Child Care Provider Communicable Disease and Health Promotion Manual

Revised 2015

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YWCA of Lake County

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General Information

Important Phone Numbers

Child Care Nurse Consultant	(847) 377-8164
Communicable Disease Program	(847) 377-8130
Child and Family Connections (EI Services)	(847) 377-8900
Immunization Program	(847) 377-8470
Lead Program	(847) 377-8128
Tuberculosis Program	(847) 377-8700
YWCA Lake County	(847) 662-4247

Overhead 2

The Morning Health Check

Signs to Observe

- General mood and changes in behavior
- Fever or elevated body temperature
- Skin rashes, unusual spots, swelling or bruises
- Complaints of pain and not feeling well
- Signs/symptoms of disease (severe coughing, sneezing, breathing difficulties, discharge from nose, ears or eyes, diarrhea, vomiting etc.)
- Reported illness in child or family members

Use all of your senses . . .

- **LOOK** - for signs
- **LISTEN** - for complaints
- **FEEL** - for fever
- **SMELL** - for unusual odor

Daily Health Check

What is it?

The Daily Health Check is a quick way for parents and child care providers to check for a change in a child's health and well-being. Does the child act differently from usual? Does the child look different from usual? Doing the Daily Health Check can help prevent illness and disease from entering a child care facility.

Why do it?

A Daily Health Check on all children entering child care helps the caregivers establish what is normal for each child and what is abnormal for each child. It also provides a wonderful opportunity to transition the children into child care. The sooner sick children are identified, the sooner their health needs can be addressed. Early identification of illness in children can also reduce the spread of illness or disease.

Who does it?

Caregivers do the Daily Health Check, using a checklist. Child care health consultants can provide training on the Daily Health Check for the caregivers. The caregiver should perform the Daily Health Check in a relaxed and comfortable manner that respects the family's culture as well as the child's body and feelings.

When to do it?

Caregivers should perform the Daily Health Check when a child first arrives at the child care facility and when the parent is still present. It can be repeated periodically throughout the day as necessary. (National Health and Safety Performance Standard 3.001*)

How is it done?

Start by getting on the child's eye level. Then

LOOK – **for signs** and symptoms of illness

- Changes in mood or behavior
- Change in activity or energy level, listlessness or difficulty moving
- Runny nose or eyes, drainage from open sores
- Skin changes such as a rash, swelling, bumps or redness
- Scratching, tugging at a part of the body or holding a body part

LISTEN – **for complaints** and unusual sounds from the child that might indicate they are not feeling well. Listen to what a parent shares about the child or other illness in the family.

- Groans
- Continual crying or unusual fussiness
- Wheezing, sneezing, labored breathing
- Hoarseness
- Coughing

FEEL – **for a change in the skin** that might indicate a fever or dehydration.

- Moistness
- Unusual warmth
- Skin does not spring back when slightly pinched

SMELL – **for unusual odors** that might indicate an underlying disease

- Fruity sweet breath
- Foul breath
- Unusual urine or bowel movement odors

Daily Health Check

Checklist – a head to toe check	No	Yes, comments
Shows a change in behavior or mood: less active, less energy, more sleepy, easily irritated		
Looks different from normal		
Complains of not feeling well		
Has itchy skin or scalp		
Is pulling at ear		
Has drainage from the eyes		
Has a runny nose		
Is coughing severely		
Has skin rash or discoloration		
Has drainage from an open sore		
Has unusually warm skin		
Eating or drinking more or less than usual		
Is vomiting		
Has abnormal stools: white bowel movement, gray bowel movement, diarrhea or unusual odor		
Is not urinating		
Is off balance or walks unevenly		

If the answer is "yes" to any of these questions, the child may be ill.

At the beginning of the day when the parent is still at the facility, caregivers and parents can decide together on a plan of action to support the child's health. If the child needs to be excluded from care the parent can leave with the child and tend to the child's health needs.

If the child becomes ill during the day, the caregiver should notify the child's parents and decide together on how to care for the child. Children who are ill or contagious must be excluded from child care based on the NC Child Care Rules .0804 and .1720(b). Parents may need to consult the child's health care provider before a child can return to child care.

Any time child abuse or neglect is suspected, a report must be filed with DSS.

*American Academy of Pediatrics, American Public Health Association, National Resource Center for Health and Safety in Child Care. Caring For Our Children National Health and Safety Performance Standards: Guidelines for Out-of-home Child Care Programs Second Edition. 2002.

Reference:

Morning Health Check. California Childcare Health Program. Retrieved 10/28/2005 from www.ucsfchildcarehealth.org/pdfs/posters/BWMorningCheckEN.pdf

The development and translation of the Daily Health Check Poster are supported by funding from the Child Care and Development Fund Block Grant of the Child Care Bureau, Administration on Children and Families, USDHHS, hrough a contract between the NC Division of Child Development, NCDHHS, and the Department of Maternal and Child Health, Gillings School of Global Public Health, The University of North Carolina at Chapel Hill.

Revised June 2011

Healthy Day Care Providers

Many day care providers get sick frequently, particularly when first starting to work, because they are exposed to a wider variety of infectious diseases. Administrators should encourage providers to take care of themselves. Healthy providers are the key to having a healthy happy child care experience.

To stay healthy remember the importance of:

- Hand washing
- Good Nutrition
- Regular Exercise
- Sufficient sleep
- Stay current with immunizations
- Take Scheduled breaks and vacations
- Have a hobby

Providers who are ill should only be taking care of themselves. A sick provider is spreading an illness and not able to give quality care.

Health Alert: Child Care Provider is Ill

Date: _____

Dear Parent or Guardian:

Child Care Providers on occasion become ill and need to take care of their own health as well as prevent the spread of communicable disease to the children in their care. At this time your provider must close the child care in order to do this. You understand that this is important for the health and safety of the children and you as well. Your child care will be closed until _____.

Thank you for your concern and understanding.

Plan for back up care:

Consider who will be able to provide back up care for your child when your primary child care provider is ill.

Ask your child care provider for suggestions to call about back up care.

Ask other parents of children in your child care for suggestions for back up care.

Make arrangements in advance with more than one person to provide back up care for your child.

Save leave time from your job to be able to care for your own child if you are unable to identify back up child care.

Communicable Disease issues, if present

____ Illness is not communicable.

____ See attached communicable disease health alert.

____ Please call to speak with me about this.

Prevention and Controlling the Spread:

These are the things that you can do to prevent any spread of communicable disease:

1. _____

2. _____

3. _____

Spread of Disease

Respiratory

Hand washing and cleanliness in the program are essential. You should:

- Ensure that staff and children wash their hands after wiping or blowing noses; after contact with any fluids from nose, throat, or eye; and before preparing or eating food.
- Not allow food or eating utensils to be shared.
- Wash and disinfect any mouthed toys and frequently used surfaces (such as tables) at least once daily.
- Wash eating utensils carefully in hot, soapy water; then disinfect and air dry. Use a dishwasher whenever possible.
- Use disposable cups whenever possible; when reusable cups must be used, wash them in hot, soapy water after each use.
- Air out the facility daily, even in winter, and encourage outdoor play.
- Teach children and staff to cough or sneeze into their elbow. If they sneeze or cough into a hand or tissue, they must properly dispose of the tissue and wash their hands.
- Wipe runny noses and eyes promptly, and wash hands afterwards.
- Use disposable towels/tissues.
- Dispose of towels/tissues contaminated with fluids from nose, throat or eye in a covered container with a plastic liner. Keep them away from food and materials used in child care.
- Do not kiss on the lips; instead give big hugs or kisses on the forehead.

California Child Care Health Program

Spread of Disease

Direct contact

How to Reduce the Spread of Illnesses through Direct or Indirect Contact

To reduce the spread of superficial skin infections, follow these hand washing and cleanliness guidelines:

- Make sure staff and children wash their hands after contact with any body fluids. Wear disposable gloves when possible.
- Use free-flowing water for hand washing, if possible. Do not use basins or stoppered sinks, which can become contaminated with the germs.
- Use liquid soap dispensers whenever possible.
- Always use disposable tissues or towels for wiping and washing.
- Never use the same tissue or towel for more than one child.
- Dispose of used tissues and paper towels in a lined, covered step can which is kept away from food and child care materials.
- Wash and disinfect toys at least daily. Wash or vacuum frequently used surfaces (tables, counters, furniture and floors) in the program daily.
- Make sure that each child has his/her own crib or mat and does not switch.
- Do not allow children to share personal items such as combs, brushes, blankets, pillows, hats or clothing.
- Store each child's dirty clothing separately in plastic bags and send it home for laundering
- Wash and cover sores, cuts or scrapes promptly and wipe away eye discharge.
- Report rashes, sores, running eyes and severe itching to the parent(s) so they can contact their health care provider(s).

California Child Care Health Program

Spread of Disease

Blood & Body Fluids

You should treat all blood and body fluids as if they are contagious. Always wear protective gloves when handling blood or body fluids containing blood. If gloves are not available, maintain a barrier between the blood and one's hand through the use of thick towels or gauze.

Prevention is critical! Transmission of illnesses spread through blood is very rare in the child care setting, and illnesses such as HIV/AIDS are not spread by casual, daily contact with infected persons. However, HIV can be transmitted where there is blood contact. For example:

A. Touching blood while giving first aid with hands or body surfaces that have cuts or open sores.

B. Collision accidents where the skin of both people is broken and blood is exchanged.

C. Cleaning up blood after an accident with hands that have cuts or open sores.

D. Biting. The only way blood-to-blood exchange can happen through biting is for the following events to occur:

1. There is an injury to the mouth of the biter.
2. The bite creates a wound so serious that the skin is broken and blood flows.
3. Blood is exchanged.
4. One of the children involved is infected with HIV.

California Child Care Health Program

Spread of Disease

Fecal Oral

Since children and staff who have digestive illnesses don't always feel sick or have diarrhea, the best method for preventing the spread of these diseases is to have a constant prevention program (universal precautions) in place at your program. The hepatitis A virus, rotavirus, and giardia lamblia cysts can all survive on surfaces for periods ranging from hours to weeks.

Practice the following:

- Strict enforcement of all hand washing for adults and children.
- Environmental sanitation with focus on diapering, toileting and food preparation areas.
- Exclusion guidelines: Excluded children and staff may come back after treatment and when the consistency of diarrhea improves and can be contained by the diaper or pants, or with approval of the child's health provider

California Child Care Health Program

Communicable Disease Guide
Letter to Parents

LakeCounty

LAKE COUNTY HEALTH DEPARTMENT and COMMUNITY HEALTH CENTER

ILLINOIS REPORTABLE DISEASES

(Effective: February 11th, 2014)

Communicable Disease (CD) Program: Phone (847) 377-8130, Fax: (847) 984-5680, Pager (847) 389-4431

CLASS I A: THE FOLLOWING SHALL BE REPORTED IMMEDIATELY BY TELEPHONE OR WITHIN 3 HOURS:

Anthrax	***Diphtheria***	***Plague***	***SARS***
Botulism	***Influenza A, Variant Virus***	***Poliomyelitis***	***Smallpox***

-Any Suspected Bioterrorist (BT) Threat or Event (upon initial clinical suspicion of the disease).
-Any unusual case (disease or condition) caused by an Infectious Agent (Not listed in this Part) that is of Urgent Public Health significance.

CLASS I B: THE FOLLOWING SHALL BE REPORTED AS SOON AS POSSIBLE BY TELEPHONE OR WITHIN 24 HOURS:

Brucellosis (Immediate if suspect BT event)
Chicken Pox (all ages)
Cholera (Toxigenic Vibrio cholerae 01 or 0139)
Escherichia coli Infections (E. Coli 0157:H7 and other Shiga Toxins, Enterotoxigenic, Enteropathogenic and Enteroinvasive E. coli)
Group A Streptococcal (GAS), Invasive
Haemophilus Influenzae (Invasive)
Hantavirus Pulmonary Syndrome
Hemolytic Uremic Syndrome, post diarrheal
Hepatitis A
Influenza (confirmed) ICU Admissions
Measles
MRSA in infants <61 days old
MRSA Cluster (Two or more in Community setting)
Mumps
Neisseria Meningitidis, (Meningitis/invasive)
Outbreaks of Public Health Significance
Pertussis (Whooping Cough)
Q Fever (Immediate if suspect BT event)
Rabies, Human
Rabies, Potential Human Exposure
Rabies Positive Animals
Rubella (German Measles)
Smallpox (Vaccination complications)
Staphylococcus Aureus Infections with Intermediate (VISA) or High level resistance to Vancomycin (VRSA)
Tularemia (Immediate if suspect BT event)
Typhoid Fever
Typhus

CLASS II: THE FOLLOWING SHALL BE REPORTED AS SOON AS POSSIBLE BY TELEPHONE OR WITHIN 7 DAYS:

Arboviral Infections (Including but not limited to Chikungunya Fever, California & St. Louis Encephalitis, Dengue and West Nile Virus)
Creutzfeldt-Jakob Disease (CJD)
Cryptosporidiosis
Cyclosporiasis
Hantavirus
Hepatitis B and Hepatitis D (Acute and Carriers)
Histoplasmosis
Influenza Deaths <18 years of age
Legionnellosis
Leprosy (Hansen's Disease)
Leptospirosis
Listeriosis
Malaria
Psittacosis (Ornithosis)
Salmonellosis (other than Typhoid fever)
Shigellosis
Streptococcus Pneumoniae, Invasive < 5yrs old
Tetanus
Tick-borne Disease (Babesiosis, Ehrlichiosis Anaplasmosis, Lyme Disease and Spotted Fever Rickettsiosis)
Toxic Shock Syndrome (*Staphylococcus aureus*)
Trichinosis
Vibriosis (other than Vibrio cholera 01 or 0139)
Yersiniosis

P lease fax all "Laboratory Results" to the CD Program at (847)984-5680 for the above conditions

SEXUALLY TRANSMITTED INFECTIONS *(STI's)*
ARE TO BE REPORTED TO THE STI CLINIC
WITHIN 7DAYS TO:
Phone: (847) 377-8450 or Fax: (847) 360-2920

Acquired Immunodeficiency Syndrome (AIDS)
Chancroid
Chlamydia
Gonorrhea and Ophthalmia neonatorum (gonococcal)
HIV infection
Hepatitis C (Acute and Carriers)
Syphilis

Sexually transmitted diseases, if child <12, (HIV/AIDS, syphilis, gonorrhea, Chlamydia) report immediately or within 3 hours.

TUBERCULOSIS REPORTS OR INQUIRIES SHOULD BE MADE TO THE TB CLINIC AT:
Phone: (847) 377-8700 or Fax: (847) 984-5815

How to use these Fact Sheets and Health Alerts and Guidance on Health Notes

The Fact Sheet and Health Alert formats are generally interchangeable. The Health Alert could be used for a more urgent notice where you can customize the date and location. For a few of the topics where a note home would not be suggested (such as Hepatitis B) there is not a health alert format.

Did You Know?

There are a number of other fact sheets from recommended sources and websites such as those listed on our reference page. The first set of fact sheets and alerts were designed with the goal of an "eye-catching" format. The second set is a more formal, letter format.

Important Guidance on Letters and Notes Home to Parents, Students, and Staff Related to Health Topics or Alerts

-Notes home to parents and others on illness that are included in the Illinois Department of Public Health reportable disease code should not be sent home without first consulting the Lake County Health Department. There may be additional guidance or information that the Health Department needs to share with families so that they are aware of all of the factors involved in a particular disease response or control measures.

-Notes and letters home should be a part of a consistent written policy for your facility about parental/ family notification regarding illness and other important notices. We often suggest that for many of the common childhood illness your agency establishes a routine communication pattern, such as at the beginning of the year and at each 6-weeks period or quarterly or as seasonally appropriate for things such as influenza. This process may help parents stay informed without creating "information overload" that may be ignored when notes are sent home multiple times a common condition is reported.

-The methods used to communicate health information to families and staff should match the urgency of the situation or illness at hand. Capabilities and mechanisms for each school or childcare center may be different and include: posting notices, sending a letter home in hard copy, posting a notice on a website and sending an auto-dialer or automated phone message could all be utilized. The uniformity of message and timeframe in which the message should be delivered should be considered when choosing a method of delivery. The Health Department may also be able to offer guidance about the method of delivering the message.

-Notes and letters about health topics should be utilized in situations that would allow families to have increased awareness, take action to watch for signs and symptoms of illness, seek medical attention, avoid a particular hazard or mode of transmission of illness, or to begin or increase healthy behaviors or prevention measures.

-The privacy of potentially ill children or staff should be considered when sending letters and notifications that may lead to the revealing of the individual who is or may be ill. It is important that you do not share the identity or personal information of ill children or staff people. Staff or parents may choose to share this information with others, but notification about an illness should be done without revealing the ill person(s).

Animal Bites

Knowing the facts

Reptiles should not be kept as pets for children and should not be allowed in any child care program or school. Salmonella inhabits the gastrointestinal tracts of the reptiles. Contact with reptiles skin or environment may cause Salmonella in children

Did You Know?

Wild animals should not be kept in child care.

How is this spread?

Rabies is spread when the infected animal's saliva enters the bite site.
Bite infection could be spread by direct contact.

What are the symptoms?

An animal bite that punctures the skin has a chance of becoming infected. This should be evaluate by a doctor to see if antibiotics are needed.

Rabies is a very serious viral infection that infects the nervous system. It is usually transmitted by wild animal such as bats, raccoons, skunks and wolves. The greatest risk of rabies is when the animal is unimmunized and the bite was unprovoked. Preventive measures must be started immediately. Symptoms of rabies include anxiety, difficulty swallowing, seizures, and paralysis. Once these signs develop, rabies is nearly always a fatal disease.

How soon do symptoms appear?

It varies depending on the circumstances of the bite.

When and how long is a person able to spread this?

Bite infection could be spread until on antibiotics for at least 24 hours. Keep wound covered or as advised by physician.

What is the treatment for this?

Antibiotics may be used to prevent or address infection.
Bites of some animals may transmit rabies. Report all suspected exposure to rabies promptly to public health authorities and be sure health professionals are involved in deciding about appropriate treatment right away.

How do I prevent the spread?

-Immunize cats and dogs

-Avoid wild or stray animals.

Children should not touch any dead animals

Be Smart About Bats:
The Good, The Bad and The Ugly

Keep your community, family and pets safe from rabies.
Notify LCHD if you find or have contact with a bat.

The Good

- Some bats can eat up to 600 insects in an hour, including mosquitoes, damaging moths, beetles, and grasshoppers. Bats in tropical regions also help spread seeds and pollinate certain plants, helping keep forests growing and trees producing fruit.

The Bad

- Bats can often find their way into chimneys, gutters and basements.
- Exclude bats by covering chimneys, attics and vents with half-inch hardware cloth screens and by installing draft guards beneath doors, windows and plumbing.

The Ugly

- **In Lake County, bats are the only animals that have tested positive for rabies in over ten years.** Rabies is a highly infectious and fatal viral disease that affects the nervous system of humans and other mammals.
- **Never touch a bat, including those lying on the ground.** They may not be dead, just ill, and could bite.
- **Bats, like any wild animal, should be left alone and should never be held barehanded.** Always stay away from stray and wild animals.

- **Always vaccinate pet dogs and cats according to the law.**
- **If you notice a bat acting in an unusual manner, such as flying in daylight or lying on the ground or in your home, call (847) 949-9925.**
- If the bat is inside your house, do not chase it away because it may be needed for rabies testing. Close the doors and keep people away from the room where the bat is located.

Remember to be smart about bats and help keep your community, family and pets safe from rabies.

LakeCounty
Health Department and Community Health Center
Healthy people. Healthy choices. Healthy Lake County.

LCHD Communicable Disease Program
(847) 377-8130

LCHD Animal Care and Control
(847) 949-9925

Bed Bugs

Knowing the facts

Bed bugs (cimex lectularious) are small but visible to the naked eye. They are oval shaped, wingless, brownish, flattened insect with prominent eyes.

Did You Know?

The bed bug does not transmit disease to humans.

How is this spread?
The bed bug has been a parasite of humans throughout written history. They are mainly night feeders and feed only on blood of warm-blooded animals. Depending on temperature they can live several weeks to months without feeding. The recent rapid infestation of bed bugs can be contributed to increased international travel, the end of the use of DPT and other pest control practices. They can travel to your home in used furniture or suitcases.

What are the symptoms?

The most common sign of a bed bug is their bite. It usually develops into a small red looking bump that is itchy on the surface of the skin. The linear or clustered lesions indicate repeated feedings by a single bug (breakfast, lunch, dinner pattern).

How soon do symptoms appear?

Most people do not realize they have been bitten until bite marks appear anywhere from one to several days after the initial bite. Some people do not react to the bite.

When and how long is a person able to spread this?
NO disease can be spread from bed bugs. They are considered a nuisance more than a health risk.

What is the treatment for this?
Bed bug bites usually do not pose a serious medical threat to the majority of people. Best way to treat is to avoid scratching the area and apply antiseptic cream. If any signs of infection or allergy occurred follow with doctor.

How do I prevent the spread?

- Avoid bringing bed bugs home when you travel.
- Inspect suitcases and second hand furniture prior to bringing it into your living space
- Cover your mattress in plastic
- Contact a professional pest control team

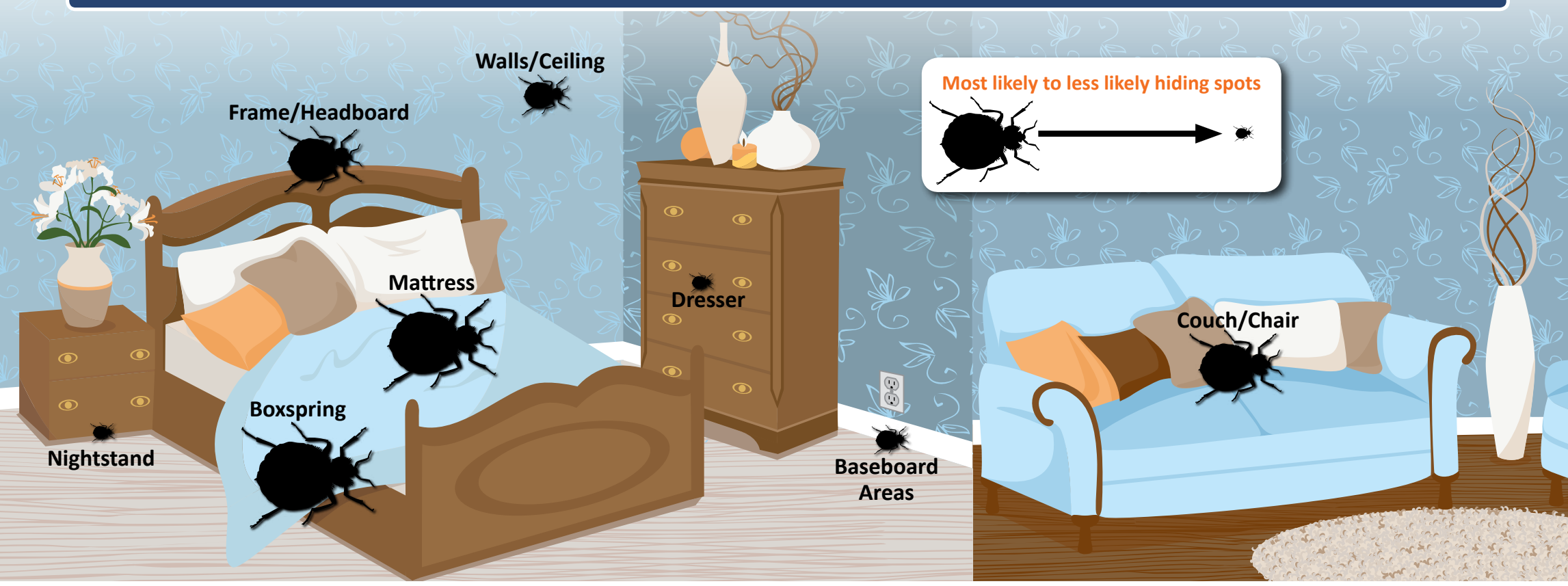
BITE BACK!

YOU CAN CONTROL BED BUGS.

Bed bugs are a widespread problem in Illinois and around the world.
Here's what you can do to protect yourself.

WHERE TO LOOK: BED BUG HIDING SPOTS

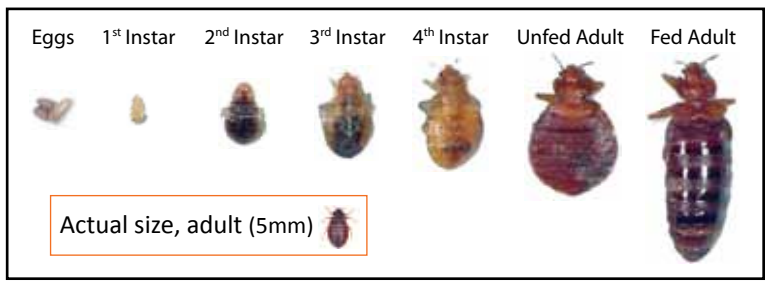
Bed bugs hide in cracks and tight spaces within 6 to 8 feet of the sleeping areas – above, under and around.



WHAT TO LOOK FOR.

Dark brown or black spots

Bedbug life cycle



Pictures courtesy or J.L. Obermeyer, Purdue University and Dr. D. Miller, Virginia Tech University

WHAT ABOUT BITES?

The only way to be sure that you have bed bugs is to find the bug. Why? Because their bites look like those of other insects or skin problems, and many people don't react to their bites at all.

Dirty living conditions DO NOT attract bed bugs, but cleaning regularly and removing clutter will help you see and better control them. Always be aware of your surroundings and take action quickly when a problem is found.

How You Get Bed Bugs

- Travel
- Used Furniture
- Guests

Top 4 Things You Can Do To Stop Bed Bugs

- Reduce clutter, especially in bedrooms.
- Look often for signs in sleeping areas.
- Put bedding and other items in the clothes dryer using high heat for at least 30 minutes.*
- Report problems quickly to landlord and/or an experienced pest control operator.

*Heat is one of the best treatments for bed bugs because it kills all bed bugs, eggs to adults.

IMPORTANT! Bed bug bombs and foggers do NOT work for controlling bed bugs.

State of Illinois
Illinois Department of Public Health

For Additional Information Contact:

Illinois Department of Public Health, www.idph.state.il.us/envhealth/pcbedbugs.htm
Safer Pest Control Project, www.spcpweb.org

SAFER PEST CONTROL PROJECT

Bronchitis and Pneumonia

Knowing the facts

Bronchitis is most often a bacterial or viral infection that causes swelling of the tubes (bronchioles) leading to the lungs. Pneumonia is an acute or chronic disease marked by inflammation of the lungs caused by viruses, bacteria, and other organisms and sometimes by physical or chemical irritants.

Did You Know?

Children get more upper respiratory infections in the winter. Some upper respiratory infections result in bronchitis and pneumonia.

How is this spread?

Bronchitis and pneumonia are not directly contagious, but the virus/bacteria that caused the original cold or upper respiratory infection may be. Most of the bacteria/virus that cause upper respiratory infections are spread by droplets in the air or close contact with mouth and nose secretions and touching contaminated objects.

What are the symptoms?

The symptoms of bronchitis and pneumonia are similar and may include fever, headache, cough that brings up thick green or yellow mucus, chills, looking ill and tired, fast, noisy, or difficulty breathing, wheezing, tightness or pain in the chest. Pneumonia that is deep in the lungs may also cause abdominal pain and vomiting. Any child especially young infants, with these symptoms should be seen by a health care provider.

How soon do symptoms appear?

Depends on bacteria/virus causing the pneumonia or bronchitis.

When and how long is a person able to spread this?

Depends on germ causing the pneumonia or bronchitis.

What is the treatment for this?

After seeing a health care provider for evaluation and treatment, most children recover in 1 to 2 weeks. Viral pneumonia may last longer. Children recovering from bronchitis or pneumonia can return to the child care program provided they are feeling well enough to participate and are free of fever for at least 24 hours without fever reducing medications.

How do I prevent the spread?

-Reducing exposure to colds and flu by distance between children, frequent hand washing and environmental cleanliness and sanitation are the first and most important line of defense.

-Teach children and caregivers/teachers to cover their noses and mouths when sneezing or coughing with a disposable tissue or with a shoulder if no tissue is available. Dispose of tissue immediately and wash hands.

-Childhood immunizations such as Hib, acellular pertussis (the aP in DTaP), Pneumococcal conjugates vaccine (PCV), and influenza vaccines (including staff) can provide some protection against pneumonia.

-Getting plenty of rest and fresh air, eating healthy foods, exercising and avoiding secondhand smoke will also keep young bodies strong.

-Reduce crowding by ensuring space and ventilation is helpful.

Lake County Health Department/Community Health Center

Campylobacteriosis

Knowing the facts

Campylobacteriosis is a bacterial infection in the intestinal tract.

Did You Know?

Campylobacter bacteria infects over 2 million people each year & is the leading cause of diarrhea and food borne illness.

How is this spread?
Campylobacteriosis is spread by eating food contaminated by this bacteria, especially poultry, raw meant or improperly cooked poultry, pork or unpasteurized milk or drinking contaminated water or using common cutting boards. Spread can also occur from contact with stool of infected puppies, kittens) or from handling wild animals. Campylobacteriosis can be spread when the bacteria leave the body of an infected child/person through the stool and enter another child's body when hands, food objects (toys) contaminated with the stool are put in the mouth.

What are the symptoms?

Diarrhea (often bloody or with mucus) abdominal pain, fever, nausea, vomiting and listlessness. Symptoms may also be mild or absent.

How soon do symptoms appear?

Time from exposure to infection to beginning of symptoms of illness is 1-7 days usually 2-5 days.

When and how long is a person able to spread this?
After 2-3 days of treatment with antibiotics, this bacteria is eradicated. If not treated with antibiotics, bacteria is in the stool for 2-3 weeks.

What is the treatment for this?
Children with symptoms that suggest possible campylobacteriosis infection must be separated from other children until parents arrive to pick them up. Parents should be advised to take to their physician for diagnosis and treatment. The physician's treatment orders must be followed thoroughly. Usually antibiotics for 5-7 days.

How do I prevent the spread?

- Outbreaks in child care centers are uncommon
- Person to person spread is uncommon.
- Educated parent, staff, and children about proper hand washing, sanitizing and disinfecting toys and equipment

Lake County Health Department/Community Health Center

Varicella (Chickenpox)*

Reportable Disease: Knowing the facts

Chickenpox (varicella) is caused by *varicella zoster virus* (VZV), a type of herpes virus. It is often a mild illness, but may be severe in infants, pregnant women, adults and persons with weakened immune systems. The greatest number of chickenpox cases occurs in the late winter and spring.

Did You Know?

Chickenpox and Shingles are caused by the same virus-someone who has Shingles can transmit the virus to someone who is unprotected against chickenpox and it would give them a chickenpox infection.

How is chickenpox spread?

Chickenpox is highly contagious. Chickenpox is transmitted to others by direct person-to-person contact, by droplet or airborne spread of discharges from an infected person's nose and throat or indirectly through articles freshly soiled by discharges from the infected person's lesions. The scabs themselves are not considered infectious. Post vaccine rash may be contagious.

What are the symptoms of chickenpox?

Initial symptoms include sudden onset of slight fever and feeling tired and weak. An itchy blister-like rash soon follows. The blisters (vesicles) eventually dry, crust over and form scabs. The blisters tend to be more common on covered than on exposed parts of the body. They may appear on the scalp, armpits, trunk, and even on the eyelids and in the mouth. Mild or unapparent infections occasionally occur in children. The disease is usually more serious in adults than in children.

How soon do symptoms appear?

Symptoms commonly appear 14-16 days after exposure with a range of 10-21 days after exposure.

When and for how long is a person able to spread chickenpox?

A person is usually able to transmit chickenpox from 1 to 2 days before the onset of the rash to six days after the appearance of the first lesion. Contagiousness may be prolonged in people with altered immunity.

What is the treatment for Chicken Pox?

Avoid scratching skin as it may cause a secondary bacterial infection. Do not give aspirin to anyone younger than 20 years old due to the risk of Reye's Syndrome, an inflammation of the brain which may be fatal.

How do I prevent the spread of Chickenpox?

-Get vaccinated against chickenpox. Two vaccines are recommended for most children. Check with your doctor about getting vaccinated to prevent becoming ill with chickenpox. Although chickenpox may seem like a harmless childhood illness it can have serious health consequences for infants who are too young to be vaccinated and people with other health conditions. It is possible to get chickenpox even after immunization.

-Children may return to daycare/school when blisters dry and crust over, about 6 days after the onset of the rash (no less than five days after the last pox appears). Children or individuals who have come into contact with the ill person do not need to be excluded if they have been vaccinated or have history of the disease. Unvaccinated contacts should be immunized and may need immune globulin shortly after their exposure. Women who may be pregnant and have come in contact with chickenpox should consult with the doctor about their history of disease and vaccination.

-Thorough hand washing is one of the best way to prevent spread of infectious diseases. Help children to wash hands as well. Practice good cough and sneeze habits by coughing and sneezing into your elbow or sleeve. If you do use a tissue throw it away and wash your hands. Encourage children not to touch their eyes, nose or mouth.

-*Your doctor and/or school health/childcare personnel should report your illness to local health department.

Lake County Health Department/Community Health Center

Health Alert: Chickenpox*

Date: _____

Dear Parent or Guardian

An individual at _____has been diagnosed or is undergoing evaluation for an illness due to Chickenpox, an infection caused by the *varicella zoster* virus that may cause an itchy rash and fever.

Watch for these symptoms:

Fever, tiredness, and weakness. Followed by a itchy, blister-like rash. The rash generally appear in the face, scalp, and trunk, but can appear all over the body.

How it is spread:

-Chickenpox is highly contagious. This infection is spread by direct contact, by coughing and sneezing, or contact of soiled clothing from infected person.

-A person is usually able to transmit chickenpox from 1 to 2 days before the onset of the rash to six days after the appearance of the first lesion.

Prevention and Controlling the Spread:

-Getting vaccinated against chickenpox is the best way to prevent getting the illness and stopping the spread to others. Two vaccines are recommended for most children. Although chickenpox may seem like a harmless childhood illness it can have serious health consequences for infants who are too young to be vaccinated and people with other health conditions.

-Children may return to daycare/school when blisters dry and crust over, about 6 days after the onset of the rash (no less than five days after the last pox appears). Children or individuals who have come into contact with the ill person do not need to be excluded if they have been vaccinated or have history of the disease. Unvaccinated contacts should be immunized and may need immune globulin shortly after their exposure. Women who may be pregnant and have come in contact with chickenpox should consult with the doctor about their history of disease and vaccination.

-Thorough hand washing is one of the best way to prevent spread of infectious diseases. Help children to wash hands as well. Practice good cough and sneeze habits by coughing and sneezing into your elbow or sleeve. If you do use a tissue throw it away and wash your hands. Encourage children not to touch their eyes, nose or mouth.

-*Your doctor and/or school health/childcare personnel should report your illness to local health department.

Varicella (Chickenpox)

Photo

Lake County Health Department/Community Health Center
Communicable Disease Program

Chickenpox (Varicella) Case Report

(For case verification, bold print items are necessary for each case)

Fax to (847) 984-5680 or call (847) 377-8130 within 24 hours of receipt

---

Student/Case Name: _____ **Date of Report:** _____

Age: _____ **Date of Birth:** _____ **Sex:** _____Race: _____

Parent's Name(s): _____ **Street Address:** _____

City: _____ **Phone(s):** _____

Vaccination Dates: Varicella or MMRV (circle one) (1) _____ **(2)** _____

Religious Exempt: Yes _____ **No** _____ **Immunocompromised: Yes** ____ **No**_____

Previous history of Chickenpox: Yes ____ **No**____ **Unk** ____ **Date:** _____

Seen/Diagnosed by Provider: Yes ____ No ____ **Date Seen:** _____

If not seen by provider, who diagnosed Chickenpox? _____

Provider's Name: _____ **Provider's Phone**: _____

Onset Date of Rash: _____ **Restricted x 5 days (from onset): Yes** ____ **No** ____

Was person given an Antiviral: Yes___ No___ Name: _____

Rash Location (face, trunk arms, etc.):_____

Fever: Yes ____ **No** ____ **Estimated Number of Pox: <50** ____ **>50** ____

Was person in contact with a <u>known</u> case of Chickenpox (or Shingles) prior to onset? Yes __ No __

If yes, contact name: _____ Date of contact: _____

Reporting Person Name/Title: _____ **Phone:** _____

Facility Name: _____ **Street Address:** _____

City: _____ **Who reported Chickenpox information to you**? _____

Comments/additional notes: _____

Effective March 3, 2008, The Illinois Dept of Public Health (IDPH) has made each case of Chickenpox (Varicella) reportable within 24 hours of receipt of notification from a parent, guardian or health care provider. The following information should be collected by schools, licensed child care facilities/daycares and reported to the appropriate local health authority.

Common Cold (Upper Respiratory Infection)

Knowing the facts

The common cold is a mild infection of the upper respiratory tract (the nose, throat, ears and eyes) which is caused by over 100 different types of viruses. Children younger than 2 years, may develop a bacterial ear infection immediately after or during an upper respiratory infection

Did You Know?

Infants in child care have 7-9 upper respiratory infections each year. Adults have an average of 4 per year.

How is this spread?

Upper respiratory infections are very contagious. They spread by droplets from sneezing and coughing and when people touch discharges from the nose or mouth, cough and sneeze, kiss on the mouth, share food or eating utensils, and are together in a crowded, poorly ventilated and overheated rooms.

What are the symptoms?

Cold symptoms include stuffy or runny nose, sore throat, coughing or sneezing, watery eyes, chills and fever. The mucus from the noses generally progresses from being very thin and watery in the beginning (when it is most contagious) to thick and cloudy as the cold progresses. At this time it can also become yellow or green. The green discharge becomes a problem if it lasts more than 10 to 14 days. If accompanied by a fever or headache, it may indicate a sinus infection which will need medical treatment. A cough with wheezing or difficulty breathing requires medical attention.

How soon do symptoms appear?

Symptoms begin in 2 to 14 days after exposure.

When and how long is a person able to spread this?

A cold is contagious from a few days before signs or symptoms appear and while clear runny secretions are present. The presence of green or yellow discharge from the nose is common as the body discards mucus and other debris from the cold. Darker or greener nasal discharge does not mean the child is more ill. Contagious, or has greater need for antibiotics.

What is the treatment for this?

There is no specific treatment for the common cold. Over the counter medications for cold symptoms are not recommended for children 4 years of age and under.

Exclusion is not needed if child feels well enough to participate in activities and do not require more care and attention than the program can provide.

How do I prevent the spread?

-Make sure all children and staff use good hand washing practices.

-Wipe noses with clean tissues, dispose of them properly and wash your hands.

-Don't share food, bottles or toothbrushes. Don't kiss children on the mouth.

-Open windows and maximize outdoor play.

-Teach children to cough into their elbow and away from people and use of tissue followed by hand washing.

-Keep environment clean.

-Limit physical contact between young infants and infected children.

Illinois Department of Public Health

A Cold or the Flu?

How do you tell the difference?

Influenza Home Page

Cold	Symptoms	Flu
Rare	Fever	Characteristic, high (100 degrees to 103 degrees F); lasts 3-4 days.
Rare	Headache	Prominent
Slight	General aches, Pains	Usual; often severe
Quite mild	Fatigue, Weakness	Can last up to 2-3 weeks
Never	Extreme Exhaustion	Early and prominent
Common	Stuffy Nose	Sometimes
Usual	Sneezing	Sometimes
Common	Sore Throat	Sometimes
Mild to Moderate; Hacking Cough	Chest Discomfort, Cough	Common; can become severe
Sinus congestion or earache	**Complications**	Bronchitis, pneumonia; can be life-threatening
None	**Prevention**	Annual vaccination; anti-viral drug
Only temporary relief of symptoms	**Treatment**	Anti-viral drug within 24-48 hours after onset of symptoms

Croup

Knowing the facts

Croup is an inflammation or swelling of the voice box (larynx) and windpipe(trachea). When a child has croup, the airway just below the vocal cords becomes swollen and narrow. This makes breathing noisy and difficult.

Did You Know?

Symptoms of croup get worse at night.

How is this spread?

The viral illness is spread directly by contact with secretions from the mouth and by droplets released when coughing or sneezing. It can on occasion also be spread indirectly on child's or caregivers hands that touch objects that are frequently touched by others.

What are the symptoms?

A barking cough with hoarseness which may follow a mild cold are typical symptoms. It may begin suddenly or slowly. There may be increasing difficulty with breathing, loss of appetite and fatigue.

How soon do symptoms appear?

Two to 14 days is the time from exposure to infection to beginning of symptoms is typical.

When and how long is a person able to spread this?

Virus can be transmitted from one week before illness begins and for the duration of the illness.

What is the treatment for this?

The treatment is typically supportive with rest and fluids. If difficulty breathing occurs, call doctor.

How do I prevent the spread?

- Wash hand frequently.
- Clean and disinfect mouthed toys at least daily or more often if needed.
- Cover cough
- Exclude if child has fever with behavior change, looks or acts very ill. Or has difficulty breathing.
- Exclude if child is unable to participate in the activities and staff determine that they cannot care for the child without compromising the care of the other children in the group.

Lake County Health Department/Community Health Center

Cytomegalovirus (CMV)

Knowing the facts

Human cytomegalovirus (CMV), is a member of the herpes virus group, which include the herpes simplex viruses, the virus that causes chicken-pox, and the Epstein Barr virus (the virus that causes infectious mononucleosis).

Did You Know?

Up to 70% of healthy children ages 1-3 years of age in group care settings have CMV in their stool and urine. In most people CMV is a "silent" infection meaning it causes no signs or symptoms. It usually causes infections in babies and people with weakened immune systems.

How is CMV spread?

Through contact with saliva, blood or urine of an infected person. Spread of CMV in households and childcare centers is well documented as young children can easily transmit CMV to their parents and caregivers. In adolescents and adults, sexual transmission also may occur. The chance of getting CMV through casual contact is very limited.

What are the symptoms of CMV?

Often passes as a fever illness without specific characteristics. Serious illness varies depending on age and the immune system of the individual. It sometimes may appear as a Mononucleosis-like illness that may include fever, swollen lymph nodes, and sore throat.

How soon do symptoms appear?

It varies from person to person. In newborns it may be months or later that symptoms appear. Nearly 90% of people show no symptoms or disease related to this virus.

When and for how long is a person able to spread this virus?

Once a person is infected they are able to spread the virus for sometimes months or off and on later without symptoms. This makes careful hand washing and hygiene important to stop the spread.

What is the treatment for CMV?

Supportive treatment for symptoms is usually indicated. Anti-viral medications may be given according to treatment guidelines by your healthcare provider.

How do I prevent the spread of CMV?

-Wash hands thoroughly with soap and running water after using the toilet, changing diapers, and before preparing or eating food. Careful hand washing is the best way to prevent spread of infectious diseases found in the intestinal tract. Help children to wash hands as well.

-Exclusion of children or adults with symptoms of illness is not recommended.

-Minimize contact with children's saliva, such as kissing on the lips or hands.

-Do not share food, drinks or utensils with others.

-Routinely clean and disinfect or sanitize items contaminated with saliva or urine.

-Women who may be pregnant should consult their doctor if they believe they have come in contact with someone who has been diagnosed with CMV. Limiting contact and practicing good hygiene when coming in contact with children's saliva and bodily fluids (such as urine) is important to prevent infection.

Lake County Health Department/Community Health Center

Health Alert: Cytomegalovirus (CMV)

Date: _____

Dear Parent or Guardian

An individual at _____has been diagnosed or is undergoing evaluation for cytomegalovirus (CMV). Human cytomegalovirus (CMV), is a member of the herpes virus group, which include the herpes simplex viruses, the virus that causes chickenpox, and the Epstein Barr virus (the virus that causes infectious mononucleosis).

Watch for these symptoms:

Often passes as a fever illness without specific symptoms. Serious illness varies depending on age and the immune system of the individual. It may appear as a Mononucleosis-like illness that may include fever, swollen lymph nodes, and sore throat.

How it is spread:

Through contact with saliva, blood or urine of an infected person. Although CMV is not highly contagious , spread of CMV in households and childcare centers is well documented as young children can easily transmit CMV to their parents and caregivers. In adolescents and adults, sexual transmission also may occur. Once a person is infected they are able to spread the virus for sometimes months or off and on later without symptoms. This makes prevention more important.

Treatment:

Supportive treatment for symptoms is usually indicated. Anti-viral medications may be given according to treatment guidelines by your healthcare provider.

Prevention and Controlling the Spread:

-Wash hands thoroughly with soap and running water after using the toilet, changing diapers, and before preparing or eating food. Careful hand washing is the best way to prevent spread of infectious diseases. Help children to wash hands as well.

-Exclusion of children or adults with symptoms of illness is not recommended.

-Minimize contact in child care settings with children's saliva, such as kissing on the lips or hands.

-Do not share food, drinks or utensils with others and routinely clean and disinfect or sanitize items contaminated with saliva, blood or urine.

Lake County Health Department/Community Health Center

Diphtheria*

Reportable Disease: Knowing the facts

It is a disease cause by a bacteria that lives in the mouth, throat and nose of an infected person. It can be prevented by immunizations of DTaP or Td.

Did You Know?

Diphtheria is a reportable disease but it has not be reported in the United States since 2003.

How is diphtheria spread?

Person to person spread is by sneezing or coughing or direct contact with respiratory tract or skin discharges of an infected person. It may spread by indirect contact with articles soiled by infected patient's discharges from lesions rarely spread by contaminated objects and food.

What are the symptoms of diphtheria?

Slight fever, swollen glands, sore throat with gray-white patches surrounding inflamed zones and chills. Proceeds to a gray membrane formation which obstructs the airway. Fatal up to 23%

How soon do symptoms appear?

Symptoms usually between 2-7 days, occasionally longer

When and for how long is a person able to spread diphtheria?

Period is variable, but usually two to four weeks until bacteria has disappeared from the infected area. Carriers may be able to spread organisms for six months or more.

What is the treatment for Chicken Pox?

Effective antibiotic therapy and antitoxin.

How do I prevent the spread of Diphtheria?

- **All needed immunizations given according to schedule.**
- **Careful hand washing of staff and children.**
- **Disinfection of mouth toys.**
- **Exclusion– child mush be isolated and excluded from day care until two successive cultures from both nose and throat, take not less than 24 hours apart are negative for diphtheria. All susceptible contacts should be isolated.**

Ear Infections (Otitis Media)

Knowing the facts

This is an infection of the middle ear behind the eardrum. It is usually a complication of an upper respiratory infection such as a cold. It can be acute (new), chronic (persistent), or serous (fluid that does not contain germs). It is more common in young children, often caused by bacteria.

Did You Know?

It is important to watch for signs of hearing or speech problems in children with frequent ear infections.

How is this spread?

Ear infections are not contagious though the upper respiratory infection that occurs is. The upper respiratory infection is spread from one day before the symptoms develop until symptoms resolve.

What are the symptoms?

Symptoms result from swelling of the middle ear. The child may cry persistently, tug at the ear, have a fever, be cranky and unable to hear well. When an infection occurs, pus develops, pushes on the eardrum, and causes pain and often fever. Sometimes the pressure is so great that the eardrum bursts and the pus drains out into the ear canal. Although this can frighten parents, the child feels better and the hole in the eardrum will usually heal over. Today, the biggest problem from otitis media is the potential for hearing loss. Fluid may remain in an ear as long as six months after an infection is gone.

How soon do symptoms appear?

Some children develop ear infections a few days after a cold starts. Some children have one infection after another, whereas others never have any. Conditions that increase a child's risk of ear infections are frequent cold, allergic runny noses, bottle propping, exposure to smoke, and attendance in child care.

When and how long is a person able to spread this?

See upper respiratory infection (common cold)

What is the treatment for this?

Acute otitis media is often treated with antibiotics.

How do I prevent ear infections?

-Prevent the spread of colds and other upper respiratory infections which may lead to otitis media.

-Be sure that antibiotics are taken for the full amount of time prescribed to avoid resistant infections.

-Never use cotton swabs and never put anything smaller than your finger into a child's ear. Do not allow the child to do so, either.

-Do not feed or bottle-feed infants lying on their backs.

-An ear tube creates a hold in the eardrum so fluid and pus may drain out. It usually stays in for three to six months.

Since pus can drain out through the tube, water from the outside world (which has germs in it) can also run into the middle ear. Be careful that children with tubes do not get water in their ears.

Lake County Health Department/Community Health Center

Enterovirus

Knowing the facts

Enteroviruses cause a variety of illnesses and usually occur during the summer and fall. These viruses often cause mild infections such as colds, sore throats, and intestinal illness. Less often, the cause pneumonia, meningitis or encephalitis, or they may affect the eyes and heart.

Did You Know?

These illnesses are often caused by viruses in the coxsackievirus, echovirus, and enterovirus families.

How are enteroviruses spread?

Enterovirus leave the body through the stool of an infected person and enter another person when hands, food, or objects (such as toys) contaminated with stool, are placed in the mouth. Also, enteroviruses can be spread through droplets that are expelled from the nose and mouth during sneezing and coughing.

What are the symptoms?

Cold-like symptoms, sore throat, mouth sores, fever, rash, vomiting, and diarrhea are most common. Some may have no symptoms.

How soon do symptoms appear?

It usually takes 3-6 days from time of exposure until symptoms begin.

What is the treatment for enteroviruses?

-No specific therapy for enteroviral infections exists.

-Specimens for viral isolation may be obtained by a physician from the throat and rectum and any sites of clinical involvement. Attempts to recover the virus are particularly important in patients with serious illness during outbreaks.

How do I prevent the spread of enteroviruses?

-Wash hands thoroughly with soap and running water after using the toilet, changing diapers, and before preparing or eating food. Thorough hand washing is the best way to prevent spread of infectious diseases found in the intestinal tract. Help children to wash hands as well. Keep up good hand washing even after symptoms have stopped.

-Clean and disinfect contaminated areas (toilets, diapering areas, faucets) daily or when soiled. Sanitize toys as needed and at least daily.

-Practice good cough and sneeze habits by coughing and sneezing into your elbow or sleeve. If you do use a tissue throw it away and wash your hands. Encourage children not to touch their eyes, nose, or mouth.

Lake County Health Department/Community Health Center

Health Alert: Enteroviruses

Date: _____

Dear Parent or Guardian

An individual at _____has been diagnosed or is undergoing evaluation for an illness due to an enterovirus. Some of these illnesses are often called stomach-flu and are common among young children. Enteroviruses cause a variety of illnesses and usually occur during the summer and fall. These viruses often cause mild infections such as colds, sore throats, and intestinal illness. Less often, the cause pneumonia, meningitis, or encephalitis, or they may affect the eyes and heart. These illnesses are often caused by viruses in the coxsackievirus, echovirus, and enterovirus families.

Watch for these symptoms:

Cold-like symptoms, sore throat, mouth sores, fever, rash, vomiting and diarrhea are most common. Some may have no symptoms. It usually takes 3-6 days from time of exposure until symptoms begin.

How it is spread:

Enterovirus leave the body through the stool of an infected person and enter another person when hands, food or objects (such as toys) contaminated with stool, are placed in the mouth. Also, enteroviruses can be spread through droplets that are expelled from the nose and mouth during sneezing and coughing.

Diagnosis and Treatment:

-No specific therapy for enteroviral infections exists.

-Specimens for viral isolation may be obtained by a physician from the throat and rectum and any sites of clinical involvement. Attempts to recover the virus are particularly important in patients with serious illness during outbreaks.

Prevention and Controlling the Spread:

-Wash hands thoroughly with soap and running water after using the toilet, changing diapers, and before preparing or eating food. Thorough hand washing is the best way to prevent spread of infectious diseases found in the intestinal tract. Help children to wash hands as well. Keep up good hand washing even after symptoms have stopped.

-Clean and disinfect contaminated areas (toilets, diapering areas, faucets) daily or when soiled. Sanitize toys as needed and at least daily.

-Practice good cough and sneeze habits by coughing and sneezing into your elbow or sleeve. If you do use a tissue throw it away and wash your hands. Encourage children not to touch their eyes, nose or mouth.

Lake County Health Department/Community Health Center

Escherichia coli (E. coli)*

Reportable Disease: Knowing the facts

E.coli 0157:H7 is an emerging foodborne illness. While most E. coli strains are harmless and live in the intestines of healthy humans and animals, this particular strain produces a powerful toxin that can cause severe illness.

Did You Know?

E. coli 0157:H7 is a bacteria and was first identified as a cause of illness in 1982.

How is e.coli spread?

-By eating meat (especially ground beef) that is not thoroughly cooked or by drinking unpasteurized milk. Outbreaks from consuming contaminated apple cider, raw vegetables, alfalfa sprouts, salami, yogurt, and water have also occurred.

-E.coli leaves the body through the stool of an infected person and enters into another person when contaminated hands, food, or objects are placed in the mouth, or by drinking feces-contaminated water.

-Spread may also occur whether or not a person feels sick. For example, it is easy for diapered children to pass intestinal infections to others. Anyone who does not wash his or her hands after using the toilet or changing diapers can spread disease.

What are the symptoms?

Watery or bloody diarrhea, abdominal cramps, and/or low-grade fever.
Sometimes there are no symptoms.

How soon do symptoms appear?

Usually 10 hours to 6 days, with a median of 3 to 5 days.

When and how long is a person able to spread e.coli?

As long as *E. coli* is present in the stool, a person can be a possible source of disease spread.

What is the treatment for e.coli?

Most people recover without antibiotics or other specific treatment in 5 – 10 days. There is no evidence that treatment improves the course of the disease and may precipitate kidney complications. In general, Anti-diarrheal medications should be avoided– consult with your healthcare provider before taking these if you think you may have E.coli.

How do I prevent the spread of e.coli?

-Thoroughly cook all meats inside as heat kills the bacteria. Clean all fruits and vegetables well before eating them. Do not drink unpasteurized milk or eat cheese made with unpasteurized milk.

-Wash hands thoroughly with soap and running water after using the toilet, changing diapers, and before preparing or eating food. Thorough hand washing is the best way to prevent spread of infectious diseases found in the intestinal tract. Help children to wash hands as well. Keep up good hand washing even after symptoms have stopped as you could still have the bacteria in your body.

-Clean and disinfect contaminated areas (toilets, diapering areas, faucets) daily or when soiled. Sanitize toys as needed and at least daily.

*-Your doctor should report your illness to local health department.. Follow their directions for exclusion and readmission.

Lake County Health Department/Community Health Center

Health Alert: E. coli*

Date: _____

Dear Parent or Guardian

An individual at _____has been diagnosed or is undergoing evaluation for an illness due to Escherichia Coli (E.coli), which can cause an infection of the intestines. These bacteria are found in the digestive tracts of some beef and dairy cattle, where they get into milk or meat during the slaughtering process. In humans, the bacteria produces a toxin that can cause diarrhea. In rare cases, people can develop hemolytic uremic syndrome (HUS), which is a serious complication of E.coli 0157:H7 infection. HUS is more common in children than in adults.

Watch for these symptoms:

-People infected with E.coli can have no symptoms at all or they can be ill with watery or severe bloody diarrhea with frequency exceeding 2 or more stools above normal for that child, abdominal cramps, and low -grade fever.

-It usually takes from 10 hours to 6 days, usually about 3–5 days, from the time a person comes in contact with the bacteria until symptoms.

How it is spread:

-These bacteria can be easily spread from person to person, especially from children in diapers. Stool not contained in diapers, diarrhea causing accidents in toilet trained children create risk for spread. Spread can occur when a person doesn't wash his/her hands well after using the toilet or changing diapers.

-By eating a food or drink that is not thoroughly cooked or has been contaminated with E. coli.

-The bacteria can be found in the stool of a person who has E. coli for about one week possibly as long as 2-8 weeks after the start of symptoms.

Diagnosis and Treatment:

There is a lab test to check for E. coli in the stool. Most persons recover without antibiotics or other specific treatment in 5 – 10 days. Antibiotics and drugs to stop the bacteria are generally not recommended. Check with your medical provider about these things if you think you or your child may have symptoms of E. coli .

Prevention and Controlling the Spread:

-Thoroughly cook all meats inside as heat kills the bacteria. Clean all fruits and vegetables well before eating them. Do not drink unpasteurized milk or eat cheese made with unpasteurized milk.

-Children with diarrhea due to E. coli should not return to the child care or school setting until diarrhea and other symptoms are no longer present or they have been treated and cleared by their medical provider to return.

-Wash hands thoroughly with soap and running water after using the toilet, changing diapers, and before preparing or eating food. Thorough hand washing is the best way to prevent spread of infectious diseases found in the intestinal tract. Help children to wash hands as well. Keep up good hand washing even after symptoms have stopped as you could still have the bacteria in your body.

-Clean and disinfect contaminated areas (toilets, diapering areas, faucets) daily or when soiled. Sanitize toys as needed and at least daily.

*-Your doctor should report your illness to local health department. Follow their directions for exclusion and readmit

Fever

Knowing the facts

Fever occurs when the normal body temperature is elevated. It may be a sign of infection or illness. It can be a reaction to medications. It can also be by other illnesses such as cancer or rheumatoid arthritis

Did You Know?

Exercise and high temperatures outside can cause a child to a have a fever.

How is this spread?
It varies depending of the cause of the fever.

What are the symptoms?
Oral temperature above 101 F(38.3 C) rectal temperature above 102 F(38.9 C) or axillary (armpit) 100 F(37.8 C) are usually considered to be above normal.

How soon do symptoms appear?
It varies depending on the cause of the fever.

When and how long is a person able to spread this?
It varies depending on the cause of the fever.

What is the treatment for this?
Most fevers are not harmless unless thy are very high(106 F(40.9)) and prolonged. The cause of the fever needs to be determined and appropriate treatment given.

How do I prevent the spread?

- Determine cause
- Prevent dehydration by offering fluids frequently.
- Some young children with fever may have a brief seizure lasting less than 5 minutes. This child needs to be evaluated by his doctor for evaluation.
- Children with fever and change of behavior should be excluded.

Lake County Health Department/Community Health Center

Fifth Disease

Knowing the facts

Fifth Disease is mild, contagious viral infection caused by the *human parvovirus B19.* During school outbreaks, 10% to 60% of children may get fifth disease, 20% of them may not develop symptoms.

Did You Know?

Pet dogs or cats may be immunized against "parvovirus," but these are animal parvoviruses that do not infect humans. Therefore, a child cannot "catch" parvovirus from a pet dog or cat, and a pet cat or dog cannot catch human parvovirus B19 from an ill child.

How is fifth disease spread?

This virus is transmitted to others by direct person-to-person contact with infected respiratory secretions (for example: saliva, sputum, nasal mucus) through coughing, sneezing or contact with contaminated hands.

What are the symptoms of fifth disease?

Initial symptoms may include fever, muscle aches, headache, joint pain in adults. The rash often begins on the cheeks, features of a “slapped face appearance” in children. A very fine, lacy pink rash soon spreads to the arms, upper body, buttocks and legs. It is common for the rash to fade and reappear for 1-3 weeks depending on exposure to sunlight, heat, or stress. Rash around face clears within 4 days.

How soon do symptoms appear?

Symptoms commonly appear 4-14 days after exposure and as long as 21 days.

When and for how long is a person able to spread fifth disease?

A person is usually contagious during initial symptoms, before the onset of the rash and usually not contagious after onset of rash.

What is the treatment for fifth disease?

There is no treatment for fifth disease. Comfort measures for children to tolerate other symptoms of fever, sore throat, fatigue, and muscle pain.

How do I prevent the spread of fifth disease?

-Practice good health habits such as good hand washing techniques and proper disposal of facial tissues containing respiratory secretions. Encourage children to practice good cough and sneeze habits by coughing and sneezing into their sleeves not their hands– also not to touch their eyes, mouth, and nose.

-Pregnant women and those with sickle cell disease or those with compromised immune systems who have come in contact with someone who has fifth disease should contact their medical provider to determine if any additional precautions should be taken.

-Frequent cleansing and disinfecting of shared articles, such as table tops and toys.

-Do not share any utensils or items in the mouth.

Lake County Health Department/Community Health Center

Health Alert: Fifth Disease

Date: _____

Dear Parent or Guardian

An individual at _____has been diagnosed or is undergoing evaluation for Fifth Disease, an infection caused by the Human parvovirus B19 that may cause a fever and a rash.

Watch for these symptoms:

Symptoms include fever, muscle aches, joint pain in adults, headache. Followed by a rash on the cheeks that have a "slapped face" appearance. A fine, lacy rash may appear on arms and then spread to trunk, buttock, and legs. It is common for the rash to fade and reappear for 1-3 weeks depending on exposure to sunlight, heat, or stress. Rash around face clears within 4 days. Outbreaks often occur in late winter and early spring.

How it is spread:

This virus is transmitted to others by direct contact with infected respiratory secretions (e.g. saliva, sputum, nasal mucus) through coughing, sneezing, or contact with contaminated hands. A person is usually contagious during initial symptoms, before the onset of the rash and usually not contagious after onset of rash.

Prevention and Controlling the Spread:

-A child may return to school or childcare when fever is gone and child is well enough to participate in normal daily activities even though the rash may be present.

-Pregnant women, people with sickle cell disease, and compromised immune system who have come in contact with someone who has fifth disease should contact their medical provider to determine if any additional precautions should be taken.

-Frequent cleansing and disinfecting of shared articles, such as table tops and toys.

-Do not share any utensils or items that have been in someone's mouth.

-Thorough hand washing is the best way to prevent spread of infectious diseases. Help children to wash hands as well.

-Practice good cough and sneeze habits by coughing and sneezing into your elbow or sleeve. If you do use a tissue throw it away and wash your hands. Encourage children not to touch their eyes, nose or mouth.

-Frequent cleansing and disinfecting of diapering area, potty chairs, toilets, and toys.

Fifth Disease

Photo

Gastroenteritis, viral

Knowing the facts

There are many viruses that cause nausea, vomiting and diarrhea. It can be best prevented by careful hand washing before and after preparing and eating food, changing diapers, and toileting.

Did You Know?

Diarrhea can be caused by viruses, bacterial, and parasites. See other facts sheets for more information.

How is this spread?

It is spread often person to person when the virus leaves the body through the stool of an infected person and enters another person when contaminated hands, food, or objects such as toys are placed in the mouth.

What are the symptoms?

Frequent loose or watery stools, abdominal cramps and tenderness, generally not feeling well.

How soon do symptoms appear?

Variable but often 1 to 4 days after exposure.

When and how long is a person able to spread this?

Variable but from one to several days after symptoms end. Some may be able to spread illness before symptoms begin.

What is the treatment for this?

Give adequate fluids. Seek medical advice if child is unable to tolerate fluids and has a dry mouth, no tears, or no urine output in 8 hours.

How do I prevent the spread?

-Careful hand washing, cleaning, and disinfecting.

-Exclusion from child care if stool is not contained in the diaper for diapered children. Also if diarrhea is causing “accidents” for toilet-trained children, exclusion is important. If stool frequency exceeds 2 or more stools above normal for that child.

-

Lake County Health Department/Community Health Center

Giardiasis*

and Prevention of Recreational Water Illnesses

Knowing the facts

Giardiasis, is an infection of the intestines caused by the parasite *giardia lamblia*. This illness is common in children under two years of age. Epidemics have occurred in child care settings and other similar settings where there are children in diapers.

Did You Know?

Giardia is often associated with swimming in lakes or ponds-it (as well as some other diarrheal illnesses) is often referred to as a recreational water illness.

How is giardia spread?

Giardia leaves the body through the stool of an infected person and enters another person when contaminated hands, food, or objects such as toys are placed in the mouth. Spread can occur whether or not a person feels sick.

What are the symptoms?

Gas, stomach cramps and bloating, nausea, watery diarrhea (persistent or recurring), loss of appetite, and weight loss. Sometimes children do not show symptoms. Disease lasts 2-6 weeks in otherwise healthy people.

How soon do symptoms appear?

Usually 1-4 weeks after coming in contact and becoming infected with giardia.

When and how long is a person able to spread giardia?

Giardia is very contagious. You can pass giardia to someone else for several weeks after diarrhea has stopped so careful hand washing is important and do not swim for at least 2 weeks after you have had giardia to prevent passing it along to others in swimming pools or other recreational water facilities.

What is the treatment for giardia?

Discuss this letter with your physician if you or your child has persistent diarrhea. It is recommended that children who have symptoms of giardiasis have their stools tested; treatment is available such as prescription drugs.

How do I prevent the spread of giardia and other recreational water illnesses?

-Children or individuals with diarrhea due to giardia should not return to the child care or school setting until diarrhea and other symptoms are no longer present or they have been treated and cleared by their medical provider to return.

-Wash hands thoroughly with soap and running water after using the toilet, changing diapers, and before preparing or eating food. Thorough hand washing is the best way to prevent spread of infectious diseases found in the intestinal tract. Help children to wash hands as well. Keep up good hand washing even after symptoms have stopped.

-Clean and disinfect contaminated areas (toilets, diapering areas, faucets) daily or when soiled. Sanitize toys as needed and at least daily.

-*Your doctor should report your giardia illness to local health department. Child care providers with giardia must have a negative stool test after treatment to work in a direct child care setting.

These are the 6 Plea-s from the Centers for Disease Control to prevent Recreational Water Illnesses:

1. **Please** don't swim when you have diarrhea.
2. **Please** don't swallow the pool water.
3. **Please** practice good hygiene. Take a shower before swimming and wash your hands after using the toilet or changing diapers.
4. **Please** take your kids on bathroom breaks or check diapers often.
5. **Please** change diapers in a bathroom and not at poolside.
6. **Please** wash your child thoroughly (especially the rear end) with soap and water before swimming.

Lake County Health Department/Community Health Center

Health Alert: Giardiasis*

Date: _____

Dear Parent or Guardian

An individual at _____has been diagnosed or is undergoing evaluation for an illness due to Giardia, which can cause an infection of the intestines caused by the parasite *giardia lamblia*. This illness is common in children under two years of age. Epidemics have occurred in child care settings where there are children in diapers. You can get giardia from another person who has giardia, from drinking water from contaminated stream, creek, lake or water source, or by eating food that has been contaminated by someone who has giaridia and did not wash their hands after using the bathroom.

Watch for these symptoms:

Gas, stomach cramps and bloating, nausea, watery diarrhea (persistent or recurring), loss of appetite, and weight loss. Sometimes children do not show symptoms. Disease lasts 2-6 weeks in otherwise healthy people.

How it is spread:

-Giardia leaves the body through the stool of an infected person and enters another person when contaminated hands, food, or objects such as toys are placed in the mouth.

-Spread can occur whether or not a person feels sick.

For Example: It is easy for children in diapers to pass intestinal infections to others, but anyone who doesn't not wash his or her hands after using a toilet or changing diapers can spread the disease.

Diagnosis and Treatment:

Discuss this letter with your physician if you or your child has persistent diarrhea. It is recommended that children who have symptoms of giardiasis have their stools tested; treatment is available such as prescription drugs.

Prevention and Controlling the Spread:

-Children or individuals with diarrhea due to giardia should not return to the child care or school setting until diarrhea and other symptoms are no longer present or they have been treated and cleared by their medical provider to return.

-Wash hands thoroughly with soap and running water after using the toilet, changing diapers, and before preparing or eating food. Thorough hand washing is the best way to prevent spread of infectious diseases found in the intestinal tract. Help children to wash hands as well. Keep up good hand washing even after symptoms have stopped.

-Clean and disinfect contaminated areas (toilets, diapering areas, faucets) daily or when soiled. Sanitize toys as needed and at least daily.

-*Your doctor should report your illness to local health department and who will inform you about exclusion and readmission criteria.

Lake County Health Department/Community Health Center

Hand, Foot, and Mouth Disease

Knowing the facts

Hand, Foot, and Mouth Disease (HFMD) is caused by enteroviruses, the most common virus is *cox-sackievirus A16.* It is often found in children under ten years old. This illness occurs most often in the summer and fall.

Did You Know?

HFMD is not related to foot-and-mouth disease of cattle, sheep and swine. The diseases are caused by different viruses. The only similarity is their name.

How is hand, foot, and mouth disease spread?

HFMD is transmitted by contact with nose and mouth secretions, fluid from blisters, or contact with stool of an infected person.

What are the symptoms of hand, foot, and mouth disease?

Initial symptoms include fever, poor appetite, malaise, runny nose, cough, and sore throat. In a couple of days, painful sores develop in the mouth. Then in most cases a rash (with blisters) will develop on the palms of the hands, the fingers, and the soles of the feet; the rash does not itch.

How soon do symptoms appear?

Symptoms commonly appear 3-6 days after exposure. Many children have no symptoms.

When and for how long is a person able to spread hand, foot, and mouth disease?

HFMD is moderately contagious. A person is usually able to transmit this disease during illness and possible for several weeks after illness (through contact with stool). It is possible that an infected person who may not seem sick are able to spread infection.

What is the treatment for hand, foot, and mouth disease?

There is no treatment for this illness.

How do I prevent the spread of hand, foot, and mouth disease?

-A child may return when fever is gone and child is well enough to participate in normal daily activities even if sores are present (as long as there are no complicating factors or excessive drooling). In a situation where there are multiple cases of illness in a childcare or group facility, exclusion may be needed to stop the chain of illness.

-Practicing good health habits such as good hand washing techniques after using bathroom, wiping the nose and mouth, and after handling soiled diapers.

-Frequent cleansing and disinfecting of diapering area, potty chairs, toilets, and toys.

-Proper disposal of facial tissues containing mouth and nose secretions.

What are the risks to pregnant women exposed to children with HFMD?

Because enteroviruses, including those causing HFMD, are very common, pregnant women are frequently exposed to them, especially during summer and fall months. As for any other adults, the risk of infection is higher for pregnant women who do not have antibodies from earlier exposures to these viruses, and who are exposed to young children - the primary spreaders of enteroviruses. Most enterovirus infections during pregnancy cause mild or no illness in the mother. Although the available information is limited, currently there is no clear evidence that maternal enteroviral infection causes adverse outcomes of pregnancy such as abortion, stillbirth, or congenital defects. However, mothers infected shortly before delivery may pass the virus to the newborn. Pregnant women should contact their medical provider if they have been exposed to someone with hand, foot, and mouth disease.

Lake County Health Department/Community Health Center

Health Alert: Hand, Foot and Mouth Disease

Date: _____

Dear Parent or Guardian

An individual at _____has been diagnosed or is undergoing evaluation for an illness due to hand, foot, and mouth disease, an infection caused by a coxsackievirus A16 that may cause a fever, sores in mouth and rash and soles of feet. Hand, Foot, and Mouth Disease (HFMD) is caused by enteroviruses, the most common virus is *coxsackievirus A16.* It is often found in children under ten years old. This illness occurs most often in the summer and fall months.

Watch for these symptoms:

Fever, poor appetite, runny nose, cough, sore throat and general malaise. Sores in mouth start 1-2 days after fever, then rash appears on hands, fingers, and soles of feet. Then most cases a rash (with blisters) will develop on the palms of the hands, the fingers, and the soles of the feet; the rash does not itch though some have no symptoms. It is possible that an infected person who may not seem sick is able to spread infection.

How it is spread:

-This virus is transmitted to others by contact with nose and mouth secretions (droplets in air), fluid from blisters, or contact with stool from an infected person. HFMD is moderately contagious. A person is usually able to transmit this disease during illness and possible for several weeks after illness (through contact with stool). It is possible that an infected person who may not seem sick are able to spread infection. Symptoms usually appear 3-6 days after exposure.

Prevention and Controlling the Spread:

-A child may return when fever is gone and child is well enough to participate in normal daily activities even if sores are present (as long as there are no complicating factors or excessive drooling).

-Pregnant women who have come in contact with someone who has hand, foot, and mouth disease should contact their medical provider to determine if any additional precautions should be taken. Because enteroviruses, including those causing HFMD, are very common, pregnant women are frequently exposed to them, especially during summer and fall months. Most enterovirus infections during pregnancy cause mild or no illness in the mother. Although the available information is limited, currently there is no clear evidence that maternal enteroviral infection causes adverse outcomes of pregnancy such as abortion, stillbirth, or congenital defects. However, mothers infected shortly before delivery may pass the virus to the newborn.

-Thorough hand washing is the best way to prevent spread of infectious diseases. Help children to wash hands as well.

-Practice good cough and sneeze habits by coughing and sneezing into your elbow or sleeve. If you do use a tissue throw it away and wash your hands. Encourage children not to touch their eyes, nose or mouth.

-Frequent cleansing and disinfecting of diapering area, potty chairs, toilets, and toys.

Hand Foot Mouth Disease

Photo

Lake County Health Department/Community Health Center

Head Lice (Pediculosis)

Knowing the facts

Head Lice is caused by *Pediculus humanus capitus; a louse.* Head lice are very small, brown or tan-colored insects that live on human heads. They lay their eggs (nits) on base of hair shaft near the scalp. The hatched egg (nymph) matures in 9-12 days; feeds on blood to survive. The adult louse can live on the head up to 30 days it will die in only 1-2 days off the head.

Did You Know?

Lice infestation is most common in children 3 to 12 years of age. Girls get head lice more often than boys, women more often than men. They are found most commonly on the scalp behind the ears, at the nape of the neck. They are rarely found on the body, eyes, or eyebrows.

How is head lice spread?

Head lice is spread most often by direct person-to-person contact. It is sometimes spread by sharing personal items such as combs, brushes, hats, scarves, jackets, blankets, sheets, pillowcases, etc., but this is less common. Lice crawl. They do not hop or jump. Creamy colored nits are stuck to or glued on to the hair shaft. They do not flake like dry scalp or dandruff.

What are the symptoms of lice?

Initial symptoms are itching of scalp and neck. Look for: Crawling lice in the hair, usually few in number. Eggs (nits) stuck to the hair, often found at the back of neck; Scratch marks on scalp or back of neck at hairline.

How soon does the symptoms appear?

Eggs (nits) hatch in 7-10 days. Lice can reproduce in 2-3 weeks after hatching.

What is the treatment for head lice?

Lice-killing shampoo or lotion; available over the counter at your nearest drug store or by a prescription from your physician. Sometimes, a second treatment is recommended 7-10 days later to kill nits that may have survived the first treatment. If live lice remain after more than two treatments consult with your healthcare provider. Use a fine tooth comb or nit comb to remove nits and any live lice.

How do I prevent the spread of head lice?

Avoid sharing personal items such as hair care items, towels, bedding, clothing, hats, and headgear. Use a bandana or other head covering as a barrier if sharing of hats or headgear is necessary. All combs, brushes, and similar items must be disinfected by either soaking in a cleanser or by heating in water of at least 130 degrees F for 10 minutes. Clean floors, furniture, mattresses, and carpeting by thorough vacuuming. At the time that lice is treated, clothing and bedding should be washed in hot water (130 degree F or higher and dried in a hot dryer for at least 20 minutes before being used. Non-washable clothing, linens, and stuffed toys can be dry cleaned or sealed in plastic bag for 2 weeks. *Focus more on appropriate treatment and combing and less on household cleaning as this has been found to be more effective.*

--The best thing to do if you think you or a family member might have lice is to check their head by taking sections of the hair and looking at the hair and scalp. Start at the neck and work around the head. Use a lice comb or fine tooth comb to comb sections of the hair over a towel or sheet if you think there may be lice or nits. Sometimes conditioner on the hair or having the hair wet makes it easier to comb out lice and nits. Check all of the household members if one person has lice.

Control of Contacts

Lice infestation poses little health risk to others and does not often result in complications. The person should be discouraged from having close direct head contact with others until the problem has resolved.

Exclusion

A parent/guardian should be notified of the situation at the end of the day by school or childcare staff that prompt, proper treatment of the condition is in the best interest of the child and of his/her classmates and family. The child may return to the classroom after the treatment is complete or there is evidence that combing has reduced the lice and nits. The child's head should be re-inspected by staff 7-10 days later; if there is evidence of live lice or additional nits, the process of exclusion and treatment should be repeated. If the problem persists after the second treatment, a different product should be used. If the problem continues after the new product treatment, then a physician should be consulted for further advice.

Lake County Health Department/Community Health Center

Health Alert: Head Lice

Date: _____

Dear Parent or Guardian

An individual at _____has been found to have head lice. Head lice are very small, tan-colored insects that live on human heads; it is caused by *Pediculus humanus capitus;* a louse. Head lice is very common, especially in childhood. It is not a sign of being dirty. We want to notify you so that you can take appropriate steps with your family and household members.

Watch for these symptoms:

Initial symptoms are itching of scalp and neck. Look for: Crawling lice in the hair, usually few in number; Eggs (nits) stuck or "glued" to the hair, often found at the back of neck; Scratch marks on scalp or back of neck at hairline.

How it is spread:

Head lice is spread most often by direct person-to-person contact. It is sometimes spread by sharing personal items such as combs, brushes, hats, scarves, jackets, blankets, sheets, pillowcases, etc., but this is less common.

Treatment:

Lice-killing shampoo or lotion; available over the counter at your nearest drug store or by a prescription from your physician. Use a fine tooth comb to remove treated nits. Only people with live lice should receive treatments (not just nits/eggs). Lice shampoos are a pesticide and should be used cautiously and only according to directions. Sometimes, a second treatment is recommended 7-10 days later to kill nits that may have survived the first treatment. If live lice remain after more than two treatments consult with your healthcare provider. Use a fine tooth comb or nit comb to remove nits and any live lice.

Prevention and Controlling the Spread:

Avoid sharing personal items such as hair care items, towels, bedding, clothing, hats, and headgear. Use a bandana or other head covering as a barrier if sharing of hats or headgear is necessary.

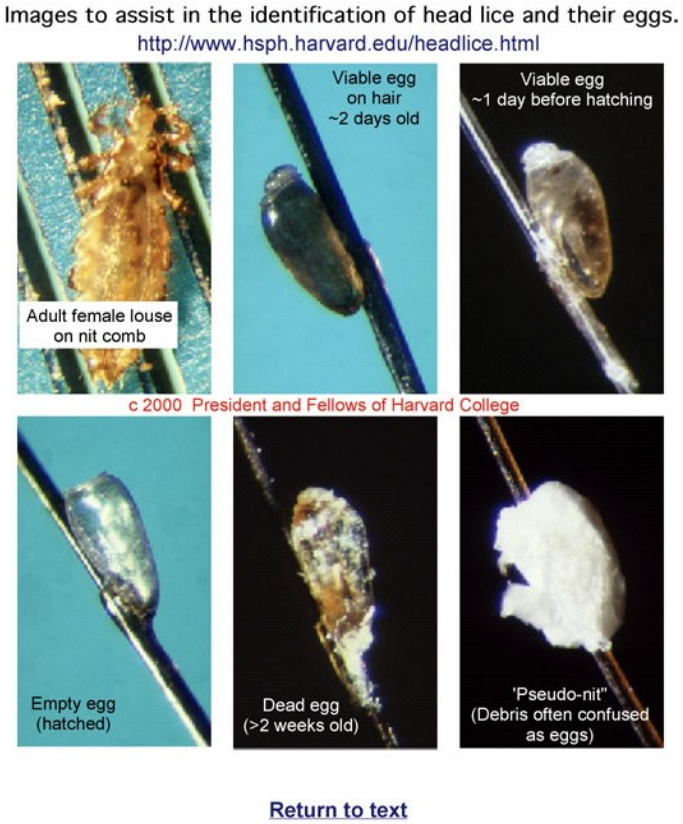
-The best thing to do if you think you or a family member might have lice is to check their head by taking sections of the hair and looking at the hair and scalp. Start at the neck and work around the head. Use a lice comb or fine tooth comb to comb sections of the hair over a towel or sheet if you think there may be lice or nits. Sometimes conditioner on the hair or having the hair wet makes it easier to comb out lice and nits. Check all of the household members if one person has lice.

-When treating someone with lice, all combs, brushes, and similar items must be disinfected by either soaking in a cleanser or by heating in water of at least 130 degrees F for 10 minutes. Clean floors, furniture, mattresses, and carpeting by thorough vacuuming. Clothing, bedding and especially pajamas or sleep clothes should be washed in hot water (130 degree F or higher) and dried in a hot dryer for at least 20 minutes before being used. Non-washable clothing, linens, and stuffed toys can be dry cleaned or sealed in plastic bag for 2 weeks. *Focus more on appropriate treatment and combing and focus less on household cleaning as this has been found to be more effective.*

-Notify others that your child or family member may have had close, head to head contact with if you find that you or your child has lice. Especially think about notifying friends from sleepovers, play times, parties, or sports events. Children with evidence of lice may go home at end of day and return after initial treatment. Some providers have other policies.

Head Lice

Photo



ILLINOIS DEPARTMENT OF PUBLIC HEALTH

HEALTH BEAT

HEAD LICE

What are the symptoms of a head lice infestation?

The earliest and most common symptom of a head lice infestation is itching, particularly in the area behind the ears and at the nape of the neck. Intense scratching may lead to secondary bacterial infection.

How are head lice spread?

Head lice can be passed from person to person through direct contact. But they also can be transferred indirectly among clothing items when coats, hats and scarves hang or are stored touching one another (in cloak rooms or when these items are placed against one another on coat hooks or racks). Head lice also can be spread when infested hair brushes or combs are shared or when infested bedding, towels or shower caps are shared. Once present in a home, school or institutional environment, head lice usually spread rapidly.

There are many misconceptions about head lice. They do not transmit communicable diseases. They do not jump or fly; they can only crawl. Head lice depend completely on their host for nourishment; their only source of food is human blood. The prevalence of head lice infestation is no different in individuals with long hair than in those with short hair. Head lice seldom occur on eyebrows or eyelashes. They infest persons from all socioeconomic levels, without regard for age, race, sex or standards of personal hygiene. Animals are not a source of human lice.

How long do head lice live?

The life span of an adult louse on a host ranges up to 30 days. During this time, the female head louse can deposit about 90 eggs. After incubating for seven to 10 days, the nits hatch and, after another 10 days, mature into adult head lice and the cycle begins again. Off the host, adult head lice can live about two to four days at 74 degrees Fahrenheit (F) and one to two days at 86 degrees. Nits will remain alive off the host for up to 10 days; they will not hatch at or below room temperature (68 degrees F).

How are head lice infestations treated?

Both prescription and over-the-counter remedies are effective in treating head lice. But it is

important that pregnant women and infants be treated under the direction of a physician because of concerns about potentially adverse effects. Be careful not to use topical preparations more frequently and over longer periods of time than directed. Overuse of these preparations may cause dermatitis or result in absorption of potentially toxic quantities of the drug. Since agents that kill lice may not kill nits completely even when used according to directions the U. S. Centers for Disease Control and Prevention (CDC) recommends that infested patients be treated twice. The interval between treatments should approximate the incubation period for nits (seven to 10 days) so the second application will kill any newly hatched parasites. Waiting longer than 10 days to apply a second treatment may allow some parasites to mature and lay more eggs.

All persons who have head lice in a household should be treated. To treat an infested person--

- Remove all clothing;
- Apply head lice medication according to label instructions (do not bathe before treatment), using a towel to protect the eyes;
- Have the person bathe and put on clean clothing after treatment; and
- Repeat treatment in seven to 10 days.

Special fine-tooth combs (nit combs) are readily available and can be used to scrape nits and lice off the hair shaft. Combing out nits and lice after proper treatment is not necessary to eliminate infestation, but it may be used for cosmetic reasons or may be required by school "nit-free" policies or by health authorities. Parents and guardians should check treated children for lice and nits daily for two or three weeks after treatment.

Should objects (e.g., clothing, furniture, etc.) be treated?

Objects that are able to harbor head lice and serve as vehicles of transmission should be treated.

- Exposing lice and nits to temperatures above 125 degrees F for 10 minutes is lethal. Most personal articles of clothing and bedding can be disinfested by machine washing in hot water or machine drying for at least 20 minutes using the hot cycle. Be sure to allow time between loads for water to reheat to the disinfesting temperature.
- Place non-washable personal articles of clothing or bedding in the dryer on high heat for at least 20 minutes, dry clean or seal non-washable fabrics in a plastic bag for a minimum of 10 days.
- Place combs and brushes in a pan of water and heat on a stove to about 150 degrees F for 10 minutes. If heating may damage combs or brushes, soak them for one hour in a phenol solution (e.g., Lysol®). To prevent the spread of head lice, do not share combs, brushes, hats, coats, towels or other articles that come in contact with the head, neck and shoulders.
- Thoroughly vacuum or clean car seats, bus seats, and individual infant and car seats according to manufacturer's directions.

- Fumigating rooms and using insecticidal sprays on furniture and carpets are not recommended to kill head lice; **thorough** vacuuming of houses and rooms inhabited by infested persons is sufficient.

Use of product brand names® does not constitute product endorsement.

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Questions or Comments

Lake County Health Department/Community Health Center

Hepatitis A*

Reportable Disease: Knowing the facts

Hepatitis A is an infection of the liver. In recent years, child care settings have been recognized as an important source of Hepatitis A epidemics which have spread into the community at-large. Spread occurs most commonly when diapered children are present.

Did You Know?

There is also a vaccine for Hepatitis A– check with your healthcare provider to see if you or your children should get this vaccine.

What are the symptoms?

Onset is usually sudden, with loss of appetite, nausea, tiredness, fever and stomach ache. Dark colored urine, light-colored stools, and jaundice (yellowing of eyes or skin) may appear a few days later. Jaundice occurs more often among adults than children. Symptoms vary greatly from severe to none at all. Symptoms may appear 2-6 weeks after a person is exposed to the virus, most commonly one month. Children younger than 6 years of age usually have few or no symptoms of Hepatitis A.

How's it spread?

Hepatitis A virus leave the body through the stool of an infected person and enter another person when hands, food, drinks, or objects (such as toys) contaminated with stool, are placed in the mouth. Spread can occur when a person does not wash his or her hands after using the toilet or changing diapers and later prepares or eats food. An infected person can pass the virus 2-6 weeks after the onset of symptoms. Once an individual recovers from hepatitis A, he or she is immune for life and does not continue to carry the virus.

How soon do symptoms appear?

Average of 30 days, with a range of 15-50 days

When and for how long is a person able to spread Hepatitis A?

The contagious period begins about 2 weeks before symptoms appear and continues up to 1 week after onset of jaundice (a yellowing of the skin and/or whites of the eyes). Rarely does the virus persist beyond this period. Because of the delay of symptoms, a person may pass the disease without knowing it.

What is the treatment?

Immune Globulin may be needed to help boost the immune system. Generally, bed rest and fluid hydration is all that is needed.

How do I prevent the spread of Hepatitis A?

-Immune Globulin (IG) should be given to close contacts to the infected person within 14 days of exposure (counted from first day of the onset of symptoms) so check with your doctor if you think you may have symptoms of Hepatitis A.

-Wash hands thoroughly with soap and running water after using the toilet, changing diapers, and before preparing or eating food. Thorough hand washing is the best way to prevent spread of infectious diseases found in the intestinal tract. Help children to wash hands as well. Keep up good hand washing even after symptoms have stopped as you could still have the bacteria in your body.

-Clean and disinfect contaminated areas (toilets, diapering areas, faucets) daily or when soiled. Sanitize toys as needed and at least daily.

-Children and caregivers with Hepatitis A should be excluded for one week after onset of illness.

-*Your doctor should report your illness to local health department..

Lake County Health Department/Community Health Center

Health Alert: Hepatitis A*

Date: _____

Dear Parent or Guardian

An individual at _____has been diagnosed or is undergoing evaluation for an illness due to Hepatitis A. Hepatitis A is an infection of the liver caused by the "A" type of Hepatitis virus.

Watch for these symptoms:

Onset is usually sudden, with loss of appetite, nausea, tiredness, fever and stomach ache. Dark colored urine, light-colored stools, and jaundice (yellowing of eyes or skin) may appear a few days later. Jaundice occurs more often among adults than children. Symptoms vary greatly from severe to none at all. Symptoms may appear about 2-6 weeks after a person is exposed to the virus, most commonly about one month.

How it is spread:

-Hepatitis A virus leaves the body through the stool of an infected person and enter another person when hands, food, drinks or objects (such as toys) contaminated with stool, are placed in the mouth.

-People are most contagious 2 weeks before the onset of symptoms.

-Spread can occur when a person does not wash his or her hands after using the toilet or changing diapers and later prepares or eats food.

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

Prevention and Controlling the Spread:

-Immune Globulin (IG) should be given to close contacts to the infected person within 14 days of exposure (counted from first day of the onset of symptoms) so check with your doctor if you think you may have symptoms of Hepatitis A. There is also a vaccine to prevent getting Hepatitis A– check with your healthcare provider to see if you should get this vaccine.

-Children and caregivers should be excluded for 1 week after onset of illness.

-Wash hands thoroughly with soap and running water after using the toilet, changing diapers, and before preparing or eating food. Thorough hand washing is the best way to prevent spread of infectious diseases found in the intestinal tract. Help children to wash hands as well. Keep up good hand washing even after symptoms have stopped as you could still have the bacteria in your body.

-Clean and disinfect contaminated areas (toilets, diapering areas, faucets) daily or when soiled. Sanitize toys as needed and at least daily.

-Your doctor should report your illness to local health department.

Lake County Health Department/Community Health Center

Hepatitis B*

Reportable Disease: Knowing the facts

Hepatitis B virus (HBV) causes a serious infection that affects the liver. This virus can cause life threatening diseases, such as cirrhosis of the liver and liver cancer.

Did You Know?

Without vaccination, Hepatitis B affects:

90% of infants infected at birth

30% of children infected age 1-5

6% of persons infected after age 5

How is hepatitis B spread?

Virus is present in the blood or other body fluids that may contain blood. It is spread when blood from an infected person enters the body of the uninfected person. Transmission may be through a blood transfusion or tissue donations received before testing of the blood supply was started in 1992, sexual contact, sharing of needles or works for IV drug abuse, from mother to child at birth, or from an object contaminated with infected blood. It is not spread through casual contact, from food or water, from hugging, kissing, coughing, or sneezing, or from sharing eating utensils.

What are the symptoms of hepatitis B?

Symptoms vary greatly, from none at all, to severe illness. Symptoms for an acute (just infected) infection may include flu-like symptoms, fatigue, mild fever, muscle and joint aches, nausea, vomiting, loss of appetite, dull abdominal pain, and occasional diarrhea. Some persons may develop jaundice, a yellow cast to the skin and/or whites of the eyes, accompanied by dark urine, light-colored stools, and itching of the skin.

How soon do symptoms appear?

Probably from 45 to 160 days after exposure with an average of 90 days.

When and for how long is a person able to spread this virus?

Persons with either acute or chronic HBV are considered infectious anytime that Hepatitis B surface Antigen (HbsAg) is present in the blood. When symptoms are present in persons with acute HBV infection, HbsAg can be found in blood and body fluids for 1-2 months before and after the onset of symptoms.

What is the treatment for hepatitis B?

Supportive treatment during the acute phase. Interferon treatment for chronic carriers has a success rate between 25% to 50% of cases.

How do I prevent the spread of hepatitis B?

-Vaccination is the best way to prevent Hepatitis B. This vaccine is routinely given to infants and children. Check with your healthcare provider about this immunization to see if you have received it or still need to become immunized.

-Universal precautions must be used consistently to prevent exposure to blood borne pathogens like Hepatitis B

-Clean and disinfect spills of blood and body fluids found on surfaces or items, as HBV can survive outside the body at least 7 days and still be capable of causing infection.

-*Report all cases to the local health department.

Herpes Simplex-Oral

Knowing the facts

Herpes simplex is a virus that can cause many types of infections in all ages. Children usually have herpes simplex sores in or around the mouth.

Did You Know?

This virus can be shed by people who have no signs of the illness.

How is this spread?
Direct contact is the most common way this is spread by kissing with open sores. It can also be spread through contact with saliva from mouthed toys

What are the symptoms?

Symptoms include fever, irritability, tender, swollen lymph nodes, painful blisters on or around the mouth. Blisters may weep fluid. They crus over. Some children who shed this virus may have not symptoms.

How soon do symptoms appear?

Symptoms begin 2 days to 2 weeks after exposure.

When and how long is a person able to spread this?
Someone can shed this virus from one to several weeks after symptoms develop.

What is the treatment for this?
Seek medical advice for any treatment.

How do I prevent the spread?

- Use good hand washing technique at all times
- Avoid kissing or nuzzling children who have cold sores
- Do not share food or drinks with children or staff.
- Do not touch sores.
- Avoid contact with saliva from mouthed toys or objects. Clean toys regularly.
- Exclude if child has mouth ulcers and blisters and does not have control of drooling. Exclude if child is unable to participate in the activities of the child care and staff cannot care for child without compromising health and safety of other children.

Human Immunodeficiency Virus (HIV)

Knowing the facts

HIV infection leads to failure of the human immune system that leaves the body with decreased ability to fight infections and cancers. There can be a long period without symptoms. Some people with HIV infection will develop AIDS.

Did You Know?

During the mid 1990's, advances in HIV treatments slowed the progression of HIV infection to AIDS. Better treatments also led to dramatic decreases in deaths among persons with AIDS living in the US

How is this spread?

HIV may be passed from one person to another when infected blood, semen or vaginal secretions come in contact with an uninfected person's broken skin or mucous membranes. In addition, infected pregnant women can pass HIV to their baby during pregnancy or delivery, as well as through breast-feeding.

What are the symptoms?

HIV many have no symptoms for many years. Some may become ill with a fever, night sweats, sore throat, general tiredness, swollen lymph glands and a skin rash lasting a few days to a few weeks. These early symptoms then go away but the virus remains in the body. This causes increasing loss of immune functions that results in the body becoming unable to fight off infections and other illnesses.

How soon do symptoms appear?

Variable.

When and how long is a person able to spread this?

Presumed to begin early after onset of HIV infection and extend probably throughout life.

What is the treatment for this?

Antiviral medications are used to treat HIV.

How do I prevent the spread?

-Consistent use of standard (universal) precautions.

Use of gloves when there is potential exposure to blood

Careful hand washing.

-No exclusion from child care is necessary.

Lake County Health Department/Community Health Center

Impetigo

Knowing the facts

Impetigo is a skin infection caused by *Streptococcus or Staphylococcus bacteria.* Impetigo usually affects pre-school and school-age children, especially in the summer.

Did You Know?

Impetigo can sometimes look like tiny blisters and then crust over.

How is impetigo spread?

Impetigo is highly contagious through direct physical contact with an infected person or from contaminated surfaces. Germs enter an opening on the skin (e.g. a cut, insect bite, burn) and causes oozing leading to honey-colored crusted sores.

What are the symptoms of impetigo?

If caused by Group A streptococcus, it begins as reddened areas on the skin that peak to blisters that enlarge, rupture, and become covered with honey-colored gummy crusts. These crusts are easily removed, exposing moist red skin lesions underneath, which quickly will crust over again. The lesions may itch. If caused by staph, there may be larger, fluid-containing blisters that first appear clear, then cloudy, and are more likely to stay intact longer on the skin without bursting. Fever is not usually associated with impetigo. Lesions may appear anywhere on the skin but are more common around the nose and mouth.

How soon do symptoms appear?

Symptoms commonly appear 7-10 days after bacteria attach to the skin.

When and for how long is a person able to spread impetigo?

Until sores are healed or child has been treated with topical or oral antibiotics for at least 24 hours.

What is the treatment for impetigo?

Topical antibiotics, applied directly to the skin when only a few lesions are present; oral or injectable antibiotics when there are more lesions.

How do I prevent the spread of impetigo?

-Careful hand washing with soap and running water by the infected person and those who have contact with them. Use paper towels.

-Children or individuals should be excluded from school or childcare until 24 hours after treatment begins. If more that one child in a group develop impetigo, contact your local health Department.

-Lesions should be loosely covered while in school or childcare, if possible. Discourage children from touching the lesions.

-The infected person should keep fingernails short.

-Separate bed linens, towels, and clothing from other household members; wash these items in hot water and dried with hot heat.

Lake County Health Department/Community Health Center

Health Alert: Impetigo

Date: _____

Dear Parent or Guardian

An individual at _____has been found to have impetigo, a skin disease, caused by Streptococcus or Staphylococcus bacteria.

Watch for these symptoms:

Reddened areas on the skin that peak to blisters that enlarge, rupture, and become covered with honey-colored gummy crusts. These crusts are easily removed, exposing moist red skin lesions underneath, which quickly will crust over again. These may itch.

How it is spread:

Impetigo is highly contagious under conditions of close physical contact with an infected person and/or indirect contact (using same handkerchief, towels, napkins, pencils, toys, etc.). Symptoms commonly appear 7-10 days after bacteria attach to the skin.

Treatment:

Topical antibiotics, applied directly to the skin when only a few lesions are present; oral or injectable antibiotics when there are more lesions.

Prevention and Controlling the Spread:

-Careful hand washing with soap and running water by the infected person and those who have contact with them. Use soap and separate towels or substitute paper towels for cloth ones until the infection is gone.

-Children or individuals should be excluded from school or childcare until 24 hours after treatment begins. -Lesions should be covered loosely while in school or childcare, if possible. Discourage children from touching the lesions.

-The infected person should keep fingernails short.

-Separate bed linens, towels, and clothing from other household members; wash these items in hot water and dried with hot heat.

Impetigo

Photo

Lake County Health Department/Community Health Center

Influenza Like Illness

Knowing the facts

Every year in the United States, on average 5% to 20% of the population gets the seasonal flu; more that 200,000 people are hospitalized from flu complications, and: about 36,000 people die from flu. New influenza viruses like H1N1 occur occasionally. The impact of novel or new influenza viruses is unpredictable.

Did You Know?

Colds are caused by different viruses than the flu. In general, the flu is worse than the common cold, and symptoms such as fever, body aches, extreme tiredness, and dry cough are more common and intense. Colds generally do not result in serious health problems, such as pneumonia, bacterial infections, or hospitalizations-while influenza does often have complication.

How is this spread?
Influenza is spread to others by droplets that are expelled during sneezing and coughing, and by direct contact with nasal and throat secretions of infected persons. You can spread flu to others shortly before you start having symptoms and for about 5 days after your symptoms develop.

What are the symptoms?

Fever (usually high), cough, sore throat, runny or stuffy nose, headache, extreme tiredness, muscle aches. Stomach symptoms, such as nausea, vomiting and diarrhea, also can occur but are more common in children.

How soon do symptoms appear?

Symptoms commonly appear 1-4 days after the virus enters the body.

When and how long is a person able to spread this?
Most healthy adults may be able to infect others beginning 1 day before symptoms develop and up to 5 days after becoming sick. Children may pass the virus for longer than seven days.

What is the treatment for this?
Treatment usually involves supportive care– fluids, rest, or over the counter medications for symptoms. Check with your healthcare provider before giving over the counter cough and cold medication to young children

How do I prevent the spread?

- The best way to prevent getting the flu is by getting vaccinated each year against it. Some people can even get a vaccine through a mist in the nose-check with your health care provider to see if they have this kind of vaccine.
- Thorough hand washing is the best way to prevent spread of infectious diseases. Help children to wash hands.
- Practice good cough and sneeze habits by coughing and sneezing into your elbow or sleeve. If you do use a tissue throw it away and wash your hands. Encourage children not to touch their eyes, nose, or mouth.
- Stay home and away from others when you are ill to prevent others from getting sick too.
- Remember that serious illness from the flu is more likely in certain group of people including those over 65, pregnant women, people with certain chronic medical conditions and young children.
- Consult your doctor early on for the best treatment, but also be aware of emergency warning signs that require urgent medical attention.
- Children and staff should be excluded until fever free for 24 hours without the use of fever lowering medications and the child feels well enough to participate in the activities of the child care. A physician's note should NOT be required for readmission to child care.

Lake County Health Department/Community Health Center

Health Alert: Influenza

Date: _____

Dear Parent or Guardian

Several children at our child care in the last week have symptoms of an influenza like illness. The flu, as it is usually called, is a respiratory illness that can be mild to severe and is contagious to others.

Watch for these symptoms:

Symptoms are fever, cough sore throat, runny or stuffy nose, headache, extreme tiredness, muscle aches. Stomach symptoms such as nausea, vomiting and diarrhea also occur but are more common in children that adults. Colds are usually milder than the flu. Colds generally do not result in serious health problems, such as pneumonia, bacterial infections, or hospitalizations– while flu can have complications.

How it is spread:

Influenza is spread to others by droplets that are expelled during sneezing and coughing of someone who has the flu, and by direct contact with nasal and throat secretions of infected persons. You can spread flu to others shortly before you start having symptoms and about 5 days after your symptoms stop.

Diagnosis and Treatment:

Treatment usual involves supportive care– fluids, rest, or over the counter medications for symptoms. Check with your healthcare provider before giving over the counter cough and cold medications to young children. Aspirin should be given only with physician approval. Be aware of emergency warning signs that require urgent medical attention such as fast breathing, bluish or gray skin color, not drinking enough fluids.

Prevention and Controlling the Spread:

How do I prevent the spread of influenza?

-The best way to prevent getting the flu is by getting vaccinated each year against it. Some people can even get a vaccine through a mist in the nose– check with your healthcare provider to see if they have this kind of vaccine.

-Thorough hand washing is the best way to prevent spread of infectious diseases. Help children to wash hands as well.

-Practice good cough and sneeze habits by coughing and sneezing into your elbow or sleeve. If you do use a tissue throw it away and wash your hands. Encourage children not to touch their eyes, nose or mouth.

-Stay home and away from others as much as possible when you are ill to prevent others from getting sick too.

-Remember that serious illness from the flu is more likely in certain groups of people including people 65 and older, pregnant women, people with certain chronic medical conditions and young children.

-Consult your doctor early on for the best treatment, but also be aware of emergency warning signs that require urgent medical attention.

-Child and staff should be excluded until fever free for 24 hours without the use of fever lowering medications and the child feels well enough to participate in the activities of the child care. A physician's note should NOT be required to readmission to child care.

Lyme Disease

Knowing the facts

Lyme disease is caused by a bacteria that is transmitted when certain ticks attach to a person's skin and feed on that person's blood. The common name for this type of tick is the deer tick.

Did You Know?

There are other illnesses that are transmitted by ticks. Parents should discuss treatment with child's health care provider.

How is this spread?
When an infected tick attaches and feeds on humans long enough. This typically takes more than 36 hours.

What are the symptoms?

Rash that expands, is large, circular or oval shaped with a clear center. Fever headache, mild neck stiffness, flu-like symptoms may also occur.

How soon do symptoms appear?

They develop in 3 to 31 days from tick bite to appearance of rash.

When and how long is a person able to spread this?
Lyme disease is not contagious except through blood transfusions.

What is the treatment for this?
Antibiotics are used to treat this infection. Untreated Lyme disease usually resolves by itself but a few people may develop arthritis and other complications

How do I prevent the spread?

-Avoid tick habitats for example tall grassy areas, bushes, wooded areas if possible. Walk in center of trails to limit possible contact.

-Dress children with hats, light-colored clothing, long sleeves and pants tucked into socks and closed shoes if in tick habitat.

-Some parents spray permethrin on child's clothing when it is off child and in a well ventilated ares.

-Diethyltoluamide (DEET) may be applied to exposed skin according to CDC instructions.

-Do not use a sunscreen with DEET since sunscreens are often applied repeatedly because they can be washed off. DEET is not water soluble and will last up to 8 hours.

-Inspect child's skin and scalp after possible tick exposure.

-Be sure to tell parents if the child has had a tick bite when in child care.

Lyme Disease

Photo

Lake County Health Department/Community Health Center

Measles (Rubeola)*

Reportable Disease: Knowing the facts

Measles are caused by the *measles virus*; a paramyxovirus. Measles are also called rubeola, red measles, or hard measles. Measles is in an increasingly rare infection in the United States because of childhood immunization against the disease.

Did You Know?

Although more than half of all countries now use measles vaccine, measles still remain a common disease in many parts of the world. An occurrence here in the US would generally be found in unvaccinated children or adults exposed to an infected person from another country.

How is measles spread?

Measles are spread to others by droplets that are expelled during sneezing and coughing, some of these remain in the air. It can be spread by direct contact with nasal and throat secretions of infected persons.

What are the symptoms of measles?

Initial symptoms include fever, watery eyes, runny nose, and hacking cough. A red blotchy rash appears on the 3rd to 7th day, usually beginning on the neck and face, spreading down the trunk and out the arms and legs. Measles is often complicated by an ear infection or pneumonia. In serious cases, encephalitis (inflammation of the brain) may occur that can lead to convulsions, deafness, or mental retardation. Death is rare.

How soon do symptoms appear?

Symptoms commonly appear 8-12 days from exposure to onset of signs or symptoms.

When and for how long is a person able to spread measles?

Measles is highly contagious. A person is usually able to transmit measles from 1-2 days before the first signs appear 3-5 days before onset of rash to 4 days after the appearance of the rash. Of those not immunized, 90% of them will become infected with measles upon close contact with an infected person.

What is the treatment for measles?

There is no treatment for measles– only supportive care for symptoms

How do I prevent the spread of measles?

-Get immunized or check your immunization status for the measles-mumps-rubella (MMR) vaccine. Although measles may seem like a harmless childhood illness it can have serious health consequences for infants who are too young to be vaccinated and people with other health conditions.

-Persons born before 1957 are generally considered to be immune to measles.

-Children or adults who have measles must remain isolated and excluded from school and work for 4 days after rash onset. Unvaccinated persons must remain excluded from school and work for 21 days after the last case of measles is present in the facility where the exposure occurred.

-Once exposure has occurred vaccine may prevent disease if given to unvaccinated persons within 72 hours.

-If your suspect that your child has the measles, keep him or her home and contact your physician to arrange for a visit and diagnosis

-*Report all cases to the local health department . Follow their additional directions for exclusion and readmission.

Lake County Health Department/Community Health Center

Health Alert: Measles*

Date: _____

Dear Parent or Guardian

An individual at _____has been diagnosed or is undergoing evaluation for an illness due to Measles, an infection caused by a paramyxovirus; also called the measles virus or Rubeola. The measles is a rash illness that is very contagious.

Watch for these symptoms:

Initial symptoms are cold-like symptoms that include fever, watery eyes, runny nose, and hacking cough. A red blotchy rash appears on the 3rd to 7th day, usually beginning on the neck and face, spreading down the trunk and out the arms and legs. Measles is often complicated by an ear infection or pneumonia. In serious cases, encephalitis (inflammation of the brain) may occur that can lead to convulsions, deafness, or mental retardation. Death is rare.

How it is spread:

Measles are spread to others by droplets that are expelled during sneezing and coughing, and by direct contact with nasal and throat secretions of infected persons.

Diagnosis and Treatment:

There is no treatment for measles– only supportive care for symptoms. Your doctor can do lab tests to diagnose measles.

Prevention and Controlling the Spread:

-How do I prevent the spread of measles?

-Get immunized or check your immunization status for the measles-mumps-rubella (MMR) vaccine. Although measles may seem like a harmless childhood illness it can have serious health consequences for infants who are too young to be vaccinated and people with other health conditions.

-Persons born before 1957 are generally considered to be immune to measles.

-If your suspect that your child has the measles, keep him or her home and contact your physician to arrange for a visit and diagnosis

-Children or adults who have measles must remain isolated and excluded from school and work for 4 days after symptom onset. Unvaccinated persons must remain excluded from school and work for 21 days after the last case of measles is present in the facility where the exposure occurred.

-Thorough hand washing is the best way to prevent spread of infectious diseases. Help children to wash hands as well.

-Practice good cough and sneeze habits by coughing and sneezing into your elbow or sleeve. If you do use a tissue throw it away and wash your hands. Encourage children not to touch their eyes, nose or mouth.

-* Your doctor should report your illness to local health department.

Measles

Photo

Lake County Health Department/Community Health Center

Meningococcal Disease

(bacterial meningitis caused by Neisseria Meningitidis)

Reportable Disease: Knowing the facts

Meningicoccal disease is an infection of the membranes covering the brain and spinal cord or a severe blood infection (meningococcemia). There are 3 types of bacteria that are responsible for most of the bacterial types of meningitis. Meningogoccal Disease often refers to infection caused by the bacteria *Neisseria Meningitidis.*

Did You Know?

Meningitis is usually caused by a viral or bacterial infection. Knowing whether meningitis is caused by a virus or bacteria is important because the severity of illness and the treatment differ. It also is important to know which type of bacteria is causing the meningitis because antibiotics can prevent some types from spreading and infecting other people.

How is bacterial meningitis spread?

Meningococcal disease is not highly contagious. It is transmitted from person to person through direct contact with nose and throat secretions. An infected person can transmit it through coughing or sneezing directly into the face of others, kissing a person on the mouth, or sharing a glass/cup. Up to 5% to 10% of the entire population may be asymptomatic carriers of *N. meningitides*; less than 1% of them will progress to invasive disease

What are the symptoms of bacterial meningitis?

High fever, headache, and stiff neck are common symptoms of meningitis in anyone over the age of 2 years. These symptoms can develop over several hours, or they may take 1 to 2 days. Other symptoms may include nausea, vomiting, discomfort looking into bright lights, confusion, and sleepiness. In newborns and small infants, the classic symptoms of fever, headache, and neck stiffness may be absent or difficult to detect, and the infant may only appear slow or inactive, or be irritable, have vomiting, or be feeding poorly. As the disease progresses, patients of any age may have seizures.

How soon do symptoms appear?

Symptoms appear 4 to 10 days after exposure.

When and for how long is a person able to spread meningitis?

Until bacteria are no longer present in discharges from nose and mouth. They usually disappear from the nasal area within 24 hours of taking an antibiotic.

What is the treatment for bacterial meningitis?

Antibiotic treatment for those who are ill and sometimes for the close contacts of the ill person are important as well as supportive treatment for symptoms.

How do I prevent the spread of bacterial meningitis?

-Vaccination against bacterial meningitis is the best way to prevent the illness caused by the most common strains of bacterial meningitis. It is recommended for all adolescents 11-18 years and some infants who may be at high risk. Some adults may also need this vaccine– check with your healthcare provider for more information.

-Practicing good cough and sneeze hygiene by covering your coughs and sneezes with your sleeves and good handwashing are always good practices to help reduce the spread of illness.

-Healthcare providers should report your illness to the local health department

Lake County Health Department/Community Health Center

Health Alert: Bacterial Meningitis*

Date: _____

Dear Parent or Guardian

An individual at _____has been diagnosed or is undergoing evaluation for an illness due to bacterial meningitis. Meningicoccal disease is an infection of the membranes covering the brain and spinal cord or a severe blood infection (meningococcemia). Meningogoccal Disease often refers to infection caused by the bacteria Neisseria Meningitidis.

Watch for these symptoms:

High fever, headache, and stiff neck are common symptoms of meningitis in anyone over the age of 2 years. These symptoms can develop over several hours, or they may take 1 to 2 days. Other symptoms may include nausea, vomiting, discomfort looking into bright lights, confusion, and sleepiness. In newborns and small infants, the classic symptoms of fever, headache, and neck stiffness may be absent or difficult to detect, and the infant may only appear slow or inactive, or be irritable, have vomiting, or be feeding poorly. As the disease progresses, patients of any age may have seizures.

How it is spread:

Meningococcal disease is not highly contagious. It is transmitted from person to person through direct contact with nose and throat secretions. An infected person can transmit it through coughing or sneezing directly into the face of others, kissing a person on the mouth, or sharing a glass/cup. Casual contact or just being near someone else rarely causes transmission.

Diagnosis and Treatment:

Early diagnosis and treatment are very important. If symptoms occur, the patient should see a doctor immediately. The diagnosis is usually made by growing bacteria from a sample of spinal fluid. Identification of the type of bacteria responsible is important for selection of correct antibiotics.

Prevention and Controlling the Spread:

-Vaccination against bacterial meningitis is the best way to prevent the illness caused by the most common strains of bacterial meningitis. It is recommended for all adolescents 11-18 years and some infants who may be at high risk. Some adults may also need this vaccine– check with your healthcare provider for more information.

-Practicing good cough and sneeze hygiene by covering your coughs and sneezes with your sleeves and good hand washing are always good practices to help reduce the spread of illness.

-*Healthcare providers should report your illness to the local health department.

Lake County Health Department/Community Health Center

Viral Meningitis

Knowing the facts

Viral Meningitis is caused by many different viruses; 70 – 90% of case are due to enteroviruses, such as: coxsackievirus or echovirus. In most people who are otherwise healthy the virus can cause serious illness but people recover without complications. Meningitis caused by viruses are different than those causing meningococcal disease which can be often be more serious.

Did You Know?

Enteroviruses, for example, are very common during the summer and early fall, and many people are exposed to them. However, most infected persons either have no symptoms or develop only a cold or rash with low-grade fever. Only a small proportion of infected persons actually develop meningitis.

How is viral meningitis spread?

If you are around someone who has viral meningitis, you have a moderate chance of becoming infected, but a very small chance of developing meningitis. Viral meningitis may be spread through direct contact with nose and throat secretions. Sharing a glass, cup, or eating utensil, coughing or sneezing into the face of another person, or sharing other items that go into the mouth are possible ways of spreading the infection.

What are the symptoms of viral meningitis?

Meningitis can produce mild symptoms, such as headache, low-grade fever and tiredness lasting 7-10 days, in some patients. In other patients, the symptoms can be severe and begin suddenly with fever, headache and stiff neck accompanied by some combination of other symptoms: decreased appetite, nausea, vomiting, sensitivity to bright light, confusion and sleepiness. In newborns and infants, the classic findings of fever, headache and stiff neck may or may not be present. An infant may have no other symptoms than being listless, irritable, and sleepy, having little interest in feeding and possibly vomiting.

How soon do symptoms appear?

Varies with the specific virus. For meningitis caused by Enteroviruses, usually 3 to 14 days.

When and for how long is a person able to spread this virus?

Also varies with the specific virus. Enteroviruses are communicable during and possibly for several weeks after illness (through contact with stool). Infected persons who may not seem ill are able to spread infection. You can usually spread the virus to someone else beginning about 3 days after you are infected until about 10 days after you develop symptoms.

What is the treatment for viral meningitis?

Antibiotics are not effective against a viral infection. Supportive treatment such as fluids and rest is often recommended.

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How do I prevent the spread of viral meningitis?

-Children should be excluded from school/childcare until the absence of symptoms (fever, headache, etc.)

-Good hand washing as well as good cough hygiene (covering nose/mouth and discarding soiled tissues).

-Do not share food, drinks, or any utensils with others

-Disinfect articles soiled by or in contact with an infected person.

Lake County Health Department/Community Health Center

Health Alert: Viral Meningitis

Date: _____

Dear Parent or Guardian

An individual at _____has been diagnosed or is undergoing evaluation for Viral Meningitis. Viral Meningitis is caused by a multitude of viruses; 70 – 90% of case are due to enteroviruses, such as: coxsackievirus or echovirus. In most people who are otherwise healthy the virus can cause serious illness but people recover without complications. Meningitis caused by viruses are different than those causing meningococcal disease which can be often be more serious.

Watch for these symptoms:

If you are around someone who has viral meningitis, you have a moderate chance of becoming infected, but a very small chance of developing meningitis. Meningitis can produce mild symptoms, such as headache, low-grade fever and tiredness lasting two to three days, in some patients. In other patients, the symptoms can be severe and begin suddenly with fever, headache and stiff neck accompanied by some combination of other symptoms: decreased appetite, nausea, vomiting, sensitivity to bright light, confusion and sleepiness. In newborns and infants, the classic findings of fever, headache and stiff neck may or may not be present. An infant may have no other symptoms than being listless, irritable, and sleepy, having little interest in feeding and possibly vomiting.

How it is spread:

Viral meningitis may be spread through direct contact with nose and throat secretions. Sharing a glass, cup, or eating utensil, coughing or sneezing into the face of another person, or sharing other items that go into the mouth are possible ways of spreading the infection. Infected persons who may not seem ill are able to spread infection. You can usually spread the virus to someone else beginning about 3 days after you are infected until about 10 days after you develop symptoms.

Treatment:

Your healthcare provider may want to do a test to determine the type of meningitis that you may have. Antibiotics are not effective against a viral infection. Supportive treatment such as fluids and rest is often recommended.

Prevention and Controlling the Spread:

-Children should be excluded from school/childcare until the absence of symptoms (fever, headache, etc.)

-Good hand washing as well as good cough hygiene (covering nose/mouth and discarding soiled tissues).

-Do not share food, drinks, or any utensils with others

-Disinfect articles soiled by or in contact with an infected person.

Lake County Health Department/Community Health Center

Molluscum Contagiosum

Knowing the facts

Molluscum contagiosum is caused by a virus and usually causes a mild skin disease that affects the outer layer of skin causing pink bumps or growths that may look like warts.

Did You Know?

Molluscum contagiosum is not usually harmful and should not prevent a child from attending day care or school.

How is mollescum spread?

The virus that causes molluscum is spread from person to person by touching the affected skin. The virus may also be spread by touching a surface with the virus on it, such as a towel, clothing, or toys. Once someone has the virus, the bumps can spread to other parts of their body by touching or scratching a bump and then touching another part of the body.

What are the symptoms of molluscum?

The virus causes small white, pink, or flesh-colored raised bumps or growths with a dimple or pit in the center. The bumps are usually smooth and firm. In most people, the growths range from about the size of a pinhead to as large as a pencil eraser (2 to 5 millimeters in diameter). The bumps may appear anywhere on the body, alone or in groups. They are usually painless, although they may be itchy, red, swollen and/or sore. They may occur anywhere on the body including the face, neck, arms, legs, abdomen, and genital area, alone or in groups. The bumps are rarely found on the palms of the hands or the soles of the feet.

When and for how long is a person able to spread molluscum?

The virus lives only in the skin and once the growths are gone, the virus is gone and you cannot spread the virus to others. Molluscum contagiosum is not like herpes viruses, which can remain dormant (“sleeping”) in your body for long periods and then reappear. So, assuming you do not come in contact with another infected person, once all the molluscum contagiosum bumps go away, you will not develop any new bumps.

What is the treatment for molluscum?

Discuss all treatment options with a health care provider. Usually no treatment is needed because the bumps disappear by themselves within 6-12 months, although this may take up to 4 years. It is not a good idea to try to remove the molluscum growths or to get rid of the fluid inside them yourself.

How do I prevent the spread of molluscum?

-Do not touch, scratch or pick at the blisters or bumps.

-Keep the bumps covered either with clothes or a water-tight bandage

-Wash your hands well and encourage children to wash their hands with soap and water often

-Do not share towels, clothing, or other personal items.

Lake County Health Department/Community Health Center

Health Alert: Molluscum Contagiousum

Date: _____

Dear Parent or Guardian

An individual at _____is undergoing evaluation or has been found to have molluscum contagiousum, Molluscum contagiosum is caused by a virus and usually causes a mild skin disease that affects the outer layer of skin causing pink bumps or growths that may look like warts. The virus is not easily spread.

Watch for these symptoms:

The virus causes small white, pink, or flesh-colored raised bumps or growths with a dimple or pit in the center. The bumps are usually smooth and firm. In most people, the growths range from about the size of a pinhead to as large as a pencil eraser (2 to 5 millimeters in diameter). The bumps may appear anywhere on the body, alone or in groups. They are usually painless, although they may be itchy, red, swollen and/or sore.

How it is spread:

The virus that causes molluscum is spread from person to person by touching the affected skin. The virus may also be spread by touching a surface with the virus on it, such as a towel, clothing, or toys. Once someone has the virus, the bumps can spread to other parts of their body by touching or scratching a bump and then touching another part of the body. The virus lives only in the skin and once the growths are gone, the virus is gone and you cannot spread the virus to others.

Treatment:

Discuss all treatment options with a health care provider. Usually no treatment is needed because the bumps disappear by themselves within 6-12 months, although this may take up to 4 years. It is not a good idea to try to remove the molluscum growths or to get rid of the fluid inside them yourself.

Prevention and Controlling the Spread:

-Molluscum is not usually harmful and should not prevent a child from attending school or childcare.

-Do not touch, scratch or pick at the blisters or bumps. Use of covered ice pack at times helps to decrease itching.

-Keep the bumps covered either with clothes or a water-tight bandage

-Wash your hands well and encourage children to wash their hands with soap and water often

-Do not share towels, clothing, or other personal items.

Molluscum Contagiosum

Photo

Lake County Health Department/Community Health Center

Mononucleosis

Knowing the facts

Mononucleosis is caused by the Epstein-Barr virus (EBV), a virus from the herpes simplex virus family. Most children are exposed to this virus at some point during their lives. Infants and children may have more mild symptoms but teens often develop full mono.

Did You Know?

As many as 95% of adults between the ages of 35 to 40 have been infected with the Epstein-Barr virus. It is important to note that symptoms related to infectious mononucleosis caused by EBV infection seldom last for more than 4 months.

How is mononucleosis spread?

Person-to-person, through saliva. Spread may occur by direct contact, such as kissing, or through items such as toys that are contaminated with saliva. Less likely is its spread through a blood transfusion.

What are the symptoms of mononucleosis?

Fever, sore throat, tiredness, and swollen glands, especially behind the neck. Sometimes, there is a rash. Young adults may have jaundice (yellowing of skin or eyes) and an enlarged spleen. Infectious mononucleosis may last from one week to several weeks and is rarely fatal. Recovery usually occurs in a few weeks, but a very small proportion of individuals may take months to regain their former level of energy.

How soon do symptoms appear?

Usually 4-6 weeks

When and for how long is a person able to spread mononucleosis?

Prolonged, from many weeks to a year or more. Some adults may become long-term carriers of the virus.

What is the treatment for mononucleosis?

Usually none, expect for supportive care for the symptoms. Short course corticosteroids may have an effect on acute symptoms but, because of their side effects, should be considered only for those with complications (airway obstruction, massively enlarged spleen). Contact sports should be avoided until the patient is recovered fully and the spleen is no longer palpable (felt by the physician). Rest and supportive care is usually recommended as treatment.

How do I prevent the spread of mononucleosis?

-Thorough hand washing with soap and running water after any contact with saliva or items contaminated with saliva.

-Do not share food, drinks or utensils with others.

- Patients with a recent history of EBV infection or an illness similar to infectious mononucleosis should not donate blood.

Lake County Health Department/Community Health Center

Health Alert: Mononucleosis

Date: _____

Dear Parent or Guardian

An individual at _____has been diagnosed or is undergoing evaluation for Mononucleosis. Mononucleosis is caused by the Epstein-Barr virus (EBV), a virus from the herpes simplex virus family. Most children are exposed to this virus at some point during their lives. Infants and children may have more mild symptoms but teens often develop full mono.

Watch for these symptoms:

Fever, sore throat, tiredness, and swollen glands, especially behind the neck. Sometimes, there is a rash. Young adults may have jaundice (yellowing of skin or eyes) and an enlarged spleen. Infectious mononucleosis may last from one week to several weeks and is rarely fatal. Recovery usually occurs in a few weeks, but a very small proportion of individuals may take months to regain their former level of energy. Symptoms usually appear in 4-6 weeks. It is important to note that symptoms related to infectious mononucleosis caused by EBV infection seldom last for more than 4 months.

How it is spread:

Person-to-person, through saliva. Spread may occur by direct contact, such as kissing, or through items such as toys that are contaminated with saliva. Less likely is its spread through a blood transfusion. People are able to spread the virus over a prolonged time. Some adults may be long-term carriers of the virus even after symptoms go away.

Treatment:

Usually None expect for supportive care for the symptoms. Short course corticosteroids may have an effect on acute symptoms but, because of their side effects, should be considered only for those with complications (airway obstruction, massively enlarged spleen). Contact sports should be avoided until the patient is recovered fully and the spleen is no longer palpable (felt by the physician). Rest and supportive care is usually recommended as treatment.

Prevention and Controlling the Spread:

-Thorough hand washing with soap and running water after any contact with saliva or items contaminated with saliva.

-Do not share food, drinks or utensils with others.

- Patients with a recent history of EBV infection or an illness similar to infectious mononucleosis should not donate blood.

Lake County Health Department/Community Health Center

MRSA*

Knowing the facts

MRSA (Methicillin Resistant Staphylococcus Aureus) is a strain of staph bacteria that has a resistance to some commonly used antibiotics. Although some antibiotics will not work against these bacteria, there are other antibiotics that can effectively treat these infections.

Did You Know?

Widespread use of antibiotics promotes the spread of antibiotic resistance. While antibiotics should be used to treat bacterial infections, they are not effective against viral infections like the common cold and flu.

How is this spread?

It is usually spread by skin-to-skin contact between individuals. It can also be spread by sharing personal items and equipment or from contact with any other surfaces soiled with secretions or drainage from infected wounds.

What are the symptoms?

Symptoms of a MRSA infection vary depending on the part of the body that is infected. Skin infections are the most common. They result in redness and warmth of the infected area with or without pus. They may look like boils, pimples, bug bites or infected wounds. If the infection spreads, deeper tissues may become involved. Often a MRSA infections begin as a sore that looks like a spider bite.

How soon do symptoms appear?

Unknown

When and how long is a person able to spread this?

Staphylococcus aureus (staph) is a kind of bacteria that is commonly found on the skin or in the noses of healthy people without causing infections. These bacteria occasionally get through the skin barrier and cause a skin or soft tissue infection. Although most of these infections are mild, such as impetigo, staph can cause more serious illness including blood, bone, or respiratory infections.

What is the treatment for this?

A health care provider may drain and clean a skin and soft tissue MRSA infection. Antibiotics should be taken as directed, making sure to take all of the doses, even if the infection is getting better, unless your doctor tells you to stop taking it. Do not share antibiotics with other people or save unfinished antibiotics to use at another time.

Exclusion:

Not needed as long as the wound can be covered and the dressing kept dry and intact. Children with MRSA infections who have draining wounds that cannot be covered or have dressings that cannot contain the drainage and/or be kept dry should be excluded from child care.

How do I prevent the spread?

-Hand washing is the most effective method of preventing the spread of staph

-Cover infected wounds with clean bandages and teach children that they should not touch other people's wounds or bandages.

-Sanitize surfaces and items that may be soiled with body fluids or secretions.

-Don't share personal items such as towels and bedding.

-Keep cuts and scrapes clean and covered until healed.

-Use non-porous gloves when cleaning children's wounds and wash hand before and after using gloves.

-*Call local health department if 2 or more cases in same time period. A MRSA infection does not require closure. the program

Lake County Health Department/Community Health Center

Mumps*

Reportable Disease: Knowing the facts

Mumps is an illness that is caused by the mumps virus, a paramyxovirus. It is the acute onset of unilateral (one side) or bilateral (both sides), tender, self-limited swelling of the parotid or a salivary gland (usually felt behind the jar and below the ear), lasting more than 2 days and without other apparent cause.

Did You Know?

Before the routine vaccination program was introduced in the United States, mumps was a common illness in infants, children and young adults. Because most people have now been vaccinated, mumps is now a rare disease in the United States. Outbreaks do still occur in unvaccinated groups.

How is mumps spread?

Mumps is spread by mucus or droplets from the nose or throat of an infected person, usually when a person coughs or sneezes. This virus can also be spread by direct contact with an infected person or contact with surfaces of items (e.g. toys) that have been touched by an infected person.

What are the symptoms of measles?

Parotitis, the swelling of the parotid gland found by the jaw and in front of the ear, is the most common symptom and occurs in 30% to 40% of infected persons. It may be on one (unilateral) or both (bilateral) sides of the face. Parotitis tends to occur within the first 2 days and may first be noted as earache and tenderness upon touch of the angle of the jaw. Symptoms tend to decrease after 1 week and usually resolve after 10 days. Fatigue, fever, and headache may precede or accompany the swelling. Severe complications are rare but may include swollen testicles or ovaries, swollen breasts, inflammation of the brain or tissues covering the brain (encephalitis/meningitis), or deafness.

How soon do symptoms appear?

Symptoms typically appear 16-18 days after infection, but can range from 12-25 days

When and for how long is a person able to spread mumps?

A person is usually able to transmit measles from 1-2 days before the onset of first cold-like symptoms until 7-9 days after the appearance of the symptoms; most infectious within first 5 days of symptoms

What is the treatment for mumps?

There is no treatment for mumps.

How do I prevent the spread of mumps?

-Children or adults with mumps should remain isolated and excluded from school until 5 days after the onset of swelling. Unvaccinated persons who have been exposed to measles should be excluded from school or work from the 12th through the 25th day after exposure to the mumps. Although mumps may seem like a harmless childhood illness it can have serious health consequences for infants who are too young to be vaccinated and people with other health conditions.

-Get immunized or check your immunization status for the measles-mumps-rubella (MMR) vaccine.

-Persons born before 1957 are generally considered to be immune to mumps.

-If you suspect that your child has the mumps, keep him or her at home and contact your physician to arrange for a visit and diagnosis

-*Report all cases to the local health department

Lake County Health Department/Community Health Center

Health Alert: Mumps*

Date: _____

Dear Parent or Guardian

An individual at _____has been diagnosed or is undergoing evaluation for an illness due to Mumps. Mumps is an illness that is caused by the mumps virus, a paramyxovirus. It is the acute onset of one side or both sides tender, self-limited swelling of the parotid or a salivary gland (usually felt behind the jaw and below the ear) , lasting more than 2 days and without other apparent cause.

Watch for these symptoms:

Parotitis, the swelling of the parotid gland found by the jaw and in front of the ear, is the most common symptom and occurs in 30% to 40% of infected persons. It may be on one (unilateral) or both (bilateral) sides

How it is spread:

Mumps is spread by mucus or droplets from the nose or throat of an infected person, usually when a person coughs or sneezes. This virus can also be spread by direct contact with an infected person or contact with surfaces of items (e.g. toys) that have been touched by an infected person.

Diagnosis and Treatment:

There is no treatment for measles– only supportive care for symptoms. Your doctor can do lab tests to diagnose mumps.

Prevention and Controlling the Spread:

-Children or adults with mumps should remain isolated and excluded from school until 5 days after the onset of swelling. Unvaccinated persons who have been exposed to mumps should be excluded from school or work from the 12th through the 25th day after exposure to the mumps. Although mumps may seem like a harmless childhood illness it can have serious health consequences for infants who are too young to be vaccinated and people with other health conditions.

-Get immunized or check your immunization status for the measles-mumps-rubella (MMR) vaccine.

-Persons born before 1957 are generally considered to be immune to mumps.

-If you suspect that your child has the mumps, keep him or her at home and contact your physician to arrange for a visit and diagnosis.

-Thorough hand washing is the best way to prevent spread of infectious diseases. Help children to wash hands as well. Practice good cough and sneeze habits by coughing and sneezing into your elbow or sleeve. If you do use a tissue throw it away and wash your hands. Encourage children not to touch their eyes, nose or mouth.

-*Report all cases to the local health department

Lake County Health Department/Community Health Center

Pertussis (Whooping Cough)*

Reportable Disease: Knowing the facts

Pertussis also called Whooping Cough. It is a contagious and fairly common bacterial infection that causes an illness from mild cough to severe disease

Did You Know?

The incidences of pertussis has increased since the 1980's. The highest risk group are children who have not completed their primary vaccination series.

How is pertussis spread?

By droplets that are expelled during sneezing and coughing.

What are the symptoms of pertussis?

Symptoms of pertussis may appear 5 to 10 days following exposure but can take up to 21 days to occur. The first symptoms of pertussis are similar to those of a common cold: a runny nose, sneezing, a low-grade fever, and a mild occasional cough. After a week or two, a persistent cough may develop, which can become severe and spasmodic with a distinctive "whooping" sound. During such an attack, the person may turn blue, vomit, and become exhausted. Between coughing attacks, the person usually appears normal.

How soon do symptoms appear?

Usually 5 – 10 days, but may be as long as 3 weeks

When and for how long is a person able to spread this pertussis?

Highly contagious in the early, cold-like stage, and at the time that the persistent and explosive bursts of coughing develop (first 2 weeks). Thereafter, the communicability gradually decreases and becomes negligible in about 3 weeks, despite continued spasmodic coughing with whoop. Those treated with antibiotics are contagious for only 5-7 days after treatment begins. Secondary attack rates for contacts of cases exceed 80% among susceptible persons.

What is the treatment for pertussis?

Antibiotic therapy as soon as possible is recommended.

How do I prevent the spread of Pertussis?

-Vaccination is the best way to prevent getting pertussis. Children get this vaccine but it is recommended that pre-teens and adults also get a booster– check with your healthcare provider about this recommendation. For adults that need a tetanus booster you should check to see if you could get one with a pertussis booster included.

-Prophylaxis (preventative treatment) with antibiotics, given within 21 days of onset of cough in the infected person, for the close contacts (i.e., face to face exposure within 3 feet of a symptomatic person, especially: family members, pregnant women in the third trimester, infants under 12 months of age) can help prevent the disease or lessen the illness.

-Disinfect articles soiled by or in contact with nose and throat discharges of infected person.

-*Report all cases to the local health department.

-Child must stay home until completing 5 days of antibiotics.

Lake County Health Department/Community Health Center

Health Alert: Pertussis (Whooping Cough)*

Date: _____

Dear Parent or Guardian

An individual at _____has been diagnosed or is undergoing evaluation for an illness due to pertussis which is often called whooping cough. Pertussis, or whooping cough, is an infectious disease caused by the bacteria *Bordetella pertussis*.

Watch for these symptoms:

Symptoms of pertussis may appear 5 to 10 days following exposure but can take up to 21 days to occur. The first symptoms of pertussis are similar to those of a common cold: a runny nose, sneezing, a low-grade fever, and a mild occasional cough. After a week or two, a persistent cough may develop, which can become severe and spasmodic with a distinctive "whooping" sound. During such an attack, the person may turn blue, vomit, and become exhausted. Between coughing attacks, the person usually appears normal.

How it is spread:

Pertussis is spread to others by droplets that are expelled during sneezing and coughing, and by direct contact with nasal and throat secretions of infected persons.

Diagnosis and Treatment:

Your healthcare provider may want to test to see if you have pertussis. Antibiotic therapy is recommended.

Prevention and Controlling the Spread:

How do I prevent the spread of Pertussis?

-Vaccination is the best way to prevent getting pertussis. Children get this vaccine but it is recommended that pre-teens and adults also get a booster– check with your healthcare provider about this recommendation. For adults that need a tetanus booster you should check to see if you could get one with a pertussis booster included.

-Prophylaxis (preventative treatment) with antibiotics, given within 21 days of onset of cough in the infected person, for the close contacts (i.e., face to face exposure within 3 feet of a symptomatic person, especially: family members, pregnant women in the third trimester, infants under 12 months of age) can help prevent the disease or lessen the illness.

-Disinfect articles soiled by or in contact with nose and throat discharges of infected person.

-*Report all cases to the local health department.

-Child must stay home until completing 5 days of antibiotics.

Lake County Health Department/Community Health Center

Pinkeye (Conjunctivitis)

Knowing the facts

Pinkeye is a common, mild eye infection or irritation. It can be caused by bacteria and often occurs with a cold or ear infection. Viruses, allergies, chemicals or irritants (e.g., smoke, dust, etc.) can also cause it.

Did You Know?

Hand washing is the best way to prevent the spread of pinkeye.

How is this spread?

This is spread when some of the discharge from the infected eye gets into an uninfected person's eyes. It can also be caused by mucus from the nose and throat during a respiratory infection. Child often pass the infection by rubbing their eyes, getting discharge on their hands, and touching another child's eyes; hands of another child who then touches his eye; an object which another child touches before putting her hand to her eyes. Providers can spread this when they use the same washcloth/towel/tissue/paper towel on another child's face.

What are the symptoms?

Bacterial-red, pink, itching, painful eye/s with more than a little green or yellow discharge. May be crusted shut in the morning.

Viral-pink, swollen, watery eye/s that are sensitive to light.

Allergic-Itching, red, tearing frequently of both eyes

Chemical-red, watery eyes often seen after swimming in chlorinated pool

How soon do symptoms appear?

This time varies .

When and how long is a person able to spread this?

Baceterial-until treatment is started.
Viral-when symptoms are present.

What is the treatment for this?

Consult a health professional for evaluation and any needed treatment. Some child care providers exclude children for 24 hours following the start of an antibiotic, if prescribed.

How do I prevent the spread?

-Make sure that all children and staff use good hand washing practices.

-Encourage the child not to rub his or her eyes.

-Always wash your hands after wiping a child's eyes.

-Use disposable tissues and towels.

-Teach children to wash their hands after wiping their eyes.

-Be sure that articles which may touch children's eyes (binoculars, toy cameras, etc.) are cleaned daily.

-Use same precautions practiced to stop the spread of respiratory diseases.

Health Alert: Pinkeye (Conjunctivitis)

Date: _____

Dear Parent or Guardian

An individual at _____has been diagnosed or is undergoing evaluation for an illness due to pinkeye or conjunctivitis. It causes redness, swelling of the thin tissue covering the white part of the eye and the inside of the eyelids. It may be caused by a bacteria, a virus, an allergy, or chemical irritation.

Watch for these symptoms:

Bacterial-red, pink, itching, painful eye/s with more than a little green or yellow discharge. May be crusted shut in the morning.

Viral-pink, swollen, watery eye/s that may be sensitive to light.

Allergic-itching, red, tearing frequently of both eyes.

Chemical-red, watery eyes often seen after swimming in a chlorinated pool.

How it is spread:

The bacterial and viral types are spread when some of the discharge from the infected eye/s gets into a uninfected person's eye/s. It can be caused by mucus from the nose and throat during a respiratory infection. Children often pass the infection by rubbing their eyes, getting the discharge on their hands, and touching another child's eyes; hands of another child who then touches his eye; an object which another child touches and then puts her hand to her eye. Providers can spread this when they use the same wash cloth/towel/ tissue/paper towel on many children.

Diagnosis and Treatment:

Consult a health professional for diagnosis and possible treatment. The role of antibiotics is unclear. Some child care providers ask for exclusion for 24 hours following the start of an antibiotic, if prescribed.

Prevention and Controlling the Spread:

Make sure that all children and staff use good hand washing practices.

-Encourage the child not to rub his or her eyes.

-Keep children's eyes wiped free of discharge and always wash your hands after wiping a child's eyes.

-Use disposable tissues and towels.

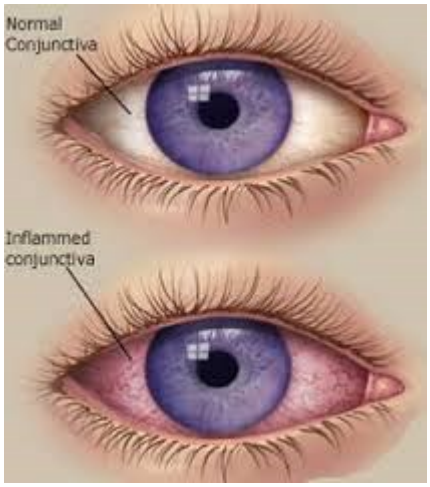
-Teach children to wash their hands after wiping their eyes.

-Be sure that articles which may touch children's eyes (binoculars, toy cameras, etc.) are cleaned daily.

-Use same precautions practiced to stop the spread of respiratory diseases.

Pink Eye

Photo



Lake County Health Department/Community Health Center

Pinworms

Knowing the facts

A pinworm ("threadworm") is a small, thin, white roundworm (nematode) called *Enterobius vermicularis* (EN-ter-O-be-us ver-MIK-u-lar-is) that sometimes lives in the colon and rectum of humans. Pinworms are about the length of a staple. While an infected person sleeps, female pinworms leave the intestine through the anus and deposit their eggs on the surrounding skin.

Did You Know?

While a pinworm infection may sound alarming, it is the most common intestinal worm infection in the U.S. They are most often found in preschool and school-aged children and mothers of infected children.

What are the symptoms?

-Rectal (bottom) itching; especially at night; irritability; disturbed sleep. Worms may be visible around the rectum upon waking or in the stool. If you suspect your child or family member has pinworms, contact your physician.

How's it spread?

-Pinworm eggs are taken into the mouth when a person fails to wash hands after scratching the rectal area, using the toilet, or handling contaminated pajamas, underwear, or bedding.

-Food or other can be contaminated in the same way. The eggs can float in the air.

-Pinworms commonly clusters in families.

How soon do symptoms appear?

Pinworm eggs become infective within a few hours after being deposited on the skin around the anus and can survive for 2 to 3 weeks on clothing, bedding, or other objects.

When and for how long is a person able to spread pinworms?

-Infection usually lasts about 2-6 weeks.

What is the treatment?

Your physician can prescribe the proper medication, which is usually given once and repeated in two weeks. In some situations, families or people living in group home settings may need to be treated as a group as re-infection is common among household members.

How do I prevent the spread of Pinworms?

-Wash hands and fingernails of children thoroughly with soap and running water after using the toilet, after contact with the rectal area, and before eating or preparing food.

-Clean toys frequently.

-Clean and sanitize surfaces used for eating, toileting, hand washing, food preparation, and diapering.

-Discourage scratching or touching bare rectal area and nail biting, keep nails short

-Bathe every morning (shower preferred) followed by a clean change of underclothing.

-After treatment, wash bed linens and night clothes (do not shake)

-Clean and vacuum house daily for several days– open blinds and curtains as eggs are sensitive to light.

-Pinworms are not dangerous.

Lake County Health Department/Community Health Center

Health Alert: Pinworms

Date: _____

Dear Parent or Guardian

An individual at _____ has been diagnosed or is undergoing evaluation for an illness due to pinworms. While a pinworm infection may sound alarming, it is the most common intestinal worm infection in the U.S. They are most often found in preschool and school-aged children and mothers of infected children.

Watch for these symptoms:

-Rectal (bottom) itching; especially at night; irritability; disturbed sleep. Worms may be visible around the rectum upon waking or in the stool. If you suspect your child or family member has pinworms, contact your physician.

-Infection usually lasts about 2-6 weeks. Eggs can remain infectious outside the body for two-three weeks.

How it is spread:

-Pinworm eggs are taken into the mouth when a person fails to wash hands after scratching the rectal area, using the toilet, or handling contaminated pajamas, underwear, or bedding.

-Food or other can be contaminated in the same way. It is less common but even eggs floating in the air can be swallowed and cause infection.

Diagnosis and Treatment:

Your physician can prescribe the proper medication, which is usually given once and repeated in two weeks. In some situations, families or people living in group home settings may need to be treated as a group as re-infection is common among household members.

Prevention and Controlling the Spread:

-Children or individuals with pinworms should be excluded from childcare or school until 24 hours after treatment begins.

-Wash hands and fingernails of children thoroughly with soap and running water after using the toilet, after contact with the rectal area, and before eating or preparing food.

-Discourage scratching or touching bare rectal area and nail biting, keep nails short

-Bathe every morning (shower preferred) followed by a clean change of underclothing

-After treatment, wash bed linens and night clothes (do not shake)

-Clean and vacuum house daily for several days– open blinds and curtains as eggs are sensitive to light.

Lake County Health Department/Community Health Center

Respiratory Syntical Virus (RSV)

Knowing the facts

RSV is a paramyxovirus that causes respiratory illness and the common cold. It is most common in winter and early spring, but can occur year-round.

Did You Know?

Most children will have come into contact with RSV by the time they are two years old. During their first RSV infection, between 25% and 40% of infants and young children have signs or symptoms of bronchiolitis or pneumonia, and a few require hospitalization.

How is RSV spread?

Direct or close contact with contaminated secretions from the nose and mouth during coughing and sneezing, either droplet form or on contaminated hands or surfaces. RSV may persist on surfaces for many hours and on hands for 30 minutes or more. This makes handwashing and routine surface cleaning an important part of prevention. Excluding children with colds or other respiratory illnesses (without fever) who are well enough to attend child care or school settings will most likely not decrease the transmission of RSV, since it is often spread before symptoms are seen

What are the symptoms of RSV?

Cold-like symptoms for most children are common. Very young infants have irritability, poor feeding, lethargy, cyanosis (turning blue with cough or brief periods of no breathing). May include bronchiolitis or wheezing from narrowed airways in the lungs and pneumonia.

How soon do symptoms appear?

Usually 4 days after becoming infected.

When and for how long is a person able to spread RSV?

Usually 2 to 8 days but shedding (spread of the virus through respiratory droplets such as mucus or phlegm) may last longer, especially in young infants and in individuals with weakened immune systems, it may continue for as long as 3 to 4 weeks.

What is the treatment for RSV?

Supportive treatment for symptoms- Hospitalization may be necessary for those with serious symptoms or symptoms that are not getting better. The majority of children hospitalized for RSV infection are under 6 months of age.

How do I prevent the spread of RSV?

-Wash hands frequently with soap and running water, especially after coughing, sneezing, or wiping a nose. Help children to wash hands, also.

-Minimize contact with respiratory secretions, such as saliva or nasal mucus.

-Sanitize commonly touched surfaces more frequently during winter and early spring when outbreaks can be expected.

-Dispose of any tissues or items soiled with discharges from the mouth or nose in a waste container. Do not share utensils, cups, or glasses with other people. Clean and disinfect mouthed toys at least daily and when soiled.

-If child is able to participate and staff determine that they can care for child, he can stay. If has fever with behavior change or rapid or labored breathing, she should be excluded from child care until those resolve.

-Infants and children at high risk for RSV can receive monthly injection of an antibody to RSV.

Lake County Health Department/Community Health Center

Health Alert: Respiratory Syntical Virus (RSV)

Date: _____

Dear Parent or Guardian

An individual at _____has been diagnosed or is undergoing evaluation for Respiratory Syntical Virus, RSV. RSV is caused by a paramyxovirus that causes acute respiratory tract illness in persons of all ages. In infants and young children, RSV is the most common cause of bronchiolitis and pneumonia.

Watch for these symptoms:

Fever, cough, wheezing, watery eyes, runny nose, sneezing. Very young infants sometimes have lethargy, irritability, poor feeding, and, sometimes, spells of not breathing (apnea). Excluding children with colds or other respiratory illnesses (without fever) who are well enough to attend child care or school settings will most likely not decrease the transmission of RSV, since it is often spread in the early stages of illness.

How it is spread:

Direct or close contact with contaminated secretions from the nose and mouth during coughing and sneezing, either droplet form or on contaminated hands or surfaces. RSV may persist on surfaces for many hours and on hands for 30 minutes or more. This makes hand washing and routine surface cleaning an important part of prevention.

Treatment:

Supportive treatment and medication for symptoms-Hospitalization may be necessary for those with serious symptoms or symptoms that are not getting better. The majority of children hospitalized for RSV infection are under 6 months of age.

Prevention and Controlling the Spread:

-Wash hands of children and self frequently with soap and running water, especially after coughing, sneezing, or wiping a nose.

-Minimize contact with respiratory secretions, such as saliva or nasal mucus.

-Dispose of any tissues or items soiled with discharges from the mouth or nose in a waste container.

-Do not share utensils, cups, or glasses with other people.

-Clean and disinfect mouthed toys at least daily and when soiled.

-If child is able to participate and staff determine that they can care for child, he can stay. If has fever with behavior change or rapid or labored breathing, he should be excluded from child care until those are treated and resolve. Infants and children at high risk for RSV can receive monthly injection of RSV antibodies.

Lake County Health Department/Community Health Center

Ringworm

Knowing the facts

Ringworm is a fungal infection of certain parts of the skin. *Tinea corporus* affects the body. *Tinea ca-pitus* affects the scalp.*Tinea cruris or jock itch* affects the groin area and *tinea pedis or athletes foot* affects the feet.

Did You Know?

Ringworm is a common skin disorder, especially among children, but it may affect people of all ages. Although its name suggests otherwise, it is caused by a fungus, not a worm. It is mildly contagious.

How is ringworm spread?

Ringworm of the skin is infectious as long as the fungus remains present in the skin lesion. The fungus is no longer present when the lesion starts to shrink. It is spread by direct contact person to person by sharing combs, brushes, towels, clothing or bedding. This fungus infection can be spread by contact with infected humans, animals (dogs or cats) or contaminated surfaces or objects.

What are the symptoms of ringworm?

Skin Symptoms are red, circular patches with raised edges and clear appearance in center. On toes there is cracking and peeling of skin.

Scalp Patchy areas of dandruff-like scaling with or without hair loss. Also there may be redness and scaling of scalp with broken hairs or patches or hair loss.

How soon do symptoms appear?

Unknown.

When and for how long is a person able to spread ringworm?

A person can spread ringworm as long as a lesion is present. The fungus can “live” in contaminated items for long periods of time.

What is the treatment for ringworm?

Ringworm can be treated with a fungicide that you can purchase over-the-counter and can clear within 4 weeks. A severe or persistent infection may require stronger treatment that is prescribed by a doctor, such as prescription anti-fungal pills or anti-fungal cream.

How do I prevent the spread of ringworm?

-Do not share personal clothing, towels, hairbrushes, combs, headgear or other personal care items. Such items should be thoroughly cleaned and dried after use, especially concurrently with treatment for someone who has ringworm.

-Early treatment of infected people and examination of siblings and other household contacts.

-Keep skin and feet clean and dry. Cover skin lesions loosely.

-Wear sandals or shoes around gyms, showers, and pools.

-Avoid touching pets with bald spots.

-Exclude at end of day and readmit when treatment is started.

Lake County Health Department/Community Health Center

Health Alert: Ringworm

Date: _____

Dear Parent or Guardian

An individual at _____has been found to have ringworm. Ringworm is a fungal infection that can affect the skin or scalp.

Watch for these symptoms:

Initial symptoms on the skin include red circular patches with raised edges and clear skin color in the center. On the scalp there may be patchy areas of dandruff-like scaling with or without hair loss. There may be redness and scaling of the scalp with broken hairs or patches of hair loss.

How it is spread:

Ringworm is spread through direct contact with infected skin or infected pets. It can also be spread by using contaminated items such as a comb, unwashed clothing, bedding, shower or pool surfaces.

Treatment:

Ringworm can be treated with a fungicide that you can purchase over-the-counter and can clear within 4 weeks. Some people may need to consult with a medical provider for other treatment options.

Prevention and Controlling the Spread:

-Do not share personal clothing, towels, hairbrushes, combs, headgear or other personal care items. Such items should be thoroughly cleaned and dried after use, at the same time as treatment for someone who has ringworm.

-Keep skin and feet clean and dry. Cover skin lesions loosely.

-Wear sandals or shoes around gyms, showers, and pools.

-Avoid touching pets with bald spots.

-Exclude at end of day and readmit when treatment is started.

Ringworm

Photo

Roseola

Knowing the facts

Roseola is a viral infection that causes a rash in infants and children. This illness usually occurs between 6 and 24 months of age.

Did You Know?

Nearly everyone gets this disease early in life often without symptoms. Most children have had roseola by the time they are four years of age.

How is this spread?
Roseola is spread with person to person contact. Usually source of transmission to children is healthy adults. Saliva from three fourths of adults without symptoms contains roseola virus that is infectious. Once the rash appears, the child is in the recovery phase.

What are the symptoms?

Child develops a high fever(above 103 F or 39.4 C) that lasts for 3 to 7 days. This fever may cause seizure activity. Often the child is not very ill when fever is present. A red, raised rash that lasts for hours up to several days occurs the day the fever breaks.

How soon do symptoms appear?

This is usually 9 to 10 days from time of exposure.

When and how long is a person able to spread this?
It is unknown.

What is the treatment for this?
Supportive treatment of rest and adequate fluids. Refer questions about use of fever lowering medications to physician or other health care provider. Aspirin should not be used in children under 20 years of age without approval of physician.

How do I prevent the spread?

- Use good hand washing technique at all times.
- Frequent cleaning and disinfecting of toys, tables, and other share items is important.
- Exclude if child has fever with behavior change.
- Exclude if child is unable to participate in activities and staff are unable to participate in activities and staff are unable to care for child without compromising the health and safety of the other children in the group.
- Post information about this illness

Health Alert: Roseola

Date: _____

Dear Parent or Guardian

An individual at _____has been diagnosed or is undergoing evaluation for an illness due to roseola. It is a viral infection that causes a rash and high fever. It is typically seen in infants and young children. This illness usually occurs between 6 and 24 months of age.

Watch for these symptoms:

Child develops a high fever (above 103° F or 39.4° C) that lasts for 3 to 7 days. This fever may cause seizure activity. Often the child is not very ill when fever is present. A red, raised rash that lasts for hours up to several days occurs the day the fever breaks.

How it is spread:

Roseola is spread through person to person contact. Usually source of transmission to children is healthy adults. Saliva from three fourths of adults without symptoms contains roseola virus that is infectious. Once the rash appears, the child is in the recovery phase.

Diagnosis and Treatment:

The treatment is supportive that includes rest and adequate fluids. Refer questions about use of fever lowering medications to physician or health care provider. Aspirin should not be used in children under 20 years of age without physician approval.

Prevention and Controlling the Spread:

-Use good hand washing technique at all times.

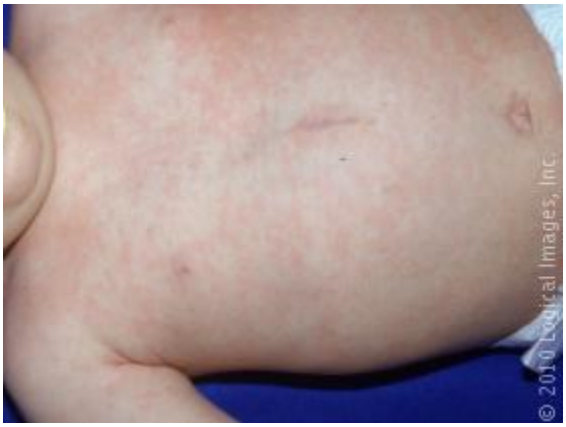
-Frequent cleaning and disinfecting of toys, tables, and other shared items is important.

-Exclude if child has fever with behavior change.

-Exclude if child is unable to participate in activities and staff are unable to care for child without compromising the health and safety of the other children in the group.

Roseola

Photo



Rotavirus

Knowing the facts

Rotavirus is a virus that causes diarrhea and vomiting. It is the most common cause of diarrhea in children under two years of age. Children can be infected more than once with rotavirus since this virus has many different types.

Did You Know?

There is now a vaccine that can prevent many rotavirus illnesses.

How is this spread?
Rotavirus is spread by fecal-oral contact. The virus is taken in the mouth from a contaminated object or person's hands that were inadequately washed after contact with this virus. The virus can live on toys, door knobs, and hard surfaces for extended period of time.

It is often spread within families.

What are the symptoms?
Rotavirus symptoms include diarrhea that is not bloody, nausea and vomiting. Dehydration may occur in severe cases. Symptoms can last 3 to 8 days.

How soon do symptoms appear?

Symptoms begin in 2 to 4 days after exposure.

When and how long is a person able to spread this?

Virus is present before symptoms develop and may last in stool for up to three weeks after the illness.

What is the treatment for this?
The treatment is supportive. There is no medication to treat rotavirus. It is important to contact physician or health care provider with questions about diagnosis and supportive care. Observe carefully for signs of dehydration that include sleepiness, irritability, thirst, pale color of skin, eyes appear sunken, soft spot in baby's head is sunken, decreased or absent tears, decreased urine and fever wet diapers and dry mouth.

How do I prevent the spread?

-Rotavirus now has a vaccine to prevent it.

-Careful hand washing especially after toileting or diapering and before any contact with food or surfaces used for food preparation.

-Cleaning and sanitizing of surfaces very carefully done.

-Children need to be excluded if child has 2 or more stools above normal for that child. Also they need to be excluded if the stool is not contained in diaper or is causing "accidents" for toilet trained children. If child is dehydrated, is jaundiced (yellow skin or eyes), has stool that is bloody or has mucus or very pale or all black.

-Child should be excluded if cannot participate in activities or staff cannot adequately care for the health and safety needs of the other children in the group.

Health Alert: Rotavirus

Date: _____

Dear Parent or Guardian

An individual at _____has been diagnosed or is undergoing evaluation for an illness due to rotavirus. This is a highly contagious virus that causes diarrhea and vomiting. It is the most common cause of diarrhea in children younger that 2 years of age. There is now a vaccine to prevent rotavirus.

Watch for these symptoms:

Rotavirus symptoms include diarrhea that is not bloody, nausea and vomiting. Dehydration may occur in severe cases. Symptoms can last 3 to 8 days. Virus is present before symptoms begin and my last for up to 3 weeks after the illness.

How it is spread:

Rotavirus is spread by fecal-oral contact. The virus is taken in the mouth from a contaminated object or person's hands that were inadequately washed after contact with this virus. The virus can live on toys, door knobs, and hard surfaces for extended period of time. It is often spread within families.

Diagnosis and Treatment:

There is no medication to treat rotavirus. It is important to contact physician or health care provider with questions about diagnosis and supportive care.

Prevention and Controlling the Spread:

-Rotavirus now has a vaccine to prevent it.

-Careful hand washing especially after toileting or diapering and before any contact with food or surfaces used for food preparation.

-Cleaning and sanitizing of surfaces very carefully done.

-Children need to be excluded if child has 2 or more stools above normal for that child. Also they need to be excluded if the stool is not contained in diaper or is causing "accidents" for toilet trained children. If child is dehydrated, is jaundiced (yellow skin or eyes), has stool that is bloody or has mucus or very pale or all black.

-Child should be excluded if cannot participate in activities or staff cannot adequately care for the health and safety needs of the other children in the group.

Lake County Health Department/Community Health Center

Rubella (German Measles)*

Reportable Disease: Knowing the facts

Rubella, also called the *German Measles* is caused by a togavirus, genus *Rubivirus.* Rubella is a mild disease in children. Rubella infection in first trimester of pregnancy, may cause birth defect, prematurity, or even fetal death.

Did You Know?

Rubella is an increasingly rare infection in the United States because of childhood immunization against the disease. Although more than half of all countries now use rubella vaccine, rubella still remains a common disease in many parts of the world. Adults make up the greatest percentage of reported cases in the US, most persons with rubella were foreign born.

How is rubella spread?

Rubella is spread by direct contact, from person to person through airborne transmission or indirect contact with articles soiled by nose or throat discharges.

What are the symptoms of rubella?

In young children, the rash may be the first symptom while in older children or adults, fever, malaise, swollen glands, and upper respiratory symptoms may precede the rash. It usually begins on the face and then progresses from head to toe. It lasts about 3 days and is occasionally itchy. Adults often experience joint pain and arthritis pain. Conjunctivitis, testicular pain, or ovarian pain may occur.

How soon do symptoms appear?

Symptoms commonly appear about 16-18 days, with a range of 12-23 days.

When and for how long is a person able to spread rubella?

Rubella is most contagious when the rash first appears but the virus may be shed from 7 days before until 14 days after the rash onset.

What is the treatment for rubella?

There is no treatment for rubella. Supportive treatment for symptoms.

How do I prevent the spread of rubella?

-Get immunized or check your immunization status for the measles-mumps-rubella (MMR) vaccine.

-Unvaccinated contacts should be immunized, unless contraindicated.

-Birth before 1957 is only presumptive evidence of rubella immunity; if needed, only documentation of vaccine or serology results showing immunity is acceptable evidence.

-If a person develops a rash, fever, and swollen glands behind the ears, a physician should be consulted before he/she participates in child care.

-Thorough hand washing is the best way to prevent spread of infectious diseases. Help children to wash hands as well. Practice good cough and sneeze habits by coughing and sneezing into your elbow or sleeve. If you do use a tissue throw it away and wash your hands. Encourage children not to touch their eyes, nose or mouth.

-*Report to the local health department.

-Child may be readmitted to child care 7 days after onset of rash and is able to participate in activities.

Lake County Health Department/Community Health Center

Health Alert: Rubella*

Date: _____

Dear Parent or Guardian

An individual at _____has been diagnosed or is undergoing evaluation for an illness due to rubella; caused by the *German Measles* is caused a togavirus, called the *Rubivirus.* Rubella is a mild disease in children. However, it is very concerning in pregnant women who has contracted the disease. Rubella infection in first trimester of pregnancy, may cause birth defect, prematurity, or even fetal death.

Watch for these symptoms:

In young children, the rash may be the first symptom while in older children or adults, fever, malaise, swollen glands, and upper respiratory symptoms may precede the rash. It usually begins on the face and then progresses from head to toe. It lasts about 3 days and is occasionally itchy. Adults often experience joint pain and arthritis pain. Conjunctivitis, testicular pain, or ovarian pain may occur.

How it is spread:

Rubella is spread by direct contact, from person to person through airborne transmission or indirect contact with articles soiled by nose or throat discharges or urine or feces.

Diagnosis and Treatment:

There is no treatment for rubella– only supportive care for symptoms. Your doctor can do lab tests to diagnose rubella.

Prevention and Controlling the Spread:

-Get immunized or check your immunization status for the measles-mumps-rubella (MMR) vaccine.

-Unvaccinated contacts should be immunized, unless contraindicated.

-Birth before 1957 is only presumptive evidence of rubella immunity; if needed, only documentation of vaccine or serology results showing immunity is acceptable evidence.

-If a person develops a rash, fever, and swollen glands behind the ears, a physician should be consulted before he/she participates in child care.

-Thorough hand washing is the best way to prevent spread of infectious diseases. Help children to wash hands as well. Practice good cough and sneeze habits by coughing and sneezing into your elbow or sleeve. If you do use a tissue throw it away and wash your hands. Encourage children not to touch their eyes, nose or mouth.

-*Report to the local health department.

-Children may be readmitted to child care 7 days after onset of rash.

Rubella

Photo

Lake County Health Department/Community Health Center

Salmonella*

Reportable Disease: Knowing the facts

Salmonella is a general name for a group of about 2,000 closely related bacteria that cause illness by reproducing in the digestive tract.

Did You Know?

Salmonella bacteria cause much of the food poisoning in the world, including an estimated 4 million cases of salmonellosis in the U.S. each year.

What are the symptoms?

Nausea, diarrhea with blood or mucus in stool, abdominal cramps, fever, headache, sometimes vomiting.

How's it spread?

-Usually the illness comes from food contaminated with animal feces found on or in raw meats, eggs, fish and shellfish, and, most commonly, in poultry. Salmonella also may be found in raw milk or in milk that is contaminated after pasteurization. The bacteria also may be carried by pets as birds, fish, dogs, cats, and turtles.

-Person-to-person transmission of salmonella occurs when a carrier's feces, from his or her unwashed hands, contaminates water or food during preparation, or through direct contact with another person.
-Reptiles are a source of this bacteria.

How soon do symptoms appear?

Symptoms generally appear within 6-48 hours.

When and for how long is a person able to spread salmonella?

As long as infectious germs are present in the stool, a person can be a possible source of disease spread.

What is the treatment?

Most cases of salmonellosis are not treated with antibiotics. In fact, antibiotics may prolong the period during which the person can infect others. Also, antibiotics actually may bring on salmonellosis symptoms by upsetting the bacterial balance in the intestines. Antibiotics sometimes are prescribed for infants, the chronically ill and the elderly to prevent salmonella-triggered local infections or bacteremia. Antibiotics also are needed when the bacteria cause meningitis or infections of the blood stream.

How do I prevent the spread of Salmonella?

-Because foods of animal origin may be contaminated with *Salmonella*, people should not eat raw or undercooked eggs, poultry, or meat. Poultry and meat, including hamburgers, should be well-cooked, not pink in the middle. Persons also should not consume raw or unpasteurized milk or other dairy products. Produce should be thoroughly washed.

-Wash hands thoroughly with soap and running water after using the toilet, changing diapers, and before preparing or eating food. Good hand washing is the best way to prevent spread of infectious diseases found in the intestinal tract. Help children to wash hands as well. Keep up good hand washing even after symptoms have stopped as you could still have the bacteria in your body. Because reptiles are particularly likely to have *Salmonella*, and it can contaminate their skin, everyone should immediately wash their hands after handling reptiles or other animals.

-*Your doctor should report your illness to local health department.

-Discuss exclusion and readmission with local health department.

Lake County Health Department/Community Health Center

Health Alert: Salmonella*

Date: _____

Dear Parent or Guardian

An individual at _____has been diagnosed or is undergoing evaluation for an illness due to Salmonella which can cause an infection of the intestines. These bacteria can live and grow in the digestive tract of humans and can also be caused by contact with contaminated foods or carried by pets especially reptiles.

Watch for these symptoms:

Diarrhea, nausea, sometimes vomiting; abdominal cramps, fever, headache, sometimes vomiting. Incubation period lasts 6-48 hours.

How it is spread:

-Usually the illness comes from food contaminated with animal feces found on or in raw meats, eggs, fish and shellfish, and, most commonly, in poultry. Salmonella also may be found in raw milk or in milk that is contaminated after pasteurization. The bacteria also may be carried by pets as birds, fish, dogs, cats, and turtles.

-Person-to-person transmission of salmonella occurs when a carrier's feces, unwashed from his or her hands, contaminates water or food during preparation, or through direct contact with another person.

-As long as infectious germs are present in the stool, a person can be a possible source of disease spread.

Diagnosis and Treatment:

There are lab tests to check for Salmonella. Discuss this letter with your physician if you or your child has diarrhea and fever or persistent diarrhea. present. In general, antibiotics should not be taken in uncomplicated cases of salmonella as they may prolong the excretion of the bacteria in the stool. Antibiotics should be taken only when prescribed by a doctor. Contact a medical doctor and seek emergency room treatment immediately for severe symptoms. Usually the disease will run its course within 2-3 days.

Prevention and Controlling the Spread:

-Because foods of animal origin may be contaminated with *Salmonella*, people should not eat raw or undercooked eggs, poultry, or meat. Poultry and meat, including hamburgers, should be well-cooked, not pink in the middle. Persons also should not consume raw or unpasteurized milk or other dairy products. Produce should be thoroughly washed.

-Wash hands thoroughly with soap and running water after using the toilet, changing diapers, and before preparing or eating food. Good hand washing is the best way to prevent spread of infectious diseases found in the intestinal tract. Help children to wash hands as well. Keep up good hand washing even after symptoms have stopped as you could still have the bacteria in your body. Because reptiles are particularly likely to have Salmonella, and it can contaminate their skin, everyone should immediately wash their hands after handling reptiles or other animals.

-*Your doctor should report your illness to local health department. Discuss exclusion and readmission with them.

Lake County Health Department/Community Health Center

Scabies

Knowing the facts

Scabies is a small insect called a mite, that causes infestation of the skin.

Did You Know?

Pets are infested with a different scabies mite (mange) that may infest the human body and cause itching. However, that mite dies within a few days; treatment is unnecessary.

How is scabies spread?

By direct, prolonged, skin-to-skin contact with an infected person. Contact must be prolonged – a quick handshake or hug will not usually spread the infestation. Infestation is easily spread to sexual partners and household members. It may also occur by sharing clothing, towels, and bedding.

What are the symptoms of scabies?

Pimple-like irritations, burrows, or rash of the skin, especially found on the webbing between the fingers, the skin folds on the wrist, elbow or knee; also may be found on the penis, the breast, or shoulder blades. Intense itching, especially at night and over most of the body. Sores on the body caused by scratching; sores may sometimes become infected with bacteria. Children under 2 years are likely to be infested on the head, neck, palms, and soles of feet or in a diffuse distribution over the body.

How soon do symptoms appear?

For a person who has never been infested with scabies, symptoms may take 2-6 weeks to begin. For someone previously infested, symptoms may appear within 1-4 days of exposure.

When and for how long is a person able to spread scabies?

Until mites and eggs are destroyed by treatment, ordinarily after 1 or occasionally 2 courses of treatment, a week apart.

What is the treatment for scabies?

Creams and lotions are available to treat scabies, Package directions must be followed carefully. Lotions are usually left on overnight (8 hours) and then showered off. A second treatment may be necessary after 7-10 days. Check with your doctor before beginning treatment. Be sure to follow other control measures.

How do I prevent the spread of scabies?

-Concurrent laundering of all clothes, bedding, towels, washed in hot water and dried in hot dryer. Items that cannot be laundered should be placed in plastic bags for at least 4 days.

-Concurrent treatment of all affected household members.

-Prophylactic treatment of those who have had skin-to-skin contact with the infected person may be necessary– contact your medical provider about treatment for those affected and their contacts.

-Exclude from setting until after treatment is completed-usually overnight.

-Itching may continue for weeks after effective treatment but call health profession if it continues.

Lake County Health Department/Community Health Center

Health Alert: Scabies

Date: _____

Dear Parent or Guardian

An individual at _____has been found to have Scabies. It is caused by a small insect called a mite, *Sarcoptes scabiei, that infests the skin.*

Watch for these symptoms:

Pimple-like irritations, burrows, or rash of the skin, especially found on the webbing between the fingers, the skin folds on the wrist, elbow or knee; also may be found on the penis, the breast, or shoulder blades. Intense itching, especially at night and over most of the body. Sores on the body caused by scratching; sores may sometimes become infected with bacteria. Children under 2 may be infested on head, neck, palms and soles of feet or all over body.

How it is spread:

By direct, prolonged, skin-to-skin contact with an infected person. Contact must be prolonged – a quick handshake or hug will not usually spread the infestation. Infestation is easily spread to sexual partners and household members. It may also occur by sharing clothing, towels, and bedding.

Treatment:

There are creams and lotions to treat scabies. Package directions must be followed carefully. Lotions are usually left on overnight (8 hours) and then showered off. A second treatment may be necessary after 7-10 days. Check with your doctor before beginning treatment.

Prevention and Controlling the Spread:

-Concurrent laundering of all clothes, bedding, towels, washed in hot water and dried in hot dryer.

-Items that cannot be laundered should be placed in plastic bags for at least 4 days.

-Concurrent treatment of all affected household members.

-Prophylactic treatment of those who have had skin-to-skin contact with the infected person may be necessary– contact your medical provider about treatment for those affected and their contacts.

-Itching is related to an allergic reaction to the mites and often goes on for several weeks after treatment though call health professional if itching continues.

Lake County Health Department/Community Health Center

Shigella*

Reportable Disease: Knowing the facts

Shingellosis is an infectious disease caused by bacteria that can live and grow in the digestive tract of humans.

Did You Know?

Shigella were discovered over 100 years ago by a Japanese scientist named Shiga, for whom they are named. There are several different kinds of *Shigella* bacteria.

What are the symptoms?

Diarrhea, sometimes bloody or with mucus; fever; nausea, abdominal cramps, headache, convulsions, sometimes vomiting.

How's it spread?

-Shigella leaves the body through the stool of an infected person and enters another person when contaminated hands, food, or objects are placed in the mouth, or by drinking feces-contaminated water. Very little of the organism is needed to become infected.

-Spread may also occur whether or not a person feels sick.

For Example, it is easy for diapered children to pass intestinal infections to others, but anyone who does not wash his or her hands after using the toilet or changing diapers can spread disease.

How soon do symptoms appear?

Usually 1-7 days after a person is exposed to the bacteria; average is 2-4 days.

When and for how long is a person able to spread shigella?

As long as infectious germs are present in the stool, a person can be a possible source of disease spread. People can spread shigella to others for 4 weeks after symptoms stop so careful hand washing is important.

What is the treatment?

There is a lab test to check for shigella in the stool. In general your doctor may prescribe water and electrolyte replacement to prevent dehydration. Antibiotics are used as treatment but, unfortunately, some shigella have become antibiotic-resistant. Anti-diarrheal treatments are likely to make the illness worse and should be avoided. Contact your doctor about appropriate treatment if you think you may have symptoms of shigella.

How do I prevent the spread of Shigella?

-Children with diarrhea due to shigella should not return to the child care or school setting until diarrhea and other symptoms are no longer present or they have been treated and cleared by their medical provider and health department to return.

-Wash hands thoroughly with soap and running water after using the toilet, changing diapers, and before preparing or eating food. Thorough hand washing is the best way to prevent spread of infectious diseases found in the intestinal tract. Help children to wash hands as well. Keep up good hand washing even after symptoms have stopped as you could still have the bacteria in your body.

-Clean and disinfect contaminated areas (toilets, diapering areas, faucets) daily or when soiled. Sanitize toys as needed and at least daily.

-*Your doctor should report your illness to local health department.

Lake County Health Department/Community Health Center

Health Alert: Shigella*

Date: _____

Dear Parent or Guardian

An individual at _____has been diagnosed or is undergoing evaluation for an illness due to shingellosis, an infectious disease of the intestines.

Watch for these symptoms:

Diarrhea, sometimes bloody or with mucus; fever; nausea, sometimes vomiting; abdominal cramps, headache, convulsions.

How it is spread:

-Shigella leaves the body through the stool of an infected person and enters another person when contaminated hands, food, or objects are placed in the mouth, or by drinking feces-contaminated water. Very little of the organism is needed to become infected.

-Spread may also occur whether or not a person feels sick.

For Example, it is easy for diapered children to pass intestinal infections to others, but anyone who does not wash his or her hands after using the toilet or changing diapers can spread disease.

Diagnosis and Treatment:

There is a lab test to check for shigella In the stool. In general your doctor may prescribe water and electrolyte replacement to prevent dehydration. Antibiotics are used as treatment but, unfortunately, some shigella have become antibiotic-resistant. Anti-diarrheal treatments are likely to make the illness worse and should be avoided. Contact your doctor about appropriate treatment if you think you may have symptoms of shigella.

Prevention and Controlling the Spread:

-Children with diarrhea due to shigella should not return to the child care or school setting until diarrhea and other symptoms are no longer present or they have been treated and cleared by their medical provider and the health department to return.

-Wash hands thoroughly with soap and running water after using the toilet, changing diapers, and before preparing or eating food. Thorough hand washing is the best way to prevent spread of infectious diseases found in the intestinal tract. Help children to wash hands as well. Keep up good hand washing even after symptoms have stopped as you could still have the bacteria in your body.

-Clean and disinfect contaminated areas (toilets, diapering areas, faucets) daily or when soiled. Sanitize toys as needed and at least daily.

-*Your doctor should report your illness to local health department.

Lake County Health Department/Community Health Center

Shingles (Herpes Zoster)

Knowing the facts

Shingles is a painful localized skin rash often with blisters that is caused by the varicella zoster virus (VZV), the same virus that causes chickenpox. Anyone who has had chickenpox can develop shingles because VZV remains in the nerve cells of the body after the chickenpox infection clears and VZV can reappear years later causing a painful rash. It can even occur in children.

Did You Know?

In the United States, there are an estimated 1 million cases of shingles each year. Shingles most commonly occurs in people 50 years old or older, people who have medical conditions that keep the immune system from working properly, or people who receive immunosuppressive drugs.

How is Shingles spread?

Shingles is not contagious from person to person. Shingles is a reactivation of the VZV virus and this condition is not spread through sneezing, coughing or casual contact. Anyone who has recovered from chickenpox may develop shingles. Someone with Shingles can spread the virus that will cause chickenpox to others who have not had chickenpox disease or the chickenpox vaccine. This spread occurs when someone comes into contact with a person with Shingles in the blister phase.

What are the symptoms of Shingles?

Pain, itching or tingling of the skin which is followed by a painful skin rash of blister-like lesions, usually localized to a small area on one side of the body, and often the face or trunk. Other symptoms can include fever, headache, chills and upset stomach.

How soon do symptoms appear?

Shingles usually starts as a rash on one side of the face or body. The rash starts as blisters that scab after 3 to 5 days. The rash usually clears within 2 to 4 weeks.

When and for how long is a person able to spread Shingles?

The virus is **not** spread through sneezing, coughing or casual contact. A person with shingles can spread the disease when the rash is in the blister-phase. Once the rash has developed crusts, the person is no longer contagious. A person is not infectious before blisters appear or with post-herpetic neuralgia (pain after the rash is gone).

What is the treatment for Shingles?

There are several medications to treat Shingles. Consult with a healthcare professional about treatment options. Most commonly, a person has only one episode of shingles in his/her lifetime. Although rare, a second or even third case of shingles can occur.

How do I prevent the spread of Shingles?

-A person with Shingles may attend school or childcare if the blisters/lesions can be covered and the bandages can stay clean and dry.

-Two doses of varicella vaccine are recommended for most children who have not had history of chickenpox disease or vaccine.

-Thorough hand washing is one of the best way to prevent spread of infectious diseases. Help children to wash hands as well.

-The risk of spreading shingles is low if the rash is covered. People with shingles should keep the rash covered, not touch or scratch the rash, and wash their hands often to prevent the spread of VZV.

-Shingles vaccine was recently recommended by the Advisory Committee on Immunization Practices (ACIP) to reduce the risk of shingles and its associated pain in people 60 years old or older.

Lake County Health Department/Community Health Center

Health Alert: Shingles

Date: _____

Dear Parent or Guardian

An individual at _____has been diagnosed or is undergoing evaluation for an illness due to Shingles. Shingles is a painful localized skin rash often with blisters that is caused by the varicella zoster virus (VZV), the same virus that causes chickenpox.

Watch for these symptoms:

Pain, itching or tingling of the skin which is followed by painful skin rash of blistered like lesions, usually localized to a small area on one side of the body, and often the face or trunk. Other symptoms can include fever, headache, chills and upset stomach. Shingles usually starts as a rash on one side of the face or body. The rash starts as blisters that scab after 3 to 5 days. The rash usually clears within 2 to 4 weeks.

How it is spread:

-Shingles is not contagious from person to person. Shingles is a reactivation of the VZV virus and this condition is not spread through sneezing, coughing, or causal contact. Anyone who has recovered from chicken pox may develop shingles.

Someone with Shingles can spread the virus that will cause chickenpox to others who have not had chickenpox disease or the chickenpox vaccine. This spread occurs when someone comes into contact with a person with Shingles in the blister phase.

The virus is not spread through sneezing, coughing or causal contact . A person with shingles can spread the disease when the rash is in the blister-phase. Once the rash has developed crusts, the person is no longer contagious. A person in not infectious before blisters appear or with post-herpetic neuralgia (pain after the rash is gone).

Treatment:

There are several medication to treat Shingles. Consult with a health care professional about treatment options. Most commonly, a person has only one episode of shingles in his/her lifetime. Although rare, a second or even third case of shingles can occur

Prevention and Controlling the Spread:

-A person with Shingles may attend school or childcare if the blisters/lesion can be covered and the bandages can stay clean and dry.

-Two doses of varicella vaccine are recommended for most children who have not had history of chickenpox disease or vaccine.

-Thorough hand washing is one of the best ways to prevent spread of infectious diseases. Help children to wash hands as well.

-The risk of spreading shingles is low if the rash is covered. People with shingles should keep the rash covered, not touch or scratch the rash and wash their hands often to prevent the spread of VZV.

-Shingles vaccine was recently recommended by the Advisory Committee on Immunization Practices(ACIP) to reduce the risk of shingles and its associated pain in people 60 year of old or older.

Sinus Infections

Knowing the facts

Common cold symptoms usually peak in severity in 3-5 days and disappear over 7-10 days. Colds include a daytime cough that often gets worse at night. In contrast see the symptoms listed below for a sinus infection.

Did You Know?

Use of disinfectant sprays in the environment is of no proven benefit in the control of upper respiratory infections.

How is this spread?

Acute sinus infections can follow upper respiratory infections. The best way to avoid sinus infections is to avoid the common cold. See below to review how to prevent upper respiratory infections.

What are the symptoms?

Nasal discharge and daytime cough without improvement for 10 to 14 days, or more severe signs of temperature of greater than 102° F, facial swelling, facial pain.

How soon do symptoms appear?

Varies depending on cause. Typically follows an upper respiratory infections.

What is the treatment for this?

For bacterial sinusitis, an antibiotic would be required.

Exclusion:

Is not needed unless the child is unable to participate and staff determine that they cannot care for the child without compromising their ability to care for the child without compromising their ability to care for the health and safety of the other children in the group.

How do I prevent the spread?

-Make sure all children and staff use good hand washing practices.

-Wipe noses with clean tissues, dispose of them properly and wash your hands.

-Don't share food, bottles or toothbrushes. Don't kiss children on the mouth.

-Open windows and maximize outdoor play.

-Teach children to cough into their elbow and away from people.

-Keep environment clean.

-Limit physical contact between young infants and infected children.

Lake County Health Department/Community Health Center

Strep Throat/Scarlet Fever

Knowing the facts

Scarlet fever, sometimes called **scarlatina**, is a disease caused by a bacteria called group A *Streptococcus* or "group A strep", the same bacteria that causes strep throat. Scarlet fever is a rash that sometimes occurs in people that have strep throat.

Did You Know?

People with scarlet fever typically also have a high fever and a strawberry-like appearance of the tongue. The rash of scarlet fever is usually seen in children under the age of 18.

How is strep throat spread?

Strep throat is spread to other persons from nose and throat secretions of infected persons or carriers; rarely, indirect contact through objects. Outbreaks may follow ingestion of food contaminated by an infected food handler's nasal secretions or strep bacteria present on skin.

What are the symptoms of strep throat?

The symptoms are usually sudden onset of fever, sore throat with exudates (bumps or white patches), swollen glands, headache, abdominal pain. Nausea and vomiting may occur with severe cases, as may kidney problems, peri-tonsillar abscesses, or rheumatic fever.

Scarlet fever is characterized by a fever, sore throat, red sandpaper-like rash and a red strawberry" tongue. It is caused by several different strains of the streptococcal bacteria, all of which produce a toxin that causes the characteristic red rash.

How long do symptoms last?

Symptoms usually 1-3 days, rarely longer.

When and for how long is a person able to spread strep?

Only 24 hours after treatment has begun.

What is the treatment for strep throat?

Antibiotics are prescribed. Treatment can prevent more serious complications such as rheumatic fever, which can damage the heart. It is often treated in the same manner as strep throat.

How do I prevent the spread of Strep Throat or Scarlet Fever?

-Visit a medical provider for treatment and complete the full course of antibiotics.

-Children should stay out of school or childcare until at least 24 hours after antibiotics have been started.

-Encourage children to practice good health habits of washing their hands and coughing and sneezing into their sleeves and not their hands.

-Do not share eating or drinking utensils.

Lake County Health Department/Community Health Center

Health Alert: Strep Throat/Scarlet Fever

Date: _____

Dear Parent or Guardian

An individual at _____has been diagnosed or is undergoing evaluation for Strep Throat/Scarlet Fever. This illness is caused by a bacteria called group A *Streptococcus* or "group A strep", the same bacteria that causes strep throat. Scarlet fever is a rash that sometimes occurs in people that have strep throat.

Watch for these symptoms:

The symptoms are usually sudden onset of fever, sore throat with exudates (sometimes called puss), swollen glands, headache, abdominal pain. Nausea and vomiting may occur with severe cases, as may kidney problems, peritonsillar abscesses, or rheumatic fever.

Scarlet fever is characterized by a fever, sore throat, red sandpaper-like rash and a red strawberry" tongue. It is caused by several different strains of the streptococcal bacteria, all of which produce a toxin that causes the characteristic red rash.

How it is spread:

Strep throat is spread to other persons from nose and throat secretions of infected persons or carriers; rarely, indirect contact through objects. Outbreaks may follow ingestion of food contaminated by an infected food handler's nasal secretions or strep bacteria present on skin, however this is more rare.

Treatment:

See a medical provider for appropriate testing and treatment. Treatment will prevent more serious complications such as rheumatic fever, which can damage the heart. It is often treated in the same manner as strep throat.

Prevention and Controlling the Spread:

-Visit a healthcare provider for treatment and complete the full course of antibiotics.

-Children should stay out of school or childcare until at least 24 hours after antibiotics have been started.

-Encourage children to practice good health habits of washing their hands and coughing and sneezing into their sleeves and not their hands.

-Do not share eating or drinking utensils.

Thrush (Candidiasis)

Knowing the facts

Thrush is a yeast infection in the mouth and throat of babies. It may also cause a diaper rash.

Did You Know?

The yeast that causes thrush is wide-spread in the environment. It can live on the skin and is found in the mouth and stool. Mild infection of the lining of the mouth is common in health infants.

How is this spread?
Babies are usually infected with thrush from contact during birth.

What are the symptoms?

In the mouth there are creamy white, slightly raised patches that may begin on the tongue or inside the cheek. It cannot be easily wiped away. The diaper rash is a bright red.

How soon do symptoms appear?

Unknown.

When and how long is a person able to spread this?
Thrush is rarely contagious.

What is the treatment for this?
Child's physician or health care provider should evaluate and prescribe proper treatment.

How do I prevent the spread?

-Careful hand washing.

-Wash and sanitize toys, bottles, pacifier nipples after they have been mouthed. Do not allow sharing of mouthed objects without cleaning and sanitizing.

Lake County Health Department/Community Health Center

Tuberculosis (TB)*

Reportable Disease Knowing the Facts

Tuberculosis is a disease caused by a bacteria that usually infects the lungs but can affect other parts of the body. Most children infected with the bacteria do not have symptoms. This is called "latent" infection. When latent infection causes disease, symptoms occur.

Did You Know?

Someone can have latent infection for years or even a life time without the development of disease symptoms.

How is this spread?

It is nearly always the close contact with someone who has the disease. It occurs through the respiratory route through coughing or sneezing in an indoor environment. Children with disease are typically not contagious.

What are the symptoms?

Symptom of latent infection is a positive TB skin test.

Symptoms of disease include chronic cough, weight loss, fever, growth delay, night sweats and chills.

How soon do symptoms appear?

Varies.

When and how long is a person able to spread this?

TB can be spread as long as the person with the disease is not treated. The Health Department and child's physician need to determine when child may be in child care.

What is the treatment for this?

Long term treatment with antibiotics is the treatment.

How do I prevent the spread?

-Investigation by Health Department to identify source of the disease.

-Ensure that medication is taken as prescribed.

-Exclude child until cleared by Health Department and child's physician.

-Staff with positive TB skin tests should be evaluated by their health professional when they develop symptoms of TB that include chronic cough, weight loss, fever, growth delay, night sweats and chills.

-*Reportable disease to local health department TB program.

Immunization Information

2015 Recommended Immunizations for Adults: **By Age**

If you are this age, talk to your healthcare professional about these vaccines →

	Flu *Influenza*	**Td/Tdap** Tetanus, diphtheria, pertussis	**Shingles** *Zoster*	**Pneumococcal** PCV13	**Pneumococcal** PPSV23	**Meningococcal**	**MMR** Measles, mumps, rubella	**HPV** *Human papillomavirus* for women	**HPV** *Human papillomavirus* for men	**Chickenpox** *Varicella*	**Hepatitis A**	**Hepatitis B**	**Hib** *Haemophilus influenzae* type b
19 - 21 years	Flu vaccine every year	1 dose of Tdap* Td booster every 10 years		1 dose	1 or 2 doses	1 or more doses	1or 2 doses	3 doses	3 doses	2 doses	2 doses	3 doses	1 or 3 doses
22 - 26 years									3 doses				
27 - 49 years													
50 - 59 years													
60 - 64 years			1 dose										
65+ year				1 dose	1 dose								

More Information:

There are several flu vaccines available. Talk to your healthcare professional about which flu vaccines is right for you.

* If you are pregnant, you should get a Tdap vaccine during the **3rd trimester of every pregnancy** to help protect your babies from pertussis (whooping cough).

You should get zoster vaccine even if you've had shingles before.

There are two different types of pneumococcal vaccine: PCV13 (conjugate) and PPSV23 (polysaccharide). Talk with your healthcare professional to find out if one or both pneumococcal vaccines are recommended for you.

Your healthcare professional will let you know how many doses you need.

Recommended for you if you did not get it when you were a child.

If you were born in 1957 or after, and don't have a record of being vaccinated or having had measles, mumps and rubella, talk to your healthcare professional about how many doses you may need.

There are two HPV vaccines but only one HPV vaccine (Gardasil®) should be given to men.

If you are a male 22 through 26 years old and have sex with men you should complete the HPV vaccine series if you have not already done so.

Your healthcare professional will let you know how many doses you need.

For more information, call 1-800-CDC-INFO (1-800-232-4636) or visit www.cdc.gov/vaccines

Recommended For You: This vaccine is recommended for you ***unless*** your healthcare professional tells you that you cannot safely receive it or that you do not need it.

May Be Recommended For You: This vaccine is recommended for you if you have certain risk factors due to your health, job, or lifestyle that are not listed here. Talk to your healthcare professional to see if you need this vaccine.

If you are traveling outside the United States, you may need additional vaccines.
Ask your healthcare professional about which vaccines you may need at least 6 weeks prior to your travel.

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2015 Recommended Immunizations for Adults: **By Health Condition**

If you have this health condition, talk to your healthcare professional about these vaccines

	Flu *Influenza*	**Td/Tdap** Tetanus, diphtheria, pertussis	**Shingles** *Zoster*	**Pneumococcal** PCV13	**Pneumococcal** PPSV23	**Meningococcal**	**MMR** Measles, mumps, rubella	**HPV** *Human papillomavirus* for women	**HPV** *Human papillomavirus* for men	**Chickenpox** *Varicella*	**Hepatitis A**	**Hepatitis B**	**Hib** *Haemophilus influenzae* type b
Pregnancy	Flu vaccine every year	*see below			1 - 2 doses								
Weakened Immune System			SHOULD NOT GET VACCINE				SHOULD NOT GET VACCINE		3 doses through age 26 years	SHOULD NOT GET VACCINE		3 doses	post-HSCT* recipients only
HIV: **CD4 count less than 200**						1 or more doses							
HIV: **CD4 count 200 or greater**		1 dose of Tdap followed by Td booster every 10 years		1 dose							2 doses	3 doses	1 or 3 doses
Kidney disease or poor kidney function					1 - 2 doses			3 doses through age 26 years	3 doses through age 21 years	2 doses			
Asplenia (if you do not have a spleen or if it does not work well)			1 dose for those 60 years or older			1 or more doses	1 or 2 doses					3 doses	1 or 3 doses
Heart disease Chronic lung disease Chronic alcoholism				1 dose		1 or more doses							1 or 3 doses
Diabetes (Type 1 or Type 2)												3 doses	
Chronic Liver Disease											2 doses		

More Information:

There are several flu vaccines available. Talk to your healthcare professional about which flu vaccines is right for you.

* If you are pregnant, you should get a Tdap vaccine during the **3rd trimester of every pregnancy** to help protect your babies from pertussis (whooping cough).

You should get zoster vaccine even if you've had shingles before.

There are two different types of pneumococcal vaccine: PCV13 (conjugate) and PPSV23 (polysaccharide). Talk with your healthcare professional to find out if one or both pneumococcal vaccines are recommended for you.

Your healthcare professional will let you know how many doses you need.

Recommended for you if you did not get it when you were a child.

If you were born in 1957 or after, and don't have a record of being vaccinated or having had measles, mumps and rubella, talk to your healthcare professional about how many doses you may need.

There are two HPV vaccines but only one HPV vaccine (Gardasil®) should be given to men.

If you are a male 22 through 26 years old and have sex with men you should complete the HPV vaccine series if you have not already done so.

Your healthcare professional will let you know how many doses you need.

*Hematopoietic stem cell transplant

Recommended For You: This vaccine is recommended for you ***unless*** your healthcare professional tells you that you cannot safely receive it or that you do not need it.

May Be Recommended For You: This vaccine is recommended for you if you have certain other risk factors due to your age, health, job, or lifestyle that are not listed here. Talk to your healthcare professional to see if you need this vaccine.

YOU SHOULD NOT GET THIS VACCINE

If you are traveling outside the United States, you may need additional vaccines.
Ask your healthcare professional about which vaccines you may need at least 6 weeks prior to your travel.

For more information, call 1-800-CDC-INFO (1-800-232-4636) or visit www.cdc.gov/vaccines

U.S. Department of Health and Human Services
Centers for Disease Control and Prevention

CS251118

2015 Recommended Immunizations for Children from Birth Through 6 Years Old

Birth	1 month	2 months	4 months	6 months	12 months	15 months	18 months	19–23 months	2–3 years	4–6 years
HepB	HepB			HepB						
		RV	RV	RV						
		DTaP	DTaP	DTaP		DTaP				DTaP
		Hib	Hib	Hib	Hib					
		PCV	PCV	PCV	PCV					
		IPV	IPV	IPV						IPV
				Influenza (Yearly)*						
					MMR					MMR
					Varicella					Varicella
					HepA§					

Is your family growing? To protect your new baby and yourself against whooping cough, get a Tdap vaccine in the third trimester of each pregnancy. Talk to your doctor for more details.

Shaded boxes indicate the vaccine can be given during shown age range.

NOTE: If your child misses a shot, you don't need to start over, just go back to your child's doctor for the next shot. Talk with your child's doctor if you have questions about vaccines.

FOOTNOTES:

* Two doses given at least four weeks apart are recommended for children aged 6 months through 8 years of age who are getting a l gldjsc l x_&flu' vaccine for the first time and for some other children in this age group.

§ Two doses of HepA vaccine are needed for lasting protection. The first dose of HepA vaccine should be given between 12 months and 23 months of age. The second dose should be given 6 to 18 months later. HepA vaccination may be given to any child 12 months and older to protect against HepA. Children and adolescents who did not receive the HepA vaccine and are at high-risk, should be vaccinated against HepA.

If your child has any medical conditions that put him at risk for infection or is traveling outside the United States, talk to your child's doctor about additional vaccines that he may need.

SEE BACK PAGE FOR MORE INFORMATION ON VACCINE-PREVENTABLE DISEASES AND THE VACCINES THAT PREVENT THEM.

For more information, call toll free
1-800-CDC-INFO (1-800-232-4636)
or visit
http://www.cdc.gov/vaccines

U.S. Department of Health and Human Services
Centers for Disease Control and Prevention

AMERICAN ACADEMY OF FAMILY PHYSICIANS
STRONG MEDICINE FOR AMERICA

American Academy of Pediatrics
DEDICATED TO THE HEALTH OF ALL CHILDREN™

Vaccine-Preventable Diseases and the Vaccines that Prevent Them

Disease	Vaccine	Disease spread by	Disease symptoms	Disease complications
Chickenpox	Varicella vaccine protects against chickenpox.	Air, direct contact	Rash, tiredness, headache, fever	Infected blisters, bleeding disorders, encephalitis (brain swelling), pneumonia (infection in the lungs)
Diphtheria	DTaP* vaccine protects against diphtheria.	Air, direct contact	Sore throat, mild fever, weakness, swollen glands in neck	Swelling of the heart muscle, heart failure, coma, paralysis, death
Hib	Hib vaccine protects against *Haemophilus influenzae* type b.	Air, direct contact	May be no symptoms unless bacteria enter the blood	Meningitis (infection of the covering around the brain and spinal cord), intellectual disability, epiglottitis (life-threatening infection that can block the windpipe and lead to serious breathing problems), pneumonia (infection in the lungs), death
Hepatitis A	HepA vaccine protects against hepatitis A.	Direct contact, contaminated food or water	May be no symptoms, fever, stomach pain, loss of appetite, fatigue, vomiting, jaundice (yellowing of skin and eyes), dark urine	Liver failure, arthralgia (joint pain), kidney, pancreatic, and blood disorders
Hepatitis B	HepB vaccine protects against hepatitis B.	Contact with blood or body fluids	May be no symptoms, fever, headache, weakness, vomiting, jaundice (yellowing of skin and eyes), joint pain	Chronic liver infection, liver failure, liver cancer
Flu	Flu vaccine protects against influenza.	Air, direct contact	Fever, muscle pain, sore throat, cough, extreme fatigue	Pneumonia (infection in the lungs)
Measles	MMR** vaccine protects against measles.	Air, direct contact	Rash, fever, cough, runny nose, pinkeye	Encephalitis (brain swelling), pneumonia (infection in the lungs), death
Mumps	MMR**vaccine protects against mumps.	Air, direct contact	Swollen salivary glands (under the jaw), fever, headache, tiredness, muscle pain	Meningitis (infection of the covering around the brain and spinal cord) , encephalitis (brain swelling), inflammation of testicles or ovaries, deafness
Pertussis	DTaP* vaccine protects against pertussis (whooping cough).	Air, direct contact	Severe cough, runny nose, apnea (a pause in breathing in infants)	Pneumonia (infection in the lungs), death
Polio	IPV vaccine protects against polio.	Air, direct contact, through the mouth	May be no symptoms, sore throat, fever, nausea, headache	Paralysis, death
Pneumococcal	PCV vaccine protects against pneumococcus.	Air, direct contact	May be no symptoms, pneumonia (infection in the lungs)	Bacteremia (blood infection), meningitis (infection of the covering around the brain and spinal cord), death
Rotavirus	RV vaccine protects against rotavirus.	Through the mouth	Diarrhea, fever, vomiting	Severe diarrhea, dehydration
Rubella	MMR** vaccine protects against rubella.	Air, direct contact	Children infected with rubella virus sometimes have a rash, fever, swollen lymph nodes	Very serious in pregnant women—can lead to miscarriage, stillbirth, premature delivery, birth defects
Tetanus	DTaP* vaccine protects against tetanus.	Exposure through cuts in skin	Stiffness in neck and abdominal muscles, difficulty swallowing, muscle spasms, fever	Broken bones, breathing difficulty, death

* DTaP combines protection against diphtheria, tetanus, and pertussis.
** MMR combines protection against measles, mumps, and rubella.

Last updated January 04th 2013 • CS245366-A -

Immunizations and Developmental Milestones for Your Child from Birth Through 6 Years Old

Child's Name _____ Birth Date _____

		Birth	1 MONTH	2 MONTHS	4 MONTHS	6 MONTHS
Recommended Immunizations	Hepatitis B	◯ **HepB**	◯ **HepB**[1]			◯ **HepB**
	Rotavirus			◯ **RV**	◯ **RV**	◯ **RV**
	Diphtheria, Tetanus, Pertussis			◯ **DTaP**	◯ **DTaP**	◯ **DTaP**
	Haemophilus influenzae type b			◯ **Hib**	◯ **Hib**	◯ **Hib**
	Pneumococcal			◯ **PCV**	◯ **PCV**	◯ **PCV**
	Inactivated Poliovirus			◯ **IPV**	◯ **IPV**	◯ **IPV**
	Influenza					◯ **Influenza**, first dose[2] ◯ second dose
Milestones*	Milestones should be achieved by the end of the age indicated. Talk to your child s doctor about age-appropriate milestones if your child was born prematurely.	◯ Recognizes caregiver's voice ◯ Turns head toward breast or bottle ◯ Communicates through body language, fussing or crying	◯ Starts to smile ◯ Raises head when on tummy ◯ Calms down when rocked, cradled or sung to	◯ Begins to smile at people ◯ Coos, makes gurgling sounds ◯ Begins to follow things with eyes ◯ Can hold head up	◯ Babbles with expression ◯ Likes to play with people ◯ Reaches for toy with one hand ◯ Brings hands to mouth	◯ Knows familiar faces ◯ Responds to own name ◯ Brings things to mouth ◯ Rolls over in both directions
Growth	At each well child visit, enter date, length, weight, and percentile information to keep track of your child s progress.	WEIGHT / PERCENTILE LENGTH / PERCENTILE HEAD CIRCUMFERENCE	WEIGHT / PERCENTILE LENGTH / PERCENTILE HEAD CIRCUMFERENCE	WEIGHT / PERCENTILE LENGTH / PERCENTILE HEAD CIRCUMFERENCE	WEIGHT / PERCENTILE LENGTH / PERCENTILE HEAD CIRCUMFERENCE	WEIGHT / PERCENTILE LENGTH / PERCENTILE HEAD CIRCUMFERENCE
		VISIT DATE	VISIT DATE	VISIT DATE	VISIT DATE	VISIT DATE

continues on back page

Shaded boxes indicate the vaccine can be given during shown age range.

[1] The second dose of HepB may be given either at the 1 month or 2 month visit.

[2] Two doses given at least four weeks apart are recommended for children aged 6 months through 8 years of age who are getting a flu vaccine for the first time and for some other children in this age group.

* Milestones adapted from Bright Futures: Guidelines for Health Supervision of Infants, Children, and Adolescents Third Edition, edited by Joseph Hagan, Jr., Judith S. Shaw, and Paula M. Duncan, 2008, Elk Grove Village, IL: American Academy of Pediatrics.

If your child has any medical conditions that put him at risk for infections or is traveling outside the United States, talk to your child's doctor about additional vaccines that he may need.

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www.cdc.gov/vaccines/recs/schedules/child-schedule.htm (Immunization) or http://www.cdc.gov/ncbddd/actearly/milestones/index.html (Milestones)

Last updated on January 2014 • CS246210-C

Immunizations and Developmental Milestones for Your Child from Birth Through 6 Years Old

Child's Name _____ Birth Date _____

		12 MONTHS	15 MONTHS	18 MONTHS	19 23 MONTHS	2–3 YEARS	4–6 YEARS
Recommended Immunizations	Hepatitis B	◯ **HepB** (Final dose administered between 6 and 18 months)					
	Diphtheria, Tetanus, Pertussis		◯ **DTaP**				◯ **DTaP**
	Haemophilus influenzae type b	◯ **Hib**					
	Pneumococcal	◯ **PCV**					
	Inactivated Poliovirus	◯ **IPV**					◯ **IPV**
	Influenza	◯ **Influenza,** first dose[2] ◯ second dose (if needed)				Age 2 Age 3 ◯◯ **Influenza**, first dose[2] ◯◯ second dose (if needed)	Age 4 Age 5 Age 6 ◯◯◯ **Influenza**, first dose[2] ◯◯◯ second dose (if needed)
	Measles, Mumps, Rubella	◯ **MMR**					◯ **MMR**
	Varicella	◯ **Varicella**					◯ **Varicella**
	Hepatitis A	◯◯ **Hep A**[3]					
Milestones*	Milestones should be achieved by the end of the age indicated. Talk to your child s doctor about age-appropriate milestones if your child was born prematurely.	◯ Cries when mom or dad leaves ◯ Says "mama" and "dada" ◯ Copies gestures (for example, waves "bye bye") ◯ May stand alone	◯ Imitates what you are doing ◯ Drinks from a cup ◯ Scribbles on his own ◯ Walks well	◯ Points to show others something interesting ◯ Says several single words ◯ Points to one body part ◯ May walk up steps and run	◯ Plays mainly beside other children ◯ Follows two-step commands ◯ Plays simple make-believe games ◯ Throws ball overhand	◯ Can name most familiar things ◯ Shows affection for friends without prompting ◯ Turns book pages one at a time ◯ Kicks a ball	◯ Speaks very clearly ◯ Tells stories ◯ Can print some letters or numbers ◯ Hops; may be able to skip
Growth	At each well child visit, enter date, length, weight, and percentile information to keep track of your child s progress.	WEIGHT / PERCENTILE LENGTH / PERCENTILE HEAD CIRCUMFERENCE	WEIGHT / PERCENTILE LENGTH / PERCENTILE HEAD CIRCUMFERENCE	WEIGHT / PERCENTILE LENGTH / PERCENTILE HEAD CIRCUMFERENCE	WEIGHT / PERCENTILE LENGTH / PERCENTILE HEAD CIRCUMFERENCE	WEIGHT HEIGHT BMI	WEIGHT HEIGHT BMI
		VISIT DATE	VISIT DATE	VISIT DATE	VISIT DATE	VISIT DATE	VISIT DATE

Shaded boxes indicate the vaccine can be given during shown age range.

[2] Two doses given at least four weeks apart are recommended for children aged 6 months through 8 years of age who are getting a flu vaccine for the first time and for some other children in this age group.

[3] Two doses of HepA vaccine are needed for lasting protection. The first dose of HepA vaccine should be given between 12 months and 23 months of age. The second dose should be given 6 to 18 months later. HepA vaccination may be given to any child 12 months and older to protect against HepA. Children and adolescents who did not receive the HepA vaccine and are at high-risk, should be vaccinated against HepA.

* Milestones adapted from *Bright Futures: Guidelines for Health Supervision of Infants, Children, and Adolescents* Third Edition, edited by Joseph Hagan, Jr., Judith S. Shaw, and Paula M. Duncan, 2008, Elk Grove Village, IL: *American Academy of Pediatrics*.

If your child has any medical conditions that put him at risk for infections or is traveling outside the United States, talk to your child's doctor about additional vaccines that he may need.

U.S. Department of Health and Human Services
Centers for Disease Control and Prevention

AMERICAN ACADEMY OF FAMILY PHYSICIANS
STRONG MEDICINE FOR AMERICA

American Academy of Pediatrics
DEDICATED TO THE HEALTH OF ALL CHILDREN™

For more information, call toll free **1-800-CDC-INFO** (**1-800-232-4636**) or visit **http://www.cdc.gov/vaccines/recs/schedules/child-schedule.htm** (Immunization) or **http://www.cdc.gov/ncbddd/actearly/milestones/index.html** (Milestones)

LakeCounty
Health Department and
Community Health Center

Immunization Clinic
2015

2303 Dodge Avenue, Waukegan
Tel # 847-377-8470
Fax # 847-984-5671

Please call 847-377-8470 For an appointment

Our clinic in Waukegan is located at 2303 Dodge Avenue, Waukegan, IL 60085.

Our usual hours in Waukegan are as follows:

Every Monday…….....9:00 am – 3:00 pm
Every Tuesday…….1:00 pm – 6:00 pm
Every Wednesday……1:00 pm – 3:00 pm
Every Thursday……1:00 pm – 6:00 pm
Every Friday…… 1:00 pm – 3:00 pm
2nd and 4th Saturday of each month…9:00 am – 11:00 am

Our clinic will be CLOSED on the following dates:

New Year's Day	Jan 1, 2015
Memorial Day Weekend	May 23, 2015
Memorial Day	May 25, 2015
Independence Day (observed)	Jul 3, 2015
Labor Day	Sep 7, 2015
Thanksgiving Day	Nov 26, 2015
Day after Thanksgiving	Nov 27, 2015
Thanksgiving weekend	Nov 28, 2015
Christmas Eve	Dec 24, 2015
Christmas Day	Dec 25, 2015
Christmas weekend	Dec 26, 2015
New Year's Eve (close at 3 pm)	Dec 31, 2015
New Year's Day	Jan 1, 2016

Important Information

- Children **must** be eligible for the Federal Vaccine for Children program. The child must be either (a) have Medicaid or All Kids, (b) be American Indian or Alaskan Native, (c) be totally uninsured, or (d) have insurance that does not cover their immunizations.
- The only shots given to children who are not VFC eligible are flu shots.
- If a parent cannot accompany their child to the clinic, they must provide a written proxy form allowing another adult to consent to the child's vaccinations. This form is available by contacting us or on our website.
- If someone other than the parent has physical custody of the child, legal paperwork must be shown to the staff at the time of the appointment.
- An adult must remain with children under 18 years old at all times
- Immunization Records are required at all clinics – please bring your child's records.
- If the school has sent any immunization papers home, please bring those along with your child's records
- Children's vaccines are $16.00 each. Children will not be denied services based on ability to pay.
- To get a replacement for a lost immunization record, please bring a valid ID. The fee is $2.00 per lost record.
- We take Medicaid, Medicare Part B, All Kids, cash, checks, and credit cards. We assess insurance eligibility and coverage on an individual basis.

For more information check out our website:
http://health.lakecountyil.gov/Population/Pages/Immunizations.aspx

Clínica de Vacunas
2015

2303 Dodge Avenue, Waukegan
Tel # 847-377-8470
Fax # 847-984-5671

Por favor llame al 847-377-8470 Para una cita.

Nuestra clínica de Waukegan está ubicada en 2303 Dodge Avenue, Waukegan, IL 60085.

Nuestro horario en Waukegan es:

Cada Lunes……..... 9:00 am – 3:00 pm
Cada Martes……..1:00 pm – 6:00 pm
Cada Miércoles…….1:00 pm – 3:00 pm
Cada Jueves……. 1:00 pm – 6:00 pm
Cada Viernes……1:00 pm – 3:00 pm
2ndo y 4rto Sábado del mes……9:00 am – 11:00 am

Nuestra clínica estará cerrada en las próximas fechas:

Día de Año Nuevo	Ene 1, 2015
Día de Conmemoración sábado	Mayo 23, 2015
Día de Conmemoración	Mayo 25, 2015
Día de Independencia (observar)	Julio 3, 2015
Día de Trabajo	Sep. 7, 2015
Día de Gracias	Nov 26, 2015
Día después de Día de Gracias	Nov 27, 2015
Día de Gracias (sábado)	Nov 28, 2015
Noche Buena	Dic 24, 2015
Navidad	Dic 25, 2015
Navidad (sábado)	Dic 26, 2015
Noche de año viejo (cerramos a las 3pm)	Dic 31, 2015
Año Nuevo	Ene 1, 2015

Información Importante

- Niños Deben ser elegibles para el programa Vacuna Federal de los Niños. El Niño debe (a) tener Medicáis o All Kids, (b) ser Indio Americano o Nativo de Alaska, (c) estar totalmente sin seguro, o (d) tener seguro que no cubre vacunas.
- La única vacuna que se ofrece a los niños que no cualifican para el programa de VFC es la vacuna de la influenza.
- Si los padres o guardianes no pueden acompañar su hijo/a a la clínica, tendra que proveer un **Permiso por escrito**, dándole permiso a otro adulto para dar consentimiento a las vacunas de su hijo/a. Esta forma está disponible en nuestra página de internet.
- Si alguien que no sean los padres del niño tiene la custodia física, usted deberá presentar los papeles legales a nuestro personal en el momento de la cita.
- Un adulto tiene que permanecer con su hijo/a menor de 18 años en todo momento.
- En todas las clínicas se **REQUIERE** el records de vacunas – por favor de traer todos los records de su hijo/a.
- Si su hijo/a ha recibido alguna forma de la escuela sobre vacunas, por favor de traerla a la clínica con la cartilla de vacunas.
- Vacunas para niños/as son $16.00 cada una. No se negaran servicios a ningún niño basado en la habilidad de pagar.
- Para obtener una copia de un record de vacuna perdida, por favor traiga un ID valido. El costo es $2.00 por cada remplazo.
- Aceptamos tarjeta médica, Medicare Parte B, All Kids, Efectivo, Cheques y tarjetas de crédito. Evaluamos la legibilidad de seguros privado y cobertura individual.

Para más información visite nuestra página de internet:

http://health.lakecountyil.gov/Population/Pages/Immunizations.aspx

Immunization Information

Emails

CDC– www.cdc.gov/vaccines/schedules/

IDPH– www.idph.state.il.us/about/shots.htm

Lake County– health.lakecountyil.gov/Population/pages/immunizations/aspx

Standard Precautions

Lake County Health Department/Community Health Center

Standard Precautions

What is it?

Standard Precautions is a new term for Universal Precautions. It recognizes that any body fluid may hold contagious germs.

How does it work?

Standard precautions are designed to prevent the spread of blood borne disease but also are an excellent means to prevent the spread of infectious disease in child care settings.

Who's affected?

Child care providers are used to reacting to infections when they notice the signs and symptoms. Relying on exclusion policies to control disease. Standard Precautions can help control the spread of disease benefitting both the provider and the child.

What does it consist of?

-Hand washing

-Latex gloves should be worn

-Environmental Disinfection

-Proper disposal of waste material

-OSHA requires a facility plan and annual training of staff members who may be exposed to blood s a condition of their employment

Infant Handwashing

When to Wash Infant's Hands

- Upon arrival
- Before and after infant receives bottle or food
- After diapering
- After contact with body fluids
- After outside play
- Before and after water play
- After handling pets
- Whenever hands are visibly dirty
- Before going home

Handwashing Steps

- Turn on warm water (80-110°F in NC).
- Wet hands with water.
- Apply liquid soap.
- Wash hands for 20 seconds. Rub top and inside of hands, under nails and between fingers.
- Rinse hands under running water for at least 10 seconds.
- Dry hands with disposable paper towel.
- Turn off the water using paper towel.
- Throw paper towel into a lined trash container.

Very Young Infants

Very Young Infants

unable to support their heads

The infant is unable to hold head up or stand at sink, or the infant is too heavy for you to hold at sink.

Wash the infants hands with:

- disposable wipes

or

- the three towel method (prepared ahead):
  1. dampened and soapy for washing infant's hands
  2. dampened with water for rinsing infant's hands
  3. dry for drying infant's hands
- Then wash your hands.

Young Infants

Young Infants

who can support their heads but not stand at the sink

You are able to hold the infant, but the infant cannot stand at the sink.

- Carry infant to sink.
- Hold infant at the sink and wash infant's hands.
- Then wash your hands.

Caution! Do not push the infant's tummy into the sink.

Back Aid Place your foot on a 12" stool to lift your leg. Rest the infant on your knee at the sink.

Older Infants

Older Infants

who can stand at the sink

Infant can stand at a toddler height sink or on a stool at a sink.

- First assist the infant with hand washing.
- Then wash your hands.

North Carolina Child Care Health & Safety Resource Center
• 1.800.367.2229 • *www.healthychildcarenc.org* •
The development, translation, and mailing of the Infant Handwashing Poster are supported by funding from the Child Care and Development Fund Block Grant of the Child Care Bureau, Administration on Children and Families, USDHHS, through a contract between the NC Division of Child Development, NCDHHS, and the Department of Maternal and Child Health, Gillings School of Global Public Health, The University of North Carolina at Chapel Hill.

Revised: December 2010

Washing Your Hands

*Revised: December 2010

1. Turn water on.

- Be sure **clean, disposable paper towels** are available.
- Turn on **warm water.** (80-110 °F in NC)

2. Wet hands.

- Wet hands with water.

3. Apply soap.

- Apply **liquid soap.**

4. Wash hands.

- Wash hands well for 20 seconds. Rub top and inside of hands, under nails and between fingers.

5. Rinse hands.

- Rinse hands under running water for at least 10 seconds.

6. Dry hands.

- Dry hands with clean, disposable paper towel.

7. Turn water off.

- Turn off the water using the paper towel.

8. Throw paper towel away.

- Throw the paper towel into a lined trash container.

Teach children to wash their hands:

- Upon arrival to the center

- Before and after eating

- After using the toilet/diapering

- After coughing or contact with body fluids: runny nose, blood, vomit
- Before and after using water tables
- After outside play
- After handling pets

- Whenever hands are visibly dirty
- Before going home

North Carolina Child Care Health & Safety Resource Center • 1.800.367.2229 • *www.healthychildcarenc.org*

The development, translation, and mailing of the Infant Handwashing Poster are supported by funding from the Child Care and Development Fund Block Grant of the Child Care Bureau, Administration on Children and Families, USDHHS, through a contract between the NC Division of Child Development, NCDHHS, and the Department of Maternal and Child Health, Gillings School of Global Public Health, The University of North Carolina at Chapel Hill.

Wash Those Germs Away!
Adult Handwashing Procedures

Handwashing – the best way to prevent the spread of infection

*Revised June 2011

Handwashing Tips

Use hand lotion to prevent chapping. Chapped hands spread disease by holding germs in cracks in the skin.

Avoid jewelry and long or polished fingernails. They provide more complex surfaces that harbor germs and are hard to clean.

Hand sanitizers may be used when supervising children outdoors. Hands must be washed upon returning indoors. Hand sanitizers may not be used for diapering and before serving food outdoors.

When to wash hands

- **Upon arrival** for the day or when moving from one child care group to another
- When hands are **visibly dirty**
- **Before and after:**
  - Food preparation, handling food, serving a child food
  - Eating food, bottle feeding, feeding a child
  - Giving medications
  - Playing in water that more than one person is using
  - Diapering
- **After:**
  - Using the toilet or assisting a child with toilet use
  - Handling body fluids: nasal mucus, blood, saliva, vomit
  - Handling uncooked food, especially raw meat or poultry
  - Handling animals or animal waste
  - Playing in sandboxes
  - Being outdoors
  - Removing disposable gloves
  - Cleaning or handling garbage
- **Before** going home

1

Wet hands.

Have liquid soap and clean disposable or single use towels accessible.
Use warm, running water to wet hands (80-110°F in NC).

2

Apply liquid soap.

3

Wash hands for 20 seconds.

Rub hands together until lather appears. Wash the front and back of hands, wrists, nail beds, between fingers, and under fingernails and jewelry.
Continue for 20 seconds.

4

Rinse well.

Rinse hands, fingers pointing downward, under warm, running water (80-110°F in NC).

5

Dry hands.

Use a clean disposable or single-use towel or mechanical dryer to completely dry hands.

6

Turn water off with the towel.

Dispose of towel in covered trash container lined with a disposable plastic bag.

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The development, translation, and mailing of the Adult Handwashing Poster are supported by funding from the Child Care and Development Fund Block Grant of the Child Care Bureau, Administration on Children and Families, USDHHS, through a contract between the NC Division of Child Development, NCDHHS, and the Department of Maternal and Child Health, Gillings School of Global Public Health, The University of North Carolina at Chapel Hill.

STOP DISEASE

GLOVING

1. Put on a clean pair of gloves.

2. Provide appropriate care.

3. Remove each glove carefully. Grab the first glove at the palm and strip the glove off. Touch dirty surfaces only to dirty surfaces.

4. Ball up the dirty glove in the palm of the other gloved hand.

5. With the clean hand, strip the glove off from underneath at the wrist, turning the glove inside out. Touch clean surfaces only to clean surfaces.

6. Discard the dirty gloves immediately in a step can. Wash your hands.

Selecting an Appropriate Sanitizer or Disinfectant

One of the most important steps in reducing the spread of infectious diseases in child care settings is cleaning, sanitizing or disinfecting surfaces that could possibly pose a risk to children or staff. Routine cleaning with detergent and water is the most common method for removing some germs from surfaces in the child care setting. However, most items and surfaces in a child care setting require sanitizing or disinfecting after cleaning to further reduce the number of germs on a surface to a level that is unlikely to transmit disease.

What is the difference between sanitizing and disinfecting?

Sometimes these terms are used as if they mean the same thing, but they are not the same.

Sanitizer is a product that reduces but does not eliminate germs on inanimate surfaces to levels considered safe by public health codes or regulations. A sanitizer may be appropriate to use on food contact surfaces (dishes, utensils, cutting boards, high chair trays), toys that children may place in their mouths, and pacifiers. See Appendix K, Routine Schedule for Cleaning, Sanitizing and Disinfecting for guidance on use of sanitizer vs. disinfectant.

Disinfectant is a product that destroys or inactivates germs (but not spores) on an inanimate object. A disinfectant may be appropriate to use on hard, non-porous surfaces such as diaper change tables, counter tops, door & cabinet handles, and toilets and other bathroom surfaces. See Appendix K, Routine Schedule for Cleaning, Sanitizing and Disinfecting for guidance on use of sanitizer vs. disinfectant.

The U.S. Environmental Protection Agency (EPA) recommends that only EPA-registered products be used. Only a sanitizer or disinfectant product with an EPA registration number on the label can make public health claims that they are effective in reducing or inactivating germs. Many bleach and hydrogen peroxide products are EPA-registered and can be used to sanitize or disinfect. Please see the "How to Find EPA Registration Information" section below to learn more specific information on the products.

Always follow the manufactures' instructions when using EPA-registered products described as sanitizers or disinfectants. This includes pre-cleaning, how long the product needs to remain wet on the surface or item, whether or not the product should be diluted or used as is, and if rinsing is needed. Also check to see if that product can be used on a food contact surface or is safe for use on items that may go into a child's mouth. Please note that the label instructions on most sanitizers and disinfectants indicate that the surface must be pre-cleaned before applying the sanitizer or disinfectant.

Are there alternatives to chlorine bleach?

A product that is not chlorine bleach can be used in child care settings IF:

- it is registered with the EPA;
- it is also described as a sanitizer or as a disinfectant;
- it is used according to the manufacturer's instructions.

Check the label to see how long you need to leave the sanitizer or disinfectant in contact with the surface you are treating, whether you need to rinse it off before contact by children, for any

precautions when handling, and whether it can be used on a surface that may come in contact with child's mouth.

Some child care settings are using products with hydrogen peroxide as the active ingredient instead of chlorine bleach. Check to see if the product has an EPA registration number and follow the manufacturer's instructions for use and safe handling. (Please see the "How to Find EPA Registration Information" section below for more information.) Remember that EPA-registered products will also have available a Material Safety Data Sheet (MSDS) that will provide instructions for the safe use of the product and guidance for first aid response to an accidental exposure to the chemical.

In addition, some manufacturers of sanitizer and disinfectant products have developed "green cleaning products" that have EPA registration. As new environmentally-friendly cleaning products appear in the market, check to see if they are EPA-registered.

Household Bleach & Water

Many household bleach products are now EPA-registered. When purchasing EPA-registered chlorine bleach, make sure that the bleach concentration is for household use, and not for industrial applications. Household chlorine bleach is typically sold in retail stores as an 8.25% sodium hypochlorite solution.

EPA-registered bleach products are described as sanitizers and disinfectants. Check the label to see if the product has an EPA registration number and follow the manufacturer's safety and use instructions. (Please see the "How to Find EPA Registration Information" section below for more information.) Pay particular attention to the mixing "recipe" and the required contact time (i.e., the time the solution must remain on a surface to be effective) for each use. Remember, the recipe and contact time are most likely different for sanitizing and disinfecting.

If you are not using an EPA-registered product for sanitizing and disinfecting, please be sure you are following state or local recommendations and/or manufacturer's instructions for creating safe dilutions necessary to sanitize and/or disinfect surfaces in your early care and education environment. Using too little (a weak concentration) bleach may make the mixture ineffective; however, using too much (a strong concentration) bleach may create a potential health hazard.

To safely prepare bleach solutions:

- Dilute bleach with cool water and do not use more than the recommended amount of bleach.
- Select a bottle made of opaque material.
- Make a fresh bleach dilution daily; label the bottle with contents and the date mixed.
- Wear gloves and eye protection when diluting bleach.
- Use a funnel.
- Add bleach to the water rather than the water to bleach to reduce fumes.
- Make sure the room is well ventilated.
- Never mix or store ammonia with bleach or products that contain bleach.

To safely use bleach solutions:

- Apply the bleach dilution after cleaning the surface with soap or detergent and rinsing with water if visible soil is present.
- If using a spray bottle, adjust the setting to produce a heavy spray instead of a fine mist.
- Allow for the contact time specified on the label of the bleach product.
- Apply when children are not present in the area.
- Ventilate the area by allowing fresh air to circulate and allow the surfaces to completely air dry or wipe dry after the required contact time before allowing children back into the area.
- Store all chemicals securely, out of reach of children and in a way that they will not tip and spill.

Adapted from: California Childcare Health Program. 2013. Safe and Effective Cleaning sanitizing and Disinfecting. *Health and Safety Notes* (March).

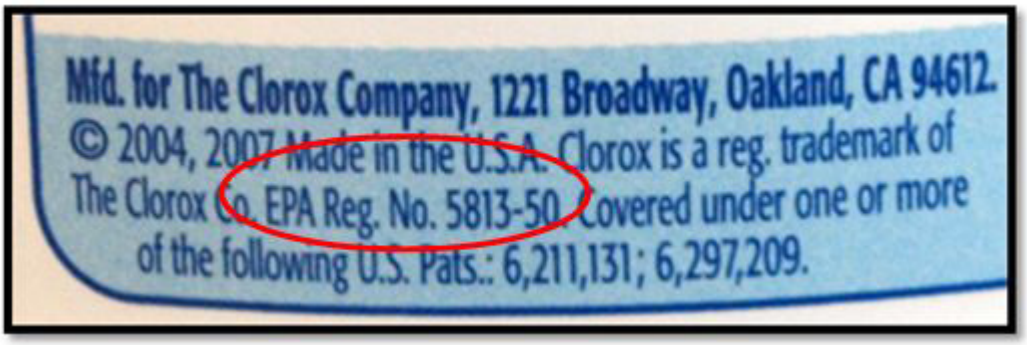
To Review:

- Determine if the surface requires sanitizing or disinfecting;
- Check the labels of all products to see if they are EPA-registered; there are alternatives to chlorine bleach;
- Many chlorine bleach products (8.25% sodium, hypochlorite) are now EPA-registered
    - If EPA-registered, you must follow the label instructions for "recipes" and contact times;
- If using non-EPA-registered products, follow state or local recommendations for "recipes" and contact times;
- Prepare and use the solutions safely;
- Use products that are safe for oral contact when used on food contact surfaces or on items that may mouthed by children.

How to Find EPA Registration Information

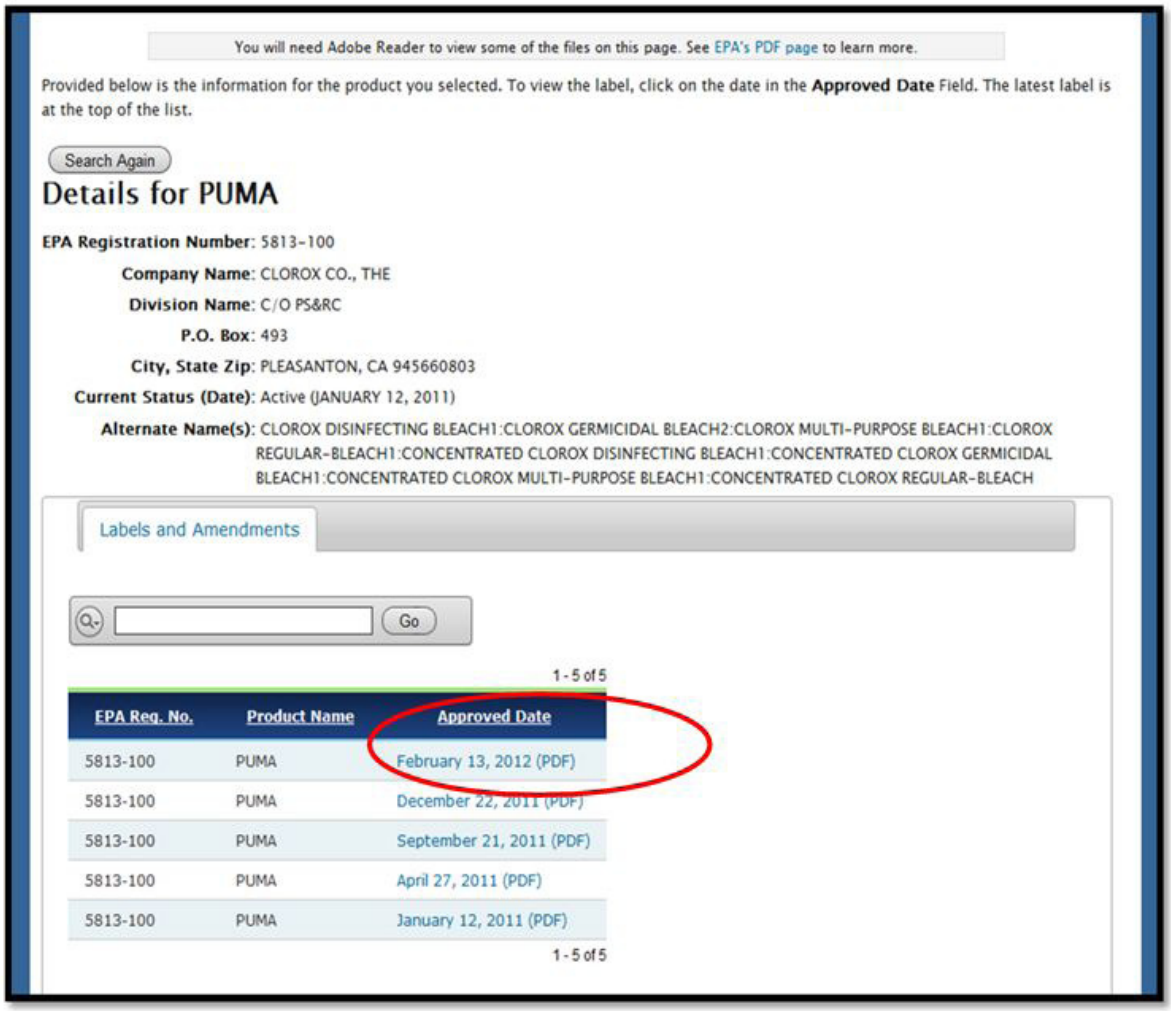
The following information is intended to serve as a visual guide to locating EPA registration numbers and product label information. Any products featured in the examples below are used for illustrative purpose only, and do not represent an endorsement by the National Resource Center for Health and Safety in Child Care and Early Education (NRC). The NRC does not endorse specific products.

1. Locate the EPA Registration number on the product label:



2. Go to http://iaspub.epa.gov/apex/pesticides/f?p=PPLS:1. Enter this number into the box titled “EPA Registration Number” and click the Search button:

3. You should see the details about the product, and beneath that, a portable document file (PDF) bearing the date that this product was registered by the EPA (if there is a list, the PDF at the top of the list should show the most recent approval). Click on that most recently-approved PDF. You will need a PDF file reader to access this file. There are a variety of readers available and most are free.



4. The PDF should come up on your screen. Scroll down to the section that shows the directions for using the product as a sanitizer or disinfectant. Follow the directions listed for your intended use.

For Sanitizing -or- To Sanitize			
Work Surfaces	2 tsp [1/3 oz]	1 Gallon	Wash, rinse, wipe surface area with bleach solution for [at least] 2 minutes, let air dry. -or- To sanitize work surfaces, wash, rinse and wipe surface area with a solution of 2 teaspoons of bleach per 1 gallon of water for [at least] 2 minutes. Let air dry.
Dishes, Glassware, Utensils	2 tsp [1/3 oz]	1 Gallon	Wash and rinse. [After washing,] soak for [at least] 2 minutes in bleach solution, [drain] and [let] air dry. -or- To sanitize dishes, glassware, and utensils, wash and rinse. [After washing,] soak for [at least] 2 minutes in a solution of 2 teaspoons of bleach per 1 gallon of water, [drain] and air dry.
Refrigerators, Freezers	2 tsp [1/3 oz]	1 Gallon	Remove food [from refrigerator -and/or- freezer]. Wash, rinse, wipe surface area with bleach solution for [at least] 2 minutes. Let air dry.
Plastic Cutting Boards	2 tsp [1/3 oz]	1 Gallon	Wash and rinse. [After washing,] soak for [at least] 2 minutes in bleach solution, let air dry.
Wooden Cutting Boards	2 Tbsp [1 oz]	1 Gallon	Wash, wipe, or rinse with detergent and water, then apply sanitizing -or- bleach solution. Let stand 2 minutes. Rinse with a solution of 2 teaspoons of this product per gallon of water. Do not rinse or soak equipment overnight.
Baby Bottles	2 tsp [1/3 oz]	1 Gallon	Wash and rinse. [After washing,] soak for [at least] 2 minutes in bleach solution, let air dry.
Garbage Cans	1/2 cup [4 oz]	1 Gallon	After washing and rinsing, brush inside with bleach solution. Let stand for 5 minutes before rinsing.
Pet [Food -and/or- Water] Bowls	2 tsp [1/3 oz]	1 Gallon	Wash and rinse. [After washing,] soak for [at least] 2 minutes in bleach solution, let air dry.
[Kitchen] [Dish]cloths & Rags	1/2 cup [4 oz]	1 Gallon	[Pre-]wash items, then soak in solution for [at least] 5 minutes. Rinse and air dry.

For Disinfecting -or- To Disinfect			
Floors, Walls, Vinyl, Glazed Tiles -and/or- (***Insert relevant use site(s) from List 5***)	1/2 cup [4 oz]	1 Gallon	[Pre-]wash surface, [mop or] wipe with bleach solution[. Allow solution to contact surface] for [at least] 5 minutes. Rinse well and air dry. -or- To disinfect floors, walls, vinyl, and glazed tiles, pre-wash surface, then mop or wipe with a solution of 1/2 cup of bleach per 1 gallon of water. Allow solution to contact surface for [at least] 5 minutes. Rinse well and air dry. [For *Pseudomonas aeruginosa*, Canine parvovirus and Feline paleukopenia virus, let stand for -or- contact time is 10 minutes.]
Bathtubs, Showers [& Kitchen] Sinks	1/2 cup [4 oz]	1 Gallon	[Pre-]wash surface [and] wipe with bleach solution[. Allow solution to contact surface] for [at least] 5 minutes. Rinse well and air dry.
Nonporous Baby Toys [& Furniture]	1/2 cup [4 oz]	1 Gallon	[Pre-]wash surface, soak or wipe with bleach solution[. Allow solution to contact surface] for [at least] 5 minutes. Rinse well and air dry.
Nonporous pet toys -and/or- accessories -or- pet areas	1/2 cup [4 oz]	1 Gallon	[Pre-]wash surface, soak or wipe with bleach solution[. Allow solution to contact surface] for [at least] 5 minutes. Rinse well and air dry.
Toilet Bowl	3/4 cup	Toilet	Flush toilet. Pour this product into bowl. Brush bowl, making sure to

A Final Note

Remember that any cleaning, sanitizing or disinfecting product must always be safely stored out of reach of children. Always follow the manufacturer's instruction for safe handling to protect yourselves and those in your care.

References:

1. California Childcare Health Program. 2009. Sanitize safely and effectively: Bleach and alternatives in child care programs. *Health and Safety Notes* (July). http://www.ucsfchildcarehealth.org/pdfs/healthandsafety/SanitizeSafely_En0709.pdf.
2. U.S. Environmental Protection Agency. 2012. Pesticide Product Label System Website. http://iaspub.epa.gov/apex/pesticides/f?p=PPLS:1.
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LakeCounty
Health Department And
Community Health Center

Bleach Solutions

In Childcare Facilities
(Sodium Hypochlorite)

CLEAN means to remove soil or debris by scrubbing with a detergent solution (liquid dishwashing detergent and water) and rinsing with water.

SANITIZE means to reduce the number of microorganisms (germs) on a surface to safe levels. All areas which need to be sanitized must to be cleaned first.

DISINFECT means to destroy harmful microorganisms (germs) on a surface.

Sanitize (100 ppm)	Disinfect (600 ppm)	Special Clean-up (5000 ppm)
CLEAN AND SANITIZE AFTER EACH USE: Toys, Food Service Areas, Dishes, Tables	**CLEAN AND DISINFECT AFTER EACH USE:** Diaper Changing Surface	**CLEAN AND USE AS NEEDED:** Vomit and Diarrhea (not for other bodily fluids)
SANITIZE DAILY OR WHEN SOILED: Wiping Cloths/Sponges, common surfaces (not bathroom), floors, mats, tables, countertops, door knobs, etc.	**DISINFECT DAILY OR WHEN SOILED:** Bathroom Areas	**MIX SOLUTION WHEN NEEDED** WEAR GLOVES AND MASK TO PROTECT YOURSELF

NEW Bleach Solution (8.25%)

Sanitize (100 ppm)	Disinfect (600 ppm)	Special Clean-up (5000 ppm)
¼ **teaspoon** bleach/**quart** water	1 ½ **teaspoon** bleach/**quart** water	4 **tablespoons** bleach/**quart** water
1 **teaspoon** bleach/**gallon** water	2 **tablespoons** bleach/**gallon** water	1 **cup** bleach/**gallon** water

Bleach Solution (5.25-6.00%)

Sanitize (100 ppm)	Disinfect (600 ppm)	Special Clean-up (5000 ppm)
¼ **teaspoon** bleach/**quart** water	1 **tablespoon** bleach/**quart** water	6 **tablespoons** bleach/**quart** water
1 **teaspoon** bleach/**gallon** water	¼ **cup** bleach/**gallon** water	1 ½ **cup** bleach/**gallon** water

HELPFUL TIPS

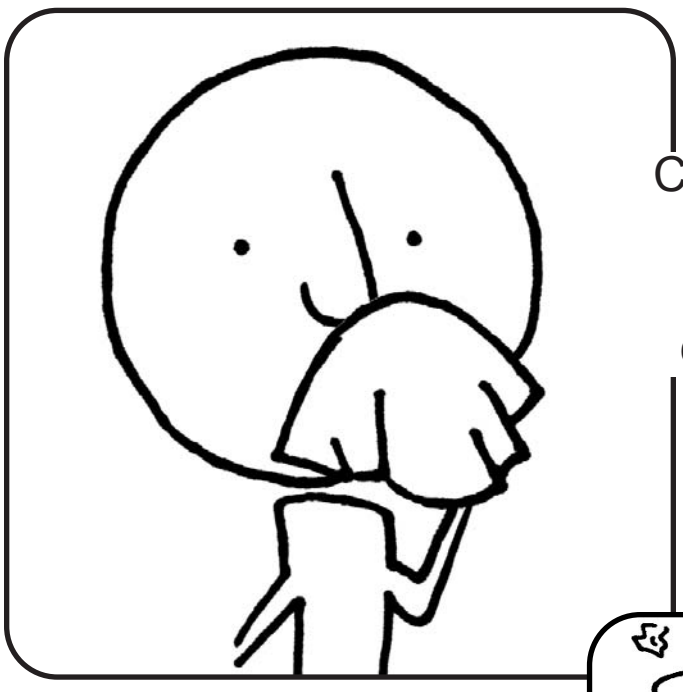
- Identify the concentration and make sure it's EPA registered
- Mix fresh solutions daily with cool water (don't add any other chemicals!)
- Leave on the surface for two (2) minutes—allow air dry surface
- Keep out of the reach of children
- Replace bleach every 3-5 months
- Never spray while holding child
- Don't use scented bleach

If you have questions, please contact Lake County Health Department at 847-377-8164.

Health Promotion

Stop the spread of germs that make you and others sick!

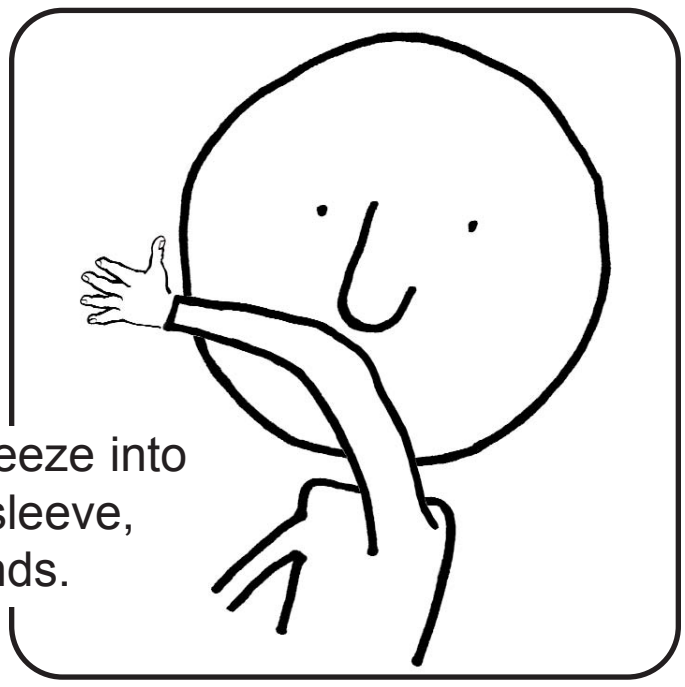
Cover your Cough



Cover your mouth and nose with a tissue when you cough or sneeze

or

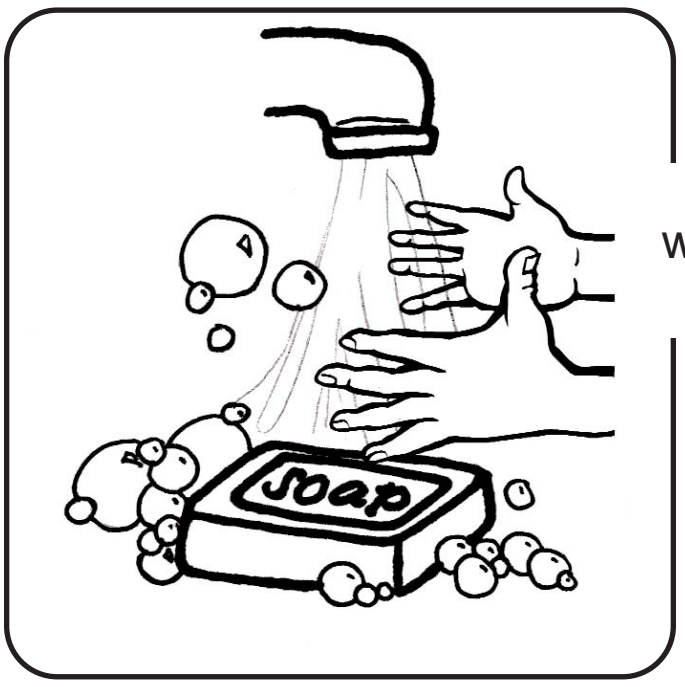
cough or sneeze into your upper sleeve, not your hands.



Put your used tissue in the waste basket.

Clean your Hands

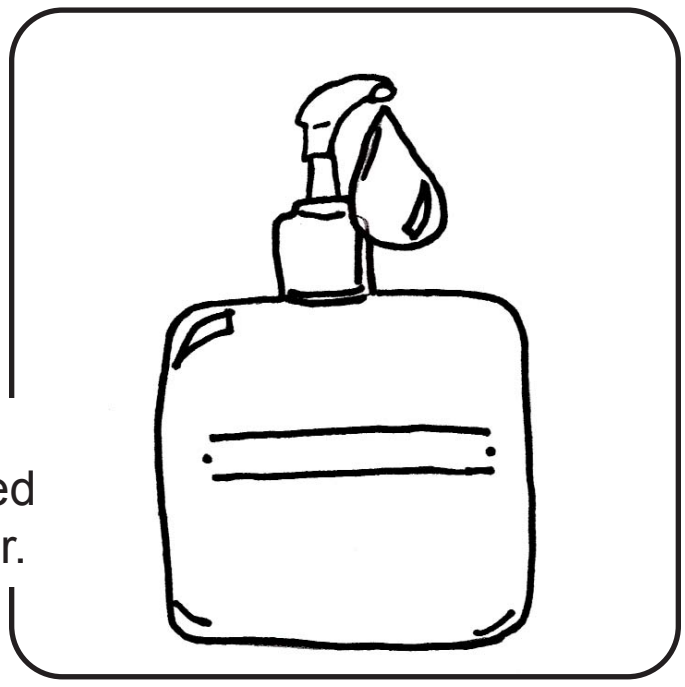
after coughing or sneezing.



Wash hands with soap and warm water

or

clean with alcohol-based hand cleaner.



MINNESOTA MDH DEPARTMENT OF HEALTH

Minnesota Department of Health
625 N Robert Street, PO Box 64975
St. Paul, MN 55164-0975
651-201-5414 TDD/TTY 651-201-5797
www.health.state.mn.us

STOP ANTIBIOTIC MISUSE MINNESOTA

Minnesota Antibiotic Resistance Collaborative

APIC
ASSOCIATION FOR PROFESSIONALS IN INFECTION CONTROL AND EPIDEMIOLOGY, INC.

IC#141-1428

Fight Germs! Wash Your Hands!

Washing your hands often and well is an easy way to help prevent the spread of many infections, including the common cold. Illinois law sets standards for handwashing in child care centers and day care homes. Here are some recommendations that can also help you address Illinois Early Learning and Development Benchmarks 22.A.ECa and 22.A.ECb.

What are the best times to wash hands?

Children should wash their hands as soon as they arrive at the child care center or day care home, AND…

- BEFORE going home
- AFTER using the bathroom, sneezing, touching the nose, playing with an animal, playing outside, playing with toys that other children use, or touching anything soiled with body fluids or wastes (such as blood, saliva, urine, stool, or vomit)
- BEFORE AND AFTER eating, cooking, or otherwise handling food
- ANYTIME hands look, feel, or smell unclean

Parents and teachers should wash their hands as soon as they arrive at the school or child care center, AND…

- BEFORE handling food or bottles, giving or using medicine or ointments, or going home
- AFTER using or helping a child use the toilet, changing a diaper, touching any body fluids (from a runny nose, for example), handling pets or pet objects (cages or leashes, for example), handling objects used by children, removing gloves used for any sanitary purpose, using a telephone, or caring for or touching a child who is ill
- ANYTIME they go to another room in the school or child care center or move to a different group of children
- ANYTIME hands look, feel, or smell unclean

What is the best way to wash hands?

Use warm, but not hot, running water. Run the "cold" water first. Then, gradually increase the amount of warm water, testing the temperature yourself before the child puts her hands under the tap. [Note: Safety experts say it's best to keep water heaters set at no higher than 120 degrees Fahrenheit (40 degrees Celsius).]

Avoid shortcuts. Use soap. (Alcohol-based hand sanitizers are now being studied, but, at present, soap is recommended for handwashing in child care settings. Never leave hand sanitizers within the reach of young children.) Wash the front and back of both hands. Remember to clean under nails. Wash for at least 15 seconds. (This is about how long it takes to sing the alphabet song.) Rinse well.

Dry your hands with a fresh paper towel or an automatic dryer. Then use the towel to turn off the faucet. Note: Do not use automatic dryers for infants and toddlers. Closely supervise other children under 6 years of age who use these dryers.

Help young children wash their hands using the above method. As they become experienced, you can teach them how to wash their hands while you supervise.

For related Web resources, see "Fight Germs! Wash Your Hands!" at http://illinoisearlylearning.org/tips.htm.

Any opinions, findings, conclusions, or recommendations expressed in this tip sheet are those of the author(s) and do not necessarily reflect the views of the Illinois State Board of Education.

Illinois Early Learning Project

29 Children's Research Center
University of Illinois at Urbana-Champaign
51 Gerty Dr. ● Champaign, IL 61820-7469
Telephone: 217-333-1386 ● Fax: 217-244-7732
Toll-free: 877-275-3227
Email: iel@illinois.edu
Internet: http://illinoisearlylearning.org

Illinois State Board of Education

Diapering Procedure

1 Get Organized

Wash your hands.

Gather what you need:

- ✔ non-absorbent, disposable paper (recommended) or pad
- ✔ fresh diaper
- ✔ clean clothes (if necessary)
- ✔ plastic bag for soiled items
- ✔ disposable wipes
- ✔ gloves (recommended)
- ✔ diaper cream, removed from container and placed on a disposable tissue

Put on disposable gloves.

2 Carry Child to Diapering Area

Avoid contact with clothing soiled with urine or stool (germs).

- Gently place child on diapering surface.

Always keep a hand on the child.

- Remove child's clothes, shoes and socks as needed.
- Place soiled clothes in plastic bag. Close securely for sending home. *Do not rinse.*

3 Clean the Child

- Remove stool and urine from front to back.
- Use fresh wipe or dampened paper towel with each front to back cleaning.
- Place soiled wipe or paper towel in plastic-lined, hands-free, covered trash receptacle.

*Revised June 2011

4 Remove Soiled Diaper

IMMEDIATELY put disposable diaper in a plastic-lined, hands-free, covered trash receptacle.

Put soiled reusable diaper and/or soiled clothes in a plastic bag, close securely, for sending home. Do not rinse.

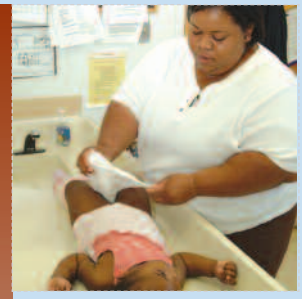
Remove gloves.

Dispose of immediately.

Clean your hands with a disposable wipe.

Clean the child's hands with a fresh disposable wipe.

If disposable paper is used, fold from the feet over any spills under the child.



5 Put A Clean Diaper on the Child

- Slide fresh diaper under child.
- Use tissue to apply needed diapering cream. Discard tissue in plastic-lined, hands-free, covered trash receptacle.

- Adjust and fasten diaper.
- Finish clothing child.

6 Wash Child's Hands

Take child to the sink. Hold child and wash child's hands with soap and water.

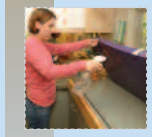
If you are unable to hold the child for handwashing and the child cannot stand at the sink, use commercial disposable wipe to clean child's hands: between fingers, and both sides to the wrist. OR use the three paper towel method: the first damp and soapy for washing, the second damp for rinsing and the third to dry hands.

Return child to supervised area.

Wash Rinse Disinfect

7 Diapering Area

- If paper liner is used, dispose of paper liner in a plastic-lined, hands-free, covered trash receptacle.
- Spray and wipe **entire** diapering area with detergent solution.
- Rinse with water.
- Spray **entire** diapering area with disinfecting solution. (500-800 parts per million (ppm) of chlorine).



If a pad is used, spray both sides of the pad and the changing table surface with detergent solution. Rinse with water. Spray both sides of the pad and the changing table surface with disinfecting solution.

Let disinfecting solution sit for 2 minutes. Air-dry or wipe dry.

8 Wash Your Hands

- Put cleaning and disinfecting solutions away.
- Wash your hands.

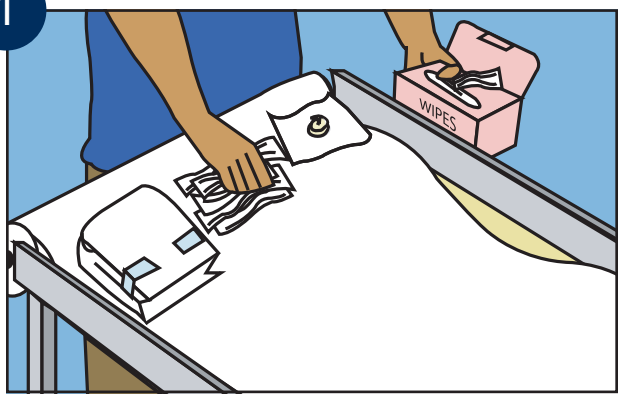
Record diaper change, diaper's contents, and any problems in daily log.

North Carolina Child Care Health & Safety Resource Center • 1.800.367.2229 • www.healthychildcarenc.org •
The development, translation, and mailing of the Diapering Procedure Poster are supported by funding from the Child Care and Development Fund Block Grant of the Child Care Bureau, Administration on Children and Families, USDHHS, through a contract between the NC Division of Child Development, NCDHHS, and the Department of Maternal and Child Health, Gillings School of Global Public Health, The University of North Carolina at Chapel Hill.

Diapering

This poster is based on *Caring for Our Children, 3rd Edition*, a publication of the American Academy of Pediatrics, American Public Health Association, and the National Resource Center for Health and Safety in Child Care and Early Education. It was created by CCA Global with guidance from the PA Chapter of the AAP.

1



Cover surface with disposable paper.

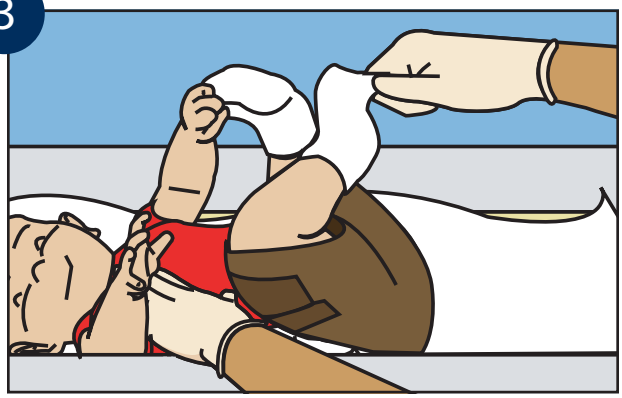
Remove from containers and place on diapering surface **away from child's reach**:

- Wipes
- Clean diaper
- Dab of diapering cream on facial tissue
- Plastic bag for soiled clothes
- [Put on gloves if using]

2

Place child on diapering surface.
Always keep a hand on the child.

3



Remove bottom clothing including shoes & socks if feet cannot be kept from contacting soiled skin or surfaces. [If clothing is soiled, remove and place in plastic bag.]

4

Unfasten diaper but keep soiled diaper under child's bottom.

5

Lift child's legs and clean skin from front to back. Use fresh wipe each time.

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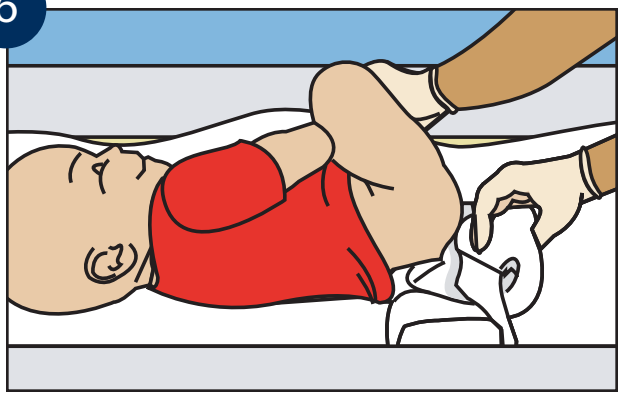
6

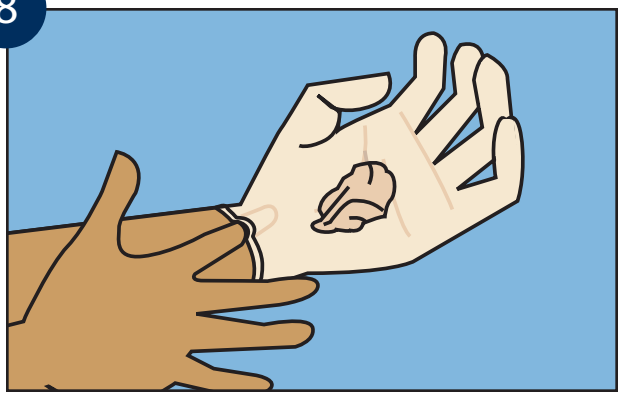


Put soiled wipes in soiled diaper or directly into a hands-free, plastic-lined can. Then, dispose of soiled diaper in the hands-free can.

7

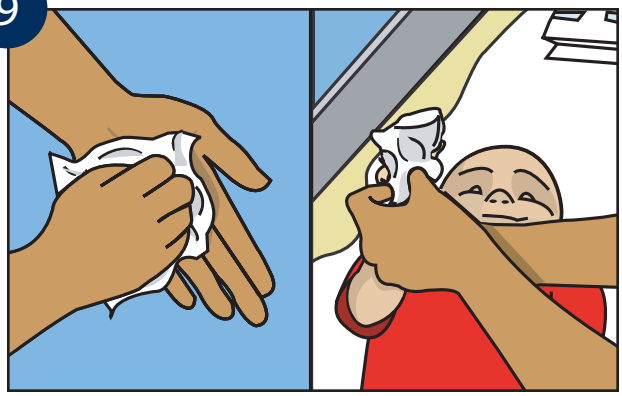
If paper is soiled, use corner to fold clean side of paper back under child's cleaned bottom.

8



Remove gloves.
Dispose in hands-free can.

9

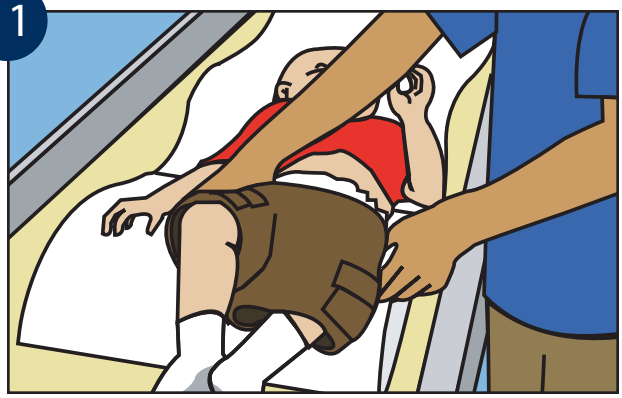


Use separate fresh wipe on adult's and child's hands. Dispose in hands-free can.

10

Put clean diaper under child's bottom.
[If using diaper cream, apply with facial/ toilet tissue or glove, then discard in hands-free can.]

11



Fasten diaper and dress child.

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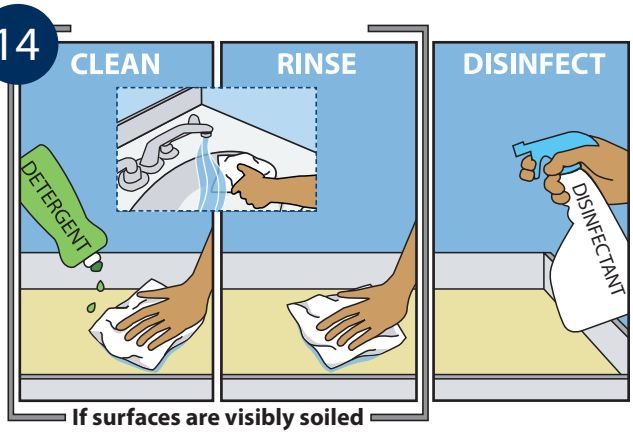
12

Wash child's hands at sink.*

13

Return child to supervised area.

14



A. Dispose of changing table paper.

B. If diapering surfaces are visibly soiled:
   - Clean surfaces with detergent, water and paper towels.
   - Rinse surfaces with water.

C. Wet all diapering surfaces with disinfectant solution.

D. Leave solution on for required contact time.

15

WASH HANDS*

If diapering surface is wet after required contact time, dry with clean paper towel before next change.

* If hands are not visibly soiled, alcohol-based hand sanitizers are OK for adults and children over 24 months.

16

Record in Daily Report form for family:
- Time of diaper change
- Diaper contents
- Any problems such as loose stool, skin irritation, etc.

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ILLINOIS DEPARTMENT OF PUBLIC HEALTH

Reptile Rules

- Reptiles include iguanas, turtles, snakes and lizards. As with many other animals, reptiles may carry *Salmonella* bacteria, which can be shed in their feces. Unwashed hands can carry the bacteria directly or indirectly to the mouth. When ingested, the bacteria can cause diarrheal illness, which may be serious in some people.
- Always wash your hands thoroughly after you handle your pet reptile, its cage, its litter, its food and anything it has touched.
- Keep your pet reptile and its equipment out of the kitchen or any area where food is prepared. Kitchen sinks should not be used to bathe reptiles or wash their dishes, cages or aquariums. If a bathtub is used for these purposes, it should be cleaned thoroughly and disinfected with bleach.
- Do not nuzzle or kiss your pet reptile.
- Keep reptiles out of homes where there are children under 5 years of age or people with weakened immune systems. Children under 5 years of age or people with weakened immune systems should avoid contact with reptiles.
- Pet reptiles should not be allowed in child care centers.
- Pet reptiles should not be allowed to roam freely throughout the home or living area.

For more information, contact the Illinois Department of Public Health, Division of Infectious Diseases, 525 W. Jefferson St., Springfield, IL 62761; telephone 217-785-7165 or TTY (hearing impaired use only) 800-547-0466.

Printed by Authority of the State of Illinois • P.O. # 511561 10M 1/01

Possible Choking and Suffocation Hazards

Foods

- Big chunks of meat
- Whole olives
- Whole grapes and raisins
- Peanuts, nuts
- Gum
- Popcorn
- Hard candy and cough drops
- Raw vegetables (carrots, etc.)
- Hot dogs and sausages cut in rounds
- Watermelon seeds
- Spoonfuls of peanut butter
- Lollipops
- Dried fruit

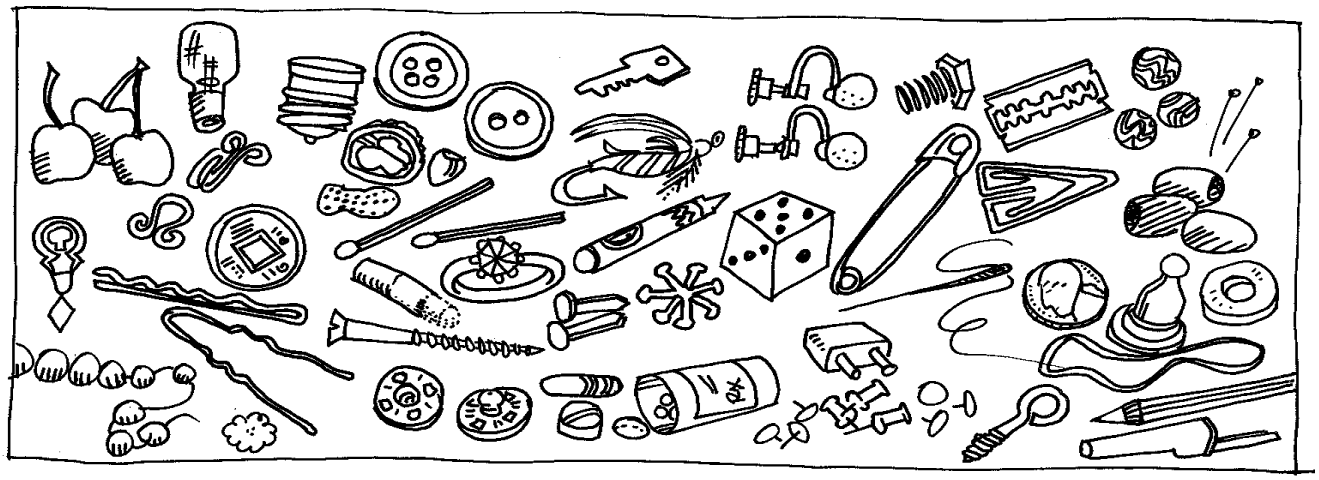
Toys

- Balloons
- Plastic bags
- Game pieces
- Play jewelry
- Game tokens
- Small objects
- Jacks
- Small toys (less than 1 1/2")
- Marbles
- Toy chests with no air holes

Objects

- Pins and nails
- Staples
- Toothpicks
- Coins
- Pencils and pens
- Jewelry
- Crayons

Can you think of any more?



California Childcare Health Program ♦ School of Nursing ♦ University of California, San Francisco (UCSF)
Healthline 1-800-333-3212 ♦ www.ucsfchildcarehealth.org

The Flu:
A Guide For Parents

FLU INFORMATION

What is the flu?

Influenza (the flu) is an infection of the nose, throat, and lungs caused by influenza viruses. There are many different influenza viruses that are constantly changing. They cause illness, hospital stays and deaths in the United States each year.

The flu can be very dangerous for children. Each year about 20,000 children younger than 5 years old are hospitalized from flu complications, like pneumonia.

How serious is the flu?

Flu illness can vary from mild to severe. While the flu can be serious even in people who are otherwise healthy, it can be especially dangerous for young children and children of any age who have certain long term health conditions, including asthma (even mild or controlled), neurological and neurodevelopmental conditions, chronic lung disease, heart disease, blood disorders, endocrine disorders (such as diabetes), kidney, liver, and metabolic disorders, and weakened immune systems due to disease or medication. Children with these conditions and children who are receiving long-term aspirin therapy can have more severe illness from the flu.

How does the flu spread?

Most experts believe that flu viruses spread mainly by droplets made when people with the flu cough, sneeze or talk. These droplets can land in the mouths or noses of people who are nearby. Less often, a person might get the flu by touching something that has flu virus on it and then touching their own mouth, eyes or nose.

What are the symptoms of the flu?

Symptoms of the flu can include fever, cough, sore throat, runny or stuffy nose, body aches, headache, chills, fatigue and sometimes vomiting and diarrhea. Some people with the flu will not have a fever.

How long can a sick person spread the flu to others?

People with the flu may be able to infect others by shedding virus from 1 day before getting sick to 5 to 7 days after. However, children and people with weakened immune systems can shed virus for longer, and might be still contagious past 5 to 7 days of being sick, especially if they still have symptoms.

PROTECT YOUR CHILD

How can I protect my child against the flu?

To protect against the flu, the first and most important thing you can do is to get a flu vaccine for yourself and your child.

- Vaccination is recommended for everyone 6 months and older.
- It's especially important that young children and children with long term health conditions get vaccinated. (See list of conditions under "How Serious is the Flu?")
- Caregivers of children with health conditions or of children younger than 6 months old should get vaccinated. (Babies younger than 6 months are too young to be vaccinated themselves.)
- Another way to protect babies is to vaccinate pregnant women because research shows that this gives some protection to the baby both while the woman is pregnant and for a few months after the baby is born.

A new flu vaccine is made each year to protect against the flu viruses that research indicates are most likely to cause illness during the next flu season. Flu vaccines are made using strict safety and production measures. Over the years, millions of flu vaccines have been given in the United States with a very good safety record.

U.S. Department of Health and Human Services
Centers for Disease Control and Prevention

Is there a medicine to treat the flu?

Antiviral drugs can treat flu illness. They can make people feel better and get better sooner and may prevent serious flu complications, like pneumonia, for example, that can lead to hospitalization and even death. These drugs are different from antibiotics, but they also need to be prescribed by a doctor. They work best when started during the first 2 days of illness. It's very important that antiviral drugs be used early to treat the flu in people who are very sick (for example people who are in the hospital) or people who are at greater risk of having serious flu complications. Other people with flu illness may also benefit from taking antiviral drugs. These drugs can be given to children and pregnant women.

What are some of the other ways I can protect my child against the flu?

In addition to getting vaccinated, take – and encourage your child to take – everyday steps that can help prevent the spread of germs.

This includes:

- Stay away from people who are sick.
- If your child is sick with flu-like illness, try to keep him or her in a separate room from others in the household, if possible.
- CDC recommends that your sick child stay home for at least 24 hours after his or her fever is gone except to get medical care or for other necessities. The fever should be gone without the use of a fever-reducing medicine.
- Cover coughs and sneezes with a tissue. Throw the tissue in the trash after it has been used.
- Wash hands often with soap and water. If soap and water are not available, use an alcohol-based hand rub.
- Avoid touching your eyes, nose and mouth. Germs spread this way.
- Keep surfaces like bedside tables, surfaces in the bathroom, kitchen counters and toys for children clean by wiping them down with a household disinfectant according to directions on the product label.

These everyday steps are a good way to reduce your chances of getting all sorts of illnesses, but a yearly flu vaccine is always the best way to specifically prevent the flu.

IF YOUR CHILD IS SICK

What can I do if my child gets sick?

Talk to your doctor early if you are worried about your child's illness.

If your child is 5 years and older and does not have other health problems and gets flu-like symptoms, including a fever and/or cough, consult your doctor as needed and make sure your child gets plenty of rest and drinks enough fluids.

If your child is younger than 5 years (and especially younger than 2 years) or of any age with a long term health condition (like asthma, a neurological condition, or diabetes, for example) and develops flu-like symptoms, they are at risk for serious complications from the flu. Ask a doctor if your child should be examined.

What if my child seems *very* sick?

Even children who have always been healthy before or had the flu before can get very sick from the flu.

Call for emergency care or take your child to a doctor right away if your child of any age has any of the warning or emergency signs below:

- Fast breathing or trouble breathing
- Bluish or gray skin color
- Not drinking enough fluids (not going to the bathroom or not making as much urine as they normally do)
- Severe or persistent vomiting
- Not waking up or not interacting
- Being so irritable that the child does not want to be held
- Flu-like symptoms improve but then return with fever and worse cough
- Has other conditions (like heart or lung disease, diabetes,or asthma) and develops flu symptoms, including a fever and/or cough.

Can my child go to school, day care or camp if he or she is sick?

No. Your child should stay home to rest and to avoid giving the flu to other children or caregivers.

When can my child go back to school after having the flu?

Keep your child home from school, day care or camp for at least 24 hours after their fever is gone. (Fever should be gone without the use of a fever-reducing medicine.) A fever is defined as 100°F (37.8°C) or higher.

For more information, visit www.cdc.gov/flu or www.flu.gov or call 800-CDC-INFO

MAY 2013 | CS239139-A

Spread fun.

Not Flu.

Even healthy kids of any age can get seriously sick from the flu, and they can spread it to family, friends, and others.

Everyone 6 months of age and older should get a flu vaccine every year.

Get Your Flu Vaccine. Not the Flu.

The flu benefit is a covered service for Medicare and for children enrolled in Medicaid and CHIP.

CS233082-I

For more information, visit **http://www.flu.gov**

Get the Facts

- SIDS and other sleep-related infant deaths, like accidental suffocation, claim the lives of thousands of babies in the United States every year.
- Babies die each year when they are put to sleep in places that are not safe for them.
- Babies squirm, wiggle and roll and can end up in a dangerous situation, which could cause them to accidentally suffocate.
- By following these safe sleep recommendations, you can protect your baby from getting into a dangerous situation like:
  - Under a blanket or other bedding
  - Up against bumper pads, a stuffed toy or other soft objects
  - Up against or under an adult or child who is sharing the same sleep area
  - Trapped between the mattress and the wall, headboard, footboard or the bed frame of an adult bed

More Helpful Tips

- If your baby falls asleep while being held, move your baby to his or her crib.
- Car seats and carriers are made to transport your baby. After traveling, take your baby out of the car seat or carrier. If your baby is asleep, remove any loose clothing and place him or her in a crib.
- When away from home, make sure your baby will have a safe place to sleep.
- Crib bumpers are not necessary and should not be used in the crib.
- There is no proof that sleep positioners reduce the risk of SIDS. In fact, they are dangerous and should not be used.
- If you are using a hand-me-down crib, make sure you have all the assembly parts and instructions. To see if it's been recalled because of safety issues, check www.recalls.gov.
- Discuss any concerns about your baby with your doctor.

For more information or to find out about our free educational materials call 888-8CJ-SIDS or visit www.cjsids.org

Babies need a safe place to sleep to reduce the risk of Sudden Infant Death Syndrome (SIDS) and other infant sleep-related deaths.

SIDS and Safe Sleep

SIDS is Sudden Infant Death Syndrome. It is when an apparently healthy baby dies quickly and without warning and no cause of death is found. SIDS is the leading cause of death among infants one month to one year of age. There is no way to prevent SIDS but research shows that if you follow the risk reduction and safe sleep recommendations, it is less likely that your baby will die of SIDS.

It is important that you always have a safe place for your baby to sleep. Cribs, bassinets, and cradles are made just for babies to sleep in; adult beds, couches, and chairs are not. By following the safe sleep recommendations, you will be protecting your baby from SIDS and other sleep-related deaths, which may be caused by unsafe sleep situations.

CJ FOUNDATION for SIDS™

1-888-8CJ-SIDS www.cjsids.org

Don Imus/WFAN Pediatric Center
Hackensack University Medical Center
30 Prospect Avenue
Hackensack, NJ 07601

Good Night, Sleep Right.

Keep Your Baby Sleeping Safely.

CJ FOUNDATION for SIDS™

Keep It Safe

Your baby should sleep in a safety-approved crib with a firm mattress covered with a tight fitted sheet. A bassinet, cradle or play yard that meets safety standards can also be used. Adult beds, couches, chairs, pillows, quilts, and foam pads are never safe for a baby to sleep on.

Keep loose bedding and soft objects out of your baby's crib. This includes blankets, quilts, comforters, pillows, bumpers, and stuffed toys. Consider dressing your baby in a wearable blanket at nighttime and naptime.

Your baby's crib should be in the same room where you sleep. This keeps your baby close but separate from where you and others sleep. Your baby should not sleep with anyone else — adult or child. After feeding or comforting, put your baby back in his or her crib.

Back to Sleep

Your baby should be placed on his or her back for every nighttime and naptime. Sleeping on his or her back does not increase the risk of choking if your baby spits up. And in fact, a baby who sleeps on his or her stomach is at an increased risk of SIDS.

Offer your baby a pacifier at every nighttime and naptime. Using a pacifier reduces the risk of SIDS. However, if you are breastfeeding, consider waiting until he or she is 1 month old or is used to breastfeeding before using a pacifier.

Babies should not be overdressed for sleeptime. The temperature where your baby sleeps should be comfortable for a lightly clothed adult.

A Healthy Start

Your baby deserves a healthy start.

When pregnant, do not use tobacco, drugs, or alcohol. And don't allow anyone to smoke around your baby. Smoking during pregnancy and exposing your baby to second-hand smoke increases the risk of SIDS.

See your doctor regularly and bring your baby for his or her check-ups.

Breastfeed your baby, if possible. Breastfeeding reduces the risk of SIDS.

Play It Safe

Your baby should spend time on his or her tummy to play when awake and being watched closely. "Tummy-time" will help prevent flat spots from developing on your baby's head. It also will make his or her neck and shoulder muscles stronger.

Spread the News

Share this information with everyone who takes care of your baby to ensure these steps are followed when you are not there.

These recommendations are consistent with those published by the American Academy of Pediatrics and the Back to Sleep Campaign. © 2010, CJ Foundation for SIDS. Created as a public service by Della Femina, Rothschild, Jeary and Partners.

Steps to Administering Medication

*Revised June 2011

Accepting Medications

Written permission slip for each medication must include:

- ❑ Name of child
- ❑ Name of medication
- ❑ Dose to be given
- ❑ Dates to be given
- ❑ Times to be given
- ❑ Any special instructions
- ❑ Any reactions to watch for
- ❑ Parent's signature

Prescribed medications are in original container. Check for

- ❑ Name of child
- ❑ Name of medication and strength
- ❑ Directions for giving medication: dose, time, number of days and if given by mouth, eye drops, ear drops or applied topically to the skin
- ❑ Name of prescribing health professional
- ❑ Date prescription was filled
- ❑ Date medication expires

Over-the-counter medications (OTC) are in original container. Check for

- ❑ Name of child written on container
- ❑ Directions visible and understandable
- ❑ Dose recommended by parents matches the recommended dosages included in packaging instructions. A health care provider may provide signed, written instructions for a dose that will not match the recommended dose on the packaging.
- ❑ Written permission for over-the-counter medication is good for 30 days. Written notice from the parent can void the permission at any time.

Safety tips

- ❑ Check expiration date on medication. Refuse expired medication.
- ❑ Understand all instructions and be sure instructions are readable before parent leaves.

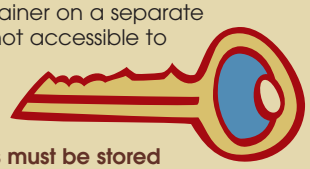
Blanket permission slips

- ❑ **For children with special health care needs** (asthma, seizures, allergies, diabetes…) written permission to give OTC or prescribed medications are valid for *up to 6 months.*
- ❑ **For OTC topical, non-medical ointments** like sunscreen and diapering cream, written permission is valid for *up to 12 months.*
- ❑ **For an extreme emergency** when parents cannot be reached, written permission is valid for a *single weight appropriate dose of acetaminophen* for a child with a fever.

Storing Medication

Medications must not be accessible to children.

- ❑ Store in a locked container, cabinet or closet.
- ❑ Store on a separate shelf away from food, hazardous chemicals, or cleaning supplies.
- ❑ For medications that require refrigeration, store in a locked container on a separate shelf in a refrigerator not accessible to the children.



Emergency medications must be stored unlocked and out of children's reach.

- ❑ Emergency medications are needed in life threatening situations such as a severe allergic reaction, severe asthma attack, or blood sugar reaction in a child with diabetes.
- ❑ Emergency medications must be stored unlocked for quick administration.
- ❑ Children must not have access to any medications.

Safety tips

- ❑ Check diaper bags for medications left behind.
- ❑ **Adult medications** must be stored properly out of children's reach.

Administering Medication

Before administering medication

- ❑ Check all information on the Permission to Administer Medication.
- ❑ Take the medication from locked storage. ***Relock.***
- ❑ Wash hands before giving medication to each child.
- ❑ Wear gloves for applying topical medications, eye drops and ear drops.
- ❑ Prepare dose. Do not touch medication with hands. Use clean, labeled medicine dropper, cup or spoon for accurate measuring of liquid medications.
- ❑ Re-check **child's name, date, time, dose, how medication is to be given** on both the medication container and permission slip.

When to refuse administering medication

- ❑ **Never** give a medication without a parent's written permission.
- ❑ **Never** give a **first dose** of a new medication.
- ❑ **Never** give a medication that has expired.
- ❑ **Never** give a medication someone else has prepared.
- ❑ **Never** give a medication you do not know how to administer. Ask for help.

Administering medication

- ❑ Re-check **child's name, date, time, dose, how medication is to be given.**
- ❑ Follow any special instructions.
- ❑ Give prepared dose to child.
- ❑ Wash hands after administering medication.
- ❑ Return medication to proper storage. ***Relock.***
- ❑ Document date, time, dose, route, and signature in the Medication Log included in the form *Medication Administration Permission and Record.*

After administering medication

- ❑ Observe child's response to the medication. Record and report any side effects or reactions to parent and director. Seek medical care as needed.
- ❑ *If an allergic reaction occurs,* notify the parent immediately.
- ❑ *If a life-threatening reaction occurs,* call 911 immediately.
- ❑ *If an error is made,* document what was given. Inform parents and director of the error. Seek medical care as needed.
- ❑ *If child does not get all the medication or refuses to take it,* do not give another dose. Inform parent and director. Seek medical advice as needed.
- ❑ After giving the last dose of medication, return **unused medication** to the parent.

6 Rights of *Safe* Medication Administration

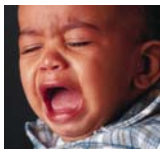
- Right *child*
- Right *date*
- Right *time*
- Right *dose*
- Right *route*
- Right *documentation*

North Carolina Child Care Health & Safety Resource Center • 1.800.367.2229 • www.healthychildcarenc.org • The development, translation, and mailing of the Administering Medication poster are supported by funding from the Child Care and Development Fund Block Grant of the Child Care Bureau, Administration on Children and Families, USDHHS, through a contract between the NC Division of Child Development, NCDHHS, and the Department of Maternal and Child Health, Gillings School of Global Public Health, The University of North Carolina at Chapel Hill.

20 Ways To Cope With A Crying Baby

Prevent Child Abuse Illinois

Shaken Baby Syndrome, sometimes called abusive head trauma, is a medical term that describes the injuries that occur to infants and toddlers who are violently shaken by a parent or an adult caregiver. *Shaken Baby Syndrome,* which can kill or severely injure a child, most often happens when a frustrated caregiver loses control in response to inconsolable crying. Anyone can become overwhelmed when a baby won't stop crying. All babies cry…some more than others. Crying is how babies communicate. It doesn't mean you're not doing a good job as a parent. We all need to have a plan and know what to do if we are in that situation. Here are 20 tips to help you cope with a crying baby…



If your baby is crying…

1. Is the baby hungry? Some babies eat every 2 hours or so.
2. Check to see if the baby needs a diaper change.
3. Check the room temperature. Is the baby too hot or too cold?
4. Try cuddling or holding the baby. You can't spoil a tiny baby - they need to feel safe and loved.
5. Walk with the baby.
6. Gently rock or bounce the baby in your arms. ***Never shake!***
7. Try shushing in the baby's ear.
8. Wrap the baby in a swaddling blanket. Make sure you know the right way to swaddle and the safety issues.
9. Offer the baby a pacifier.
10. Put the baby down for a nap.
11. Try giving the baby a soothing bath or massage.
12. Put the baby in a car seat and take a car ride or put the baby in a stroller and go for a walk.
13. Listen to music with the baby.
14. Sing to your baby.
15. Put the baby in a baby swing.
16. Try some background noise such as a vacuum sweeper.
17. Call a friend or family member for support.
18. Try not to blame yourself or to be angry or blame your baby. Know that crying is just what babies do.
19. If you are unable to calm your baby, lay the baby on its back in a safe place, such as a crib, and take a few minutes to calm yourself. Remember to check on the baby often. *If you can't calm your baby,* ***calm yourself!***
20. If you think the baby is sick, call your pediatrician.

Prevent Child Abuse Illinois

528 S. 5th Street
Suite 211
Springfield, Ill 62701

Phone: 217-522-1129
Fax: 217-522-0655
www.preventchildabuseillinois.org

Children Matter… Get Involved!

Prevent Child Abuse Illinois

How to Help Yourself!

If you feel yourself losing control, *gently* put the baby down.
Then, try some of the following tips to take care of your own needs:

- Let your anger out in a safe way. Shake a rug, do dishes or laundry, scrub a floor, beat a pillow, or just sit down and have a good cry. It's okay to feel frustrated—as long as you don't take it out on the baby.
- Calm down. Take several deep breaths, count to 100, put yourself in a time-out chair until you're calm.
- Stop and think about why you feel so angry. Is it the child or is he just a convenient target for your anger?
- Sit or lie down, close your eyes, think of a pleasant place in your memory for several minutes.
- Call a friend, relative, or neighbor to talk about your frustration or see if someone can take over for a while.
- Do something for yourself. Listen to soft music, exercise, take a shower or bath.
- Write down the ten best things about yourself. Write down the ten best things about your child.
- Contact Prevent Child Abuse Illinois at (217) 522-1129 or visit www.preventchildabuseillinois.org for additional child care and parenting resources.

Remember that crying doesn't hurt a baby—shaking does!

This brochure is part of a statewide campaign supported by:
Caterpillar, Inc.
GFWC Illinois Federation of Women's Clubs
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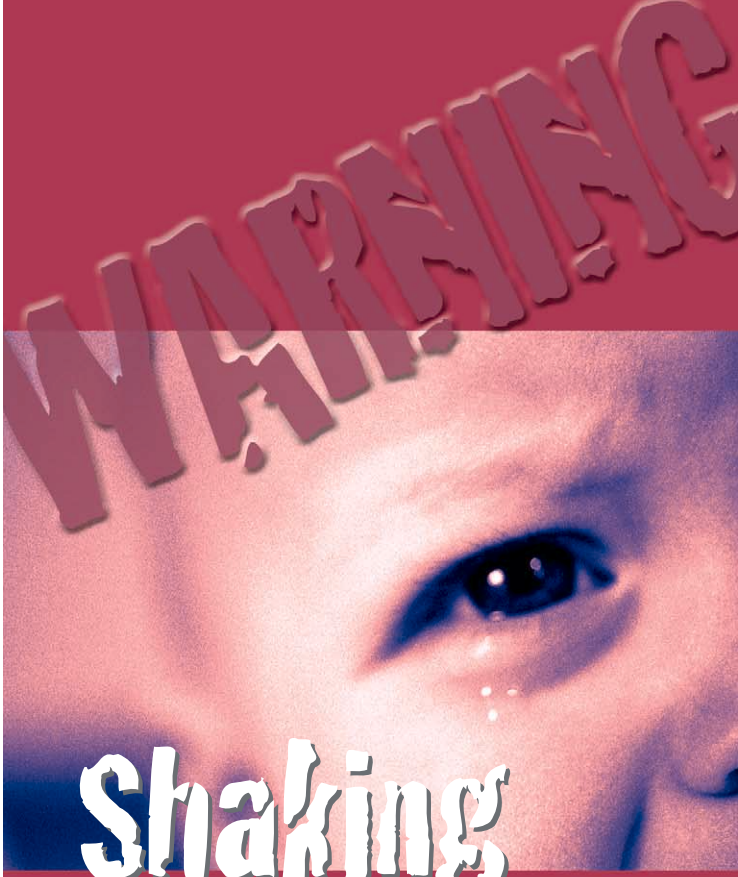
Prevent Child Abuse
Illinois

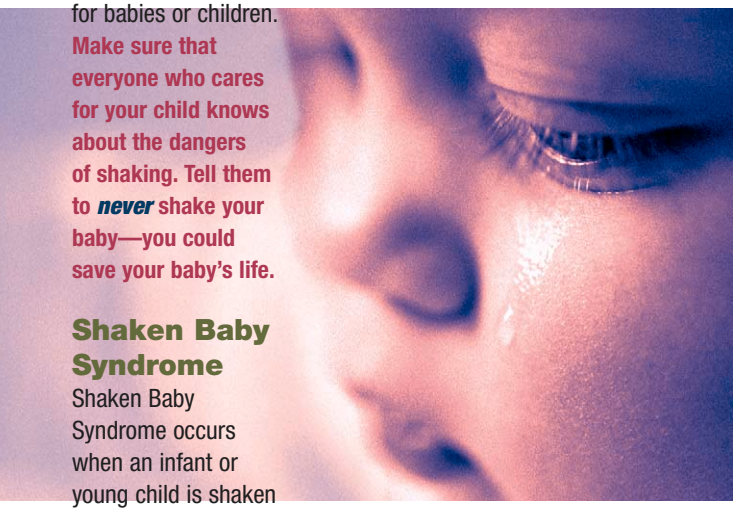


Shaking a baby can be DEADLY

Make sure no one shakes *your baby*

How do you calm a crying baby? Many parents and caregivers are frustrated when nothing seems to work. As a result, your child could be unintentionally injured, or even killed.

This brochure explains Shaken Baby Syndrome (SBS) and how to keep your baby safe. Share this information with anyone who cares for your baby—friends, relatives, babysitters, child care providers, brothers and sisters, and especially anyone who has little or no experience caring for babies or children.



Make sure that everyone who cares for your child knows about the dangers of shaking. Tell them to *never* shake your baby—you could save your baby's life.

Shaken Baby Syndrome

Shaken Baby Syndrome occurs when an infant or young child is shaken vigorously. Infants three to six months old are the most frequent victims, although Shaken Baby Syndrome can affect children of any age.

Head trauma is the most frequent cause of permanent damage or death among abused infants and children—and shaking accounts for a significant number of those cases. Babies' neck muscles are weak and their brains and connective tissues are fragile and underdeveloped. When a baby is shaken, the brain bounces within the skull, causing bruising, bleeding, and swelling inside the baby's brain.

Shaking Can Be Deadly

One out of four babies who are shaken dies as a result of being shaken. Other life-long injuries can occur, including:

- brain damage leading to mental retardation
- speech and learning disabilities
- spinal injury and paralysis
- cerebral palsy
- seizures
- hearing loss
- partial or total blindness
- broken bones and dislocations

How to Help A Crying Baby

Taking care of a baby can be difficult and frustrating. Often, the biggest challenge is trying to figure out *why* the baby is crying. The following questions can help you find out. Post this list in your baby's room as a reminder to everyone who cares for your baby.

- **Does the baby need to be fed or burped?** Feed him slowly and burp him often.
- **Does the baby need to be changed?** Check her diaper to see if it needs to be changed or loosened.
- **Is the baby too hot or too cold?** Feel the baby's head for perspiration or coolness. Add or remove clothing and blankets, as needed.
- **Does the baby seem to have a fever? Does he seem to be in pain from an earache, teething, rash, or insect bite?** Call your doctor or health clinic for advice.
- **Does the baby need to suck?** Guide her fingers or a pacifier to her mouth.
- **Does the baby need to feel close to you?** Babies need to be held often. Touching and cuddling help a baby develop both physically and mentally.
- **Is the baby overtired or overstimulated?** Turn off extra noise like the television or radio. Lower the lights. *Gently* lay the baby in his crib.
- **Does the baby just need to cry?** Babies cry a lot during the first few months of their lives. It's the only way they have to communicate. If you've tried everything, the baby is still crying, and you're feeling frustrated, *gently* place the baby in a crib or other safe place, close the door, and go to another room for a few minutes until you calm down.

Shaking a baby can be DEADLY

Make sure no one shakes your baby

Safe Food Handling

DID YOU KNOW?

It is important to consistently wash hands and kitchen surfaces before and after preparing food. 67 percent of Americans report they "always" wash cutting boards, utensils, and countertops after preparing each food.

– 2004 Consumer Survey, Partnership for Food Safety Education

Wash hands and surfaces often.

You can't see, taste or smell them. They're sneaky little critters, and they can spread throughout the kitchen and get onto cutting boards, utensils, countertops, and food. They're foodborne bacteria—and if eaten, they can cause foodborne illness. So on your mark, get set, go . . . CLEAN!

THE BIG 3: To Fight BAC!® always...

1 Rub-a-Dub
Wash your hands with warm water and soap for at least 20 seconds before and after handling food and after using the bathroom, changing diapers and handling pets. For best results, use warm water to moisten hands, then apply soap and rub hands together for 20 seconds before rinsing thoroughly.

2 Keep your Scene Clean
Wash your cutting boards, dishes, utensils, and countertops with hot water and soap after preparing each food item and before going on to the next food.

3 Towel Toss
Consider using paper towels to clean up kitchen surfaces. When done, throw away the towel. If you use cloth towels, wash them often in the hot cycle of your washing machine. If you use kitchen sponges, replace them frequently.

Wash!

Always wash hands with warm water and soap:

- before handling food;
- after handling food;
- after using the bathroom;
- after changing a diaper;
- after tending to a sick person;
- after blowing nose, coughing, or sneezing; and
- after handling pets.

Surface Cleaning Tips

Using a mixture of 3/4 teaspoon liquid chlorine bleach per quart of water (or one tablespoon bleach per gallon of water) can provide some added protection against bacteria on surfaces. Flood the surface with the bleach solution and allow it to stand for several minutes, then rinse with clean water and air dry or pat dry with fresh paper towels. Bleach solutions can lose their effectiveness over time, so discard unused portions after one week.

REUSABLE SHOPPING BAG TIPS

- *If you use cloth shopping bags, make sure to wash them in the washing machine frequently.*
- *For reusable grocery bags that are not machine washable, wash by hand frequently with hot water and soap.*
- *When shopping, put meat, poultry and fish in separate plastic bags. This will help prevent the juices from leaking out and contaminating your reusable bags and your food.*

Fruit & Veggie Handling

PREP THE KITCHEN
Before preparing fruits and vegetables, wash your hands with warm water and soap and use hot water and soap to clean your cutting board, countertop and utensils.

USE WATER – Thoroughly rinse fresh produce under running tap water, including those with skins and rinds that are not eaten. Packaged fruits and vegetables labeled “ready to eat”, “washed” or triple washed” need not be washed. Never use detergent or bleach to wash fresh fruits or vegetables. These products are not intended for consumption.

SCRUB THOROUGHLY – Rub firm-skin fruits and vegetables under running tap water or scrub with a clean vegetable brush while rinsing with running tap water.

BAC! Attack

How long should you wash your hands to send bacteria down the drain?

a. 5 seconds b. 10 seconds c. 15 seconds d. 20 seconds

Answer: d – 20 seconds

- If you have questions or concerns about food safety, contact:
- The U.S. Department of Agriculture (USDA) Meat and Poultry Hotline at 1-888-MPHotline (1-888-674-6854). TTY 1-800-256-7072.
- The Fight BAC!® Web site at www.fightbac.org.
- Gateway to Government Food Safety Information at www.foodsafety.gov.

The Partnership for Food Safety Education is a non-profit organization and creator and steward of the FightBAC!® consumer education program. The Partnership is dedicated to providing the public with science-based, actionable recommendations for the prevention of foodborne illness.

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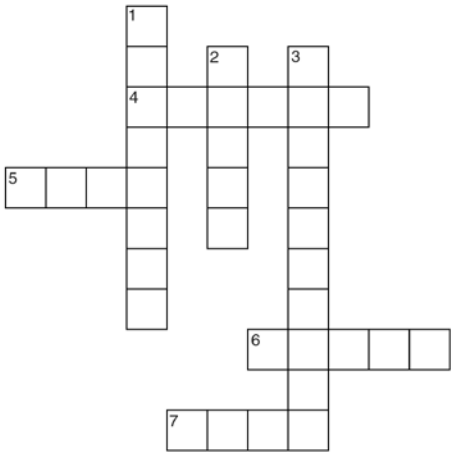

Clean Crossword Puzzle

How much do you know about keeping your scene clean?

DOWN

1. Place your _ _ _ _ _ _ _ _ on the floor, not on the kitchen counter or table.
2. Always use clean knives, spoons, plates, and _ _ _ _ _.
3. Use cold water to wash fruits and _ _ _ _ _ _ _ _ _ _.

ACROSS

4. Place _ _ _ _ _ _ food on a clean plate.
5. Wash your hands with warm water and _ _ _ _.
6. Counters should be _ _ _ _ _ if you put food on them.
7. Wash your hands after playing with _ _ _ _.

DID YOU KNOW?
Less than half of shoppers are diligent about thawing meat in the refrigerator.
– FMI Trends, 2009

BAC Down!
Refrigerate Promptly and Properly

Refrigeration at 40°F or below is one of the most effective ways to reduce risk of foodborne illness. Microorganisms grow more rapidly at warmer temperatures, and research shows that keeping a constant refrigerator temperature of 40°F or below helps slow growth of these harmful microbes.

LISTERIOSIS

The bacterium Listeria monocytogenes can grow at refrigerator temperatures. Listeriosis has the second highest fatality rate among all infections caused by foodborne pathogens.

Reduce your risk of listeriosis and other foodborne illnesses. Keep your fridge at 40°F or below as measured with an appliance thermometer.

The Cool Rules

Use This Tool to Keep It Cool
Use a refrigerator thermometer to be sure the temperature is consistently 40°F or below.

The Chill Factor
Refrigerate or freeze perishables, prepared foods and leftovers within two hours of purchase or use. Always marinate foods in the refrigerator.

The Thaw Law
Never defrost food at room temperature. Thaw food in the refrigerator. If you will cook food immediately, for a quick thaw, defrost in the microwave or enclose the food in an airtight package and submerge it in cold water.

Divide and Conquer
Separate large amounts of leftovers into shallow containers for quicker cooling in the refrigerator.

Avoid the Pack Attack
Do not overstuff the refrigerator. Cold air must circulate to keep food safe.

Rotate Before It's Too Late
Use or discard chilled foods as recommended in the USDA Cold Storage Chart found at www.fightbac.org/coldstorage.

Don't Go Too Low
As you approach 32°F, ice crystals can begin to form and lower the quality of foods such as raw fruits, vegetables and eggs. A refrigerator thermometer will help you determine whether you are too close to this temperature.

Always refrigerate or freeze meat, poultry, eggs, and other perishables as soon as you get them home from the store. Never let raw meat, poultry, eggs, cooked food, or cut fresh fruits and vegetables sit at room temperature more than two hours before putting them in the refrigerator or freezer. Reduce that to one hour when the temperature is above 90° F.

Serve & Preserve

When serving cold food at a buffet, picnic or barbecue, keep these "chilling" tips in mind:

- Cold foods should be kept at 40°F or below.
- Keep all perishable foods chilled right up until serving time.
- Place containers of cold food on ice for serving to make sure they stay cold.
- It's particularly important to keep custards, cream pies and cakes with whipped-cream or cream-cheese frostings refrigerated. Don't serve them if refrigeration is not possible.

The Big Thaw

There are three safe ways to defrost food: in the refrigerator, in cold water, and in the microwave.

DEFROSTING DO'S

- Defrost food in the refrigerator. This is the safest method for all foods.
- Short on time? Thaw meat and poultry in airtight packaging in cold water if it will be used immediately. Change the water every 30 minutes, so the food continues to thaw in cool water.
- Defrost food in the microwave only if you are going to cook it immediately.

DEFROSTING DON'TS

- Never defrost food at room temperature. Food left out at room temperature longer than two hours may enter the Danger Zone—the unsafe temperatures between 40°F and 140°F. Bacteria can multiply rapidly between 40°F and 140°F.
- Don't defrost food in hot water.

BUY SOME PEACE OF MIND: *Refrigerator thermometers are available at grocery, hardware and discount stores.*

Hit the Road Cold!

When traveling with food, be aware that time, temperature and a cold source are key.

- Always use ice or cold packs, and fill your cooler with food. A full cooler will maintain its cold temperatures longer than one that is partially filled.
- If you've asked for a doggie bag to take home leftovers from a restaurant, it should be refrigerated within two hours of serving.

- If you have questions or concerns about food safety, contact:
- The U.S. Department of Agriculture (USDA) Meat and Poultry Hotline at 1-888-MPHotline (1-888-674-6854). TTY 1-800-256-7072.
- The Fight BAC!® Web site at www.fightbac.org.
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DID YOU KNOW?
One out of every four hamburgers turns brown before it has been cooked to a safe internal temperature.
– USDA FSIS

Cook to Safe Temperature

Cooking food safely is a matter of degrees! Foods are properly cooked when they reach a high enough internal temperature to kill the harmful bacteria that cause foodborne illness. How does your safe cooking know-how measure up?

DID YOU KNOW?
Thermy™ says, "It's safe to bite when the temperature is right!"

Cook It Right...

Food is safely cooked when it reaches a high enough internal temperature to kill the harmful bacteria that cause illness as measured with a food thermometer. Refer to the Safe Cooking Temperatures on the next page.

...And Keep It Hot

When serving up hot food buffet-style, remember...
On a buffet table, hot food should be kept at 140°F or higher. Keep food hot with chafing dishes, slow cookers and warming trays.

When bringing hot soup, chili or crab dip to an outdoor party...
Keep it all piping hot before and during serving. Transport hot foods in insulated thermal containers. Keep containers closed until serving time.

OWN IT. USE IT.
69% of Americans surveyed say they own a food thermometer. That is a 21% increase from 1998.
– USDA & FDA survey data 2006

Sizzling Cooking Tips

is it Done Yet?
Use a clean food thermometer to measure the internal temperature of food to make sure meat, poultry, egg dishes, casseroles, and other types of food are cooked all the way through.

Microwave Musts
When cooking in a microwave oven, make sure there are no cold spots in food because bacteria can survive there. For best results, cover food, stir and rotate for even cooking. If there is no turntable, rotate the dish by hand once or twice during cooking. Observe stand times.

Boil and Bubble
Bring sauces, soups and gravies to a boil when reheating.

Food Safety Cooking Temperatures

GROUND MEAT & MEAT MIXTURES	
Beef, Veal, Pork, Lamb	160° F
Turkey, Chicken	165° F
FRESH BEEF, VEAL LAMB & PORK	
Plus 3 Minutes Standing Time For Safety	145° F
POULTRY	
Chicken & Turkey, whole	165° F
Poultry Parts	165° F
Duck & Goose	165° F
Stuffing (cooked alone or in bird)	165° F
HAM	
Fresh (raw) Plus 3 minutes standing time	145° F
Pre-cooked (to reheat)	140° F
EGGS & EGG DISHES	
Eggs	Cook until yolk & white are firm
Egg Dishes	160° F
SEAFOOD	
Fin fish	145° F flesh is opaque
Shrimp, Lobster & Crabs	Flesh pearly & opaque
Clams, Oysters & Mussels	Shells open during cooking
Scallops	Milky white or opaque & firm
LEFTOVERS & CASSEROLES	165° F

AT RiSK PoPuLATionS

Foodborne illness can strike anyone. Some people are at higher risk for developing foodborne illness, including pregnant women, young children, older adults and people with weakened immune systems. For these people extra care should be taken to follow the four simple steps of clean, separate, cook and chill.

- If you have questions or concerns about food safety, contact:
- The U.S. Department of Agriculture (USDA) Meat and Poultry Hotline at 1-888-MPHotline (1-888-674-6854). TTY 1-800-256-7072.
- The Fight BAC!® Web site at www.fightbac.org.
- Gateway to Government Food Safety Information at www.foodsafety.gov.

The Partnership for Food Safety Education is a non-profit organization and creator and steward of the FightBAC!® consumer education program. The Partnership is dedicated to providing the public with science-based, actionable recommendations for the prevention of foodborne illness.

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Keep it Clean!
Watch those Juices!
Remember to spread the word—not the bacteria!

Combat Cross-Contamination

Get it straight—it's safe to separate!

Cross-contamination is how bacteria can be spread. Improper handling of raw meat, poultry and seafood can create an inviting environment for cross-contamination. As a result, harmful bacteria can spread to food and throughout the kitchen.

Separate. . .Don't Cross-Contaminate

KEEP IT CLEAN!

Lather Up
Always wash hands with warm water and soap for at least 20 seconds before and after handling food and after using the bathroom, changing diapers and handling pets. Always start with a clean scene—wash cutting boards, dishes, countertops, and utensils with hot water and soap.

Take Two
Use one cutting board for fresh produce and a separate one for raw meat, poultry and seafood.

Clean Your Plate
Never place cooked food back on a plate that previously held raw meat, poultry, seafood, or eggs.

WATCH THOSE JUICES!

Safely Separate
Separate raw meat, poultry and seafood from other foods in your grocery shopping cart and shopping bags, and in your refrigerator.

Seal It
To prevent juices from raw meat, poultry or seafood from dripping onto other foods in the refrigerator, place these raw foods in sealed containers or plastic bags on the bottom shelf of the fridge.

Marinating Mandate
Sauce that is used to marinate raw meat, poultry or seafood should not be used on cooked food unless it is boiled first.

FIGHT BAC! Keep Food Safe From Bacteria

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