should be covered, and children and staff should avoid direct contact with soiled bandages.
When to Exclude a Child	Exclusion is not necessary for this condition if the infected skin can be kept covered with a clean, dry bandage. Children with open sores should be excluded from water play and sports or activities where skin-to-skin contact is likely until sores have healed.
Vaccine Requirements	There is currently no vaccine available for this disease.
Reporting Requirements	Report to your local health department only if multiple cases occur.
Remarks	Many people carry MRSA on their skin without developing an infection.

Mumps

caused by mumps virus

Signs and Symptoms	A viral illness with swelling of one or more of the salivary glands, most commonly the parotid (cheek) gland. Fever, sore throat and jaw pain are common.
Incubation	Range 12–25 days (usually 16–18 days)
Contagious Period	1–2 days before to 5 days after parotitis.
Mode of Transmission	Transmission occurs by contact with infected respiratory tract secretions.
Management of Other Children	Consult with the local health department. Recommendations may include vaccination or exclusion of unvaccinated contacts.
When to Exclude a Child	CASE: Exclude child until 5 days after parotitis. CONTACTS: Exclude unimmunized children for 26 days after the onset of parotitis in the last person with mumps.
Vaccine Requirements	Immunization with the measles mumps-rubella (MMR) vaccine is required for all children aged ≥12 months who attend child care or school.
Reporting Requirements	Must be reported to your local health department.
Remarks	Complications may include meningitis, abdominal pain, deafness, inflammation of joints and orchitis.

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Pediculosis (Head Lice) caused by *Pediculus capitis*, the head louse

Signs and Symptoms	Itching of the head, especially behind the ears and back of the head. Eggs (nits) can be detected on hair shaft.
Incubation	6–10 days from laying to hatching of eggs. It may take 2–3 weeks for a person to notice itching associated with infestation.
Contagious Period	As long as viable nits or lice are present.
Mode of Transmission	Direct head-to-head contact or indirect via infested belongings (hats, combs, brushes). Crowded clothing storage areas may facilitate transmission.
Management of Other Children	Close contacts should be checked for infection. Infested persons should receive 2 applications (7–10 days apart) of a pediculicidal medicine. Parents should be encouraged to remove all nits from the child’s scalp using a special comb.
When to Exclude a Child	Exclude the child until treatment is completed.
Vaccine Requirements	There is currently no vaccine available for this disease.
Reporting Requirements	Report to your local health department only if multiple cases occur.
Remarks	

Pertussis (Whooping Cough) caused by *Bordetella pertussis*, a bacterium

Signs and Symptoms	Begins with cold-like symptoms. Within 2 weeks, cough becomes more severe and is characterized by episodes of numerous rapid coughs followed by deep inspiration that mimics a high-pitched whoop. May cause vomiting, loss of breath and cyanosis. Symptoms more severe in children <1 year.
Incubation	Range 5–21 days (usually 7–10 days)
Contagious Period	From onset of symptoms to 21 days after cough begins or after 5 days of antibiotic treatment.
Mode of Transmission	Direct or close contact with mouth and nose secretions, possibly by direct hand contact with contaminated secretions.
Management of Other Children	Consult with the local health department for recommendations regarding treatment of contacts with antibiotics.
When to Exclude a Child	If treated with antibiotics, child may return after completion of 5 days of total 5- to 14-day antibiotic course.
Vaccine Requirements	Immunization with a pertussis containing vaccine is required for all children aged ≥2 months who attend child care or school.
Reporting Requirements	Must be reported to your local health department.
Remarks	Major complications are more common in infants and young children and may include hospitalization, apnea, pneumonia, seizures, generalized brain dysfunction and death.

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Pinkeye (Conjunctivitis) caused by various viruses or bacteria	
Signs and Symptoms	Red, itchy eyes with drainage which may be clear or contain pus; eyelids may become swollen or crusty.
Incubation	From 1–14 days but can vary.
Contagious Period	From when symptoms first appear until they disappear. For bacterial, until medication is started.
Mode of Transmission	Contact with discharges or surfaces contaminated with discharges from eye or upper respiratory tracts of infected person.
Management of Other Children	Watch for symptoms. Encourage careful hand washing by all children and staff. Sanitize shared objects and surfaces.
When to Exclude a Child	Exclude the child until symptoms have resolved or cleared by health-care provider.
Vaccine Requirements	There is currently no vaccine available for this disease.
Reporting Requirements	This disease is not reportable to your local health department.
Remarks	Cool compresses may help eye discomfort. Allergy is another cause of conjunctivitis, but is usually both eyes and manifests with watery eye drainage.

Pneumococcal Disease (Strep pneumo) caused by <i>Streptococcus pneumoniae</i> , a bacterium	
Signs and Symptoms	A severe infection with abrupt onset of fever, chills, cough, chest pain, dyspnea, tachypnea and hypoxia.
Incubation	1–3 days but can vary.
Contagious Period	Unknown, transmission can occur as long as organism appears in respiratory secretions.
Mode of Transmission	Person-to-person transmission occurs by contact with respiratory droplets.
Management of Other Children	With this reportable illness, follow local health department recommendations. Encourage careful hand washing by all children and staff. Be sure vaccinations, including pneumococcal and annual influenza, are up to date.
When to Exclude a Child	Child should be excluded until treated with antibiotics and symptoms have resolved.
Vaccine Requirements	Immunization with pneumococcal vaccine (Prevnar) is required for all children 2 months and older who attend child care.
Reporting Requirements	Must be reported to your local health department.
Remarks	Infection can lead to hospitalization, pneumonia, bacteremia, meningitis and death. Children less than 2 years of age, and children with sickle cell disease or HIV infection are at very high risk of invasive disease.

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<h2>Ringworm</h2> <p>caused by various skin fungi</p>	
Signs and Symptoms	On the body ringworm appears as flat spreading ring-shaped lesions. The edge may be dry and scaly, or moist and crusted. On the scalp ringworm appears as scaly dandruff-like areas and may cause hair loss. Mild redness and swelling may occur. Affected areas may be itchy.
Incubation	Unknown
Contagious Period	As long as infected lesions are present.
Mode of Transmission	Direct contact with lesions or via contact with contaminated belongings (shared combs, brushes, towels, clothing or bedding).
Management of Other Children	Watch for development of infection. Sharing combs, brushes, towels, clothing or bedding should be discouraged at all times.
When to Exclude a Child	Exclude the child at end of program or school day. Child may be readmitted once treatment has begun.
Vaccine Requirements	There is currently no vaccine available for this disease.
Reporting Requirements	Report to your local health department only if multiple cases occur.
Remarks	Infected hairs become brittle and break off easily. Oral and topical treatments are available.

<h2>Rubella (German Measles)</h2> <p>caused by rubella virus</p>	
Signs and Symptoms	In children, a mild rash illness usually with slight fever and swollen lymph nodes.
Incubation	Range 14–23 days (usually 16–18 days)
Contagious Period	7 days before to 14 days after the onset of rash.
Mode of Transmission	Airborne transmission of droplets from the nose or throat, direct contact with nose or throat secretions.
Management of Other Children	Consult with the local health department for recommendations. Unvaccinated children ≥12 months should receive the measles-mumps-rubella (MMR) vaccine, ideally within 72 hours of exposure.
When to Exclude a Child	CASE: Child should be excluded until 7 days after onset of rash. CONTACTS: Exclude unimmunized children until 21 days after the rash onset of the last reported case.
Vaccine Requirements	Immunization with the measles mumps- rubella (MMR) vaccine is required for all children aged ≥12 months who attend child care or school.
Reporting Requirements	Must be immediately reported to your local health department by phone.
Remarks	Rubella during pregnancy can result in miscarriage, fetal death or congenital abnormalities.

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Salmonellosis

caused by *Salmonella*, a bacterium

Signs and Symptoms	Mild or severe diarrhea, abdominal cramps, fever and sometimes vomiting.
Incubation	6 hours–3 days
Contagious Period	As long as organism is present in the stool.
Mode of Transmission	Person-to-person transmission by exposure to feces during diapering or toileting, ingestion of contaminated food/water, contact with animal feces or contaminated surfaces.
Management of Other Children	Symptomatic children should be seen by a health-care provider for stool testing. Encourage careful hand washing by all staff. Institute supervised hand washing for all children. Avoid water play or other recreational water usage.
When to Exclude a Child	Exclude diapered children if stool is not contained in the diaper or diarrhea is causing accidents for toilet-trained children. Children must be cleared by a health-care provider for readmission.
Vaccine Requirements	There is currently no vaccine available for this disease.
Reporting Requirements	Must be reported to your local health department.
Remarks	Younger children and the immunosuppressed tend to shed <i>Salmonella</i> in stool longer. Antibiotics are usually not necessary. Animals of particular concern for transmitting <i>Salmonella</i> include young ruminants (cows, goats, sheep), young poultry, reptiles, amphibians and ill animals.

Scabies

caused by *Sarcoptes scabiei*, a type of mite

Signs and Symptoms	Itchy skin rash commonly seen in skin folds that is more intense at night. Burrows may occasionally be seen and are indicative of scabies.
Incubation	4–6 weeks (1–4 days in persons previously infested)
Contagious Period	As long as person remains infested and untreated.
Mode of Transmission	Direct skin-to-skin contact or sharing of personal items (bedding, towels or clothing).
Management of Other Children	Treatment of exposed children should be concurrent to avoid reinfestation.
When to Exclude a Child	Exclude child until treatment is completed.
Vaccine Requirements	There is currently no vaccine available for this disease.
Reporting Requirements	Report to your local health department only if multiple cases occur.
Remarks	

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Shigellosis caused by <i>Shigella</i> , a bacterium	
Signs and Symptoms	Mild or severe diarrhea, sometimes with traces of blood or mucous in stool. Fever and abdominal pain may also be present.
Incubation	1–7 days (usually 2–4 days)
Contagious Period	As long as organism is present in stool (up to 4 weeks).
Mode of Transmission	Person-to-person transmission by exposure to feces during diapering, toileting, eating or contact with contaminated objects.
Management of Other Children	Encourage careful hand washing by all staff. Supervised hand washing for all children must be followed. Avoid water play or other recreational water usage.
When to Exclude a Child	CASE: Exclude child until treatment completed and two negative stool tests taken 24 hours apart, unless a cohorting plan has been approved by the local health department. CONTACTS: Symptomatic children should be excluded and tested.
Vaccine Requirements	There is currently no vaccine available for this disease.
Reporting Requirements	Must be reported to your local health department.
Remarks	

Streptococcal Infection (Strep Throat, Scarlet Fever) caused by group A beta hemolytic <i>Streptococcus</i> , a bacterium	
Signs and Symptoms	Sudden onset of headache, fever, sore throat, sometimes accompanied by rash. Scarlet Fever is characterized by a skin rash that often appears as fine, red bumps that feel like sandpaper on the neck, chest, groin and/or inner surface of knees, thighs and elbows.
Incubation	2–5 days
Contagious Period	As long as organism is present in the nose or throat.
Mode of Transmission	Direct contact with oral secretions from case or carrier.
Management of Other Children	Any child with sore throat or fever should be referred for medical attention. Encourage handwashing by all children and staff.
When to Exclude a Child	Exclude child until treated with antibiotics for 24 hours.
Vaccine Requirements	There is currently no vaccine available for this disease.
Reporting Requirements	Must be reported to your local health department only if multiple cases occur.
Remarks	

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