

GUAJOME SCHOOLS COMMUNICABLE DISEASE INFORMATION

PARENTS/GUARDIANS: The following chart is meant to give you guidance as to how to recognize and care for many of the communicable diseases that occur in all schools.

ALL OF THESE DISEASES ARE CONTAGIOUS! Please consult your medical care provider if any of the symptoms listed below appear.

IMPORTANT! If a student requires medication at school, your student's pediatrician must complete an [Authorization for Medication Administration](#). This form and others are available through the Health Office and/or on the Guajome.net website under Health Office.

FOR YOUR STUDENT'S PROTECTION: Please assure up-to-date emergency numbers and emails addresses are on file at school! Emergency contacts may be called when parents are unavailable.

DISEASE	SIGNS & SYMPTOMS	INCUBATION time from when infected until symptoms show	CARE	PREVENTION MEASURES
CHICKEN POX (Varicella)	Irritability, fatigue, fever, red spots, which develop into water blisters, more abundant on covered areas of body	14 - 21 days	Seek medical diagnosis. Remain home until blisters scab over.	Vaccination, good hand washing, sneezing and coughing hygiene.
COVID-19	Fever, chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, and/or diarrhea.	2-14 days	Follow SDCOE Decision Tree Students are expected to test and report positive test result to the school. If COVID positive, student may return on day 6 if feeling well, symptoms are improving and fever-free without fever-reducing medication for 24 hours. If COVID negative, student may return when symptoms have improved and fever-free without fever-reducing medication for 24 hours. If you do not have a doctor call 2-1-1. For severe symptoms, call 911.	Good hand washing, sneezing and coughing hygiene. <i>Do not</i> share eating utensils and/or food.
FIFTH DISEASE (Parvovirus B19)	May begin with fever and mild cold systems followed by bright pink blotchy rash appearing on face ("slapped cheek" look). May progress to lacy rash on trunk and extremities	4 - 21 days	Seek medical diagnosis. Exclude from school with fever. Not thought to be contagious after eruption of rash.	Good hand washing, sneezing and coughing hygiene. <i>Do not</i> share eating utensils and/or food.
HAND, FOOT, MOUTH DISEASE (Coxsackie virus and/or Enterovirus)	Low-grade fever, sore throat, blister-like lesions on tongue and throat, raised rash/lesions on palms of hands and soles of feet	3 - 6 days	Seek medical diagnosis. Remain home while fever and/or vesicular rash persist unless released by physician in writing. May attend if rash is dry	Good hand washing. <i>Do not</i> share eating utensils and/or food.
HEAD LICE (Pediculosis) small parasitic insects	Persistent itching on scalp. Possible "nits" (small grayish eggs adhering to base of hair shaft). Presence of live lice, (they crawl; cannot hop, jump, or fly). If live lice are found, it is likely the infestation began up to 2 weeks prior.	Undetermined, eggs hatch in 1 week, adults reproduce in 2 wks	Upon checking your student's head, if <u>live lice</u> are found, please keep your child at home and discuss with their pediatrician how best to treat the infestation. <u>After treatment</u> , if <u>NO live lice</u> are found, your child may return to class. If nits (eggs) are still present, and your child has been treated, child can return to class, however, continue to monitor daily and remove any and all nits found – it is essential and can take several days.	Good hand washing, especially under the nails. Avoid hair contact, <i>do not</i> share combs, brushes, hats, etc.
HEPATITIS-A Contagious liver infection caused by the Hepatitis A virus	Poor appetite, abdominal pain, nausea, vomiting, fever, jaundice (yellow tinge to the skin and white of eyes), diarrhea, joint pain, fatigue, dark urine or light colored stools	15 - 50 days, average 28 days	Seek medical diagnosis. Rest, adequate nutrition, and fluids. Remain at home until released by physician in writing.	Good hand washing. <i>Do not</i> share eating utensils and/or food or drinks. Hepatitis A Vaccine Immune Globulin Injection.
MEASLES (Rubeola)-viral	High fever, runny nose, sneezing, coughing, watery eyes, inflamed eyes, tiny white spots with bluish-white centers on a red background inside the mouth on the lining of the cheek (Koplik's Spots). Blotchy skin rash (large flat red blotches, appears in 3-5 days.	7 - 21 days	Seek medical diagnosis. Supportive care for symptoms, vitamin A, and fever reducer as directed by physician. Reportable to Public Health.	Vaccine Immune Serum Globulin

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DISEASE	SYMPTOMS	INCUBATION time from when infected until symptoms show	CARE	PREVENTION MEASURES
MENINGITIS (Bacterial)	Sudden onset of fever, intense headaches, stiff neck, mental confusion and possible nausea, vomiting and skin rash	1 - 10 days	Seek medical diagnosis. May return to school when released by physician in writing.	Good hand washing, sneezing and coughing hygiene. <i>Do not</i> share eating utensils and/or food
MENINGITIS (Viral)	Starts as a mild gastrointestinal disturbance or upper respiratory infection, and then proceeds to sudden onset of stiff neck, headache, fever, possible mental confusion and rash.	Dependent on causative virus.	Seek medical diagnosis. May return to school when released by physician in writing.	Good hand washing. <i>Do not</i> share eating utensils and/or food.
MONONUCLEOSIS (Mono), most commonly caused by the Epstein-Barr virus	Extreme fatigue, fever, sore throat, enlarged tender lymph glands in the neck and armpits, headache, body aches, rash and enlarged liver and/or spleen.	3 - 7 weeks	Seek medical diagnosis. Supportive care for symptoms, rest, fluids, over the counter medications as directed by your doctor. Remain at home until released by physician in writing.	Good hand washing. <i>Do not</i> share eating utensils, food, drinks, water bottles, saliva (avoid oral contact) or personal items (toothbrushes).
MUMPS	Fever, swelling/tenderness in front, below the ear, or under the jaw. May be painful to move the jaw.	12 - 25 days	Seek medical diagnosis. Remain at home until released by physician in writing.	Vaccine
PINK EYE (Infectious Conjunctivitis)	Excessive purulent drainage, crusting of eyelids especially upon awakening, redness, light sensitivity, irritation, blurred vision.	24 - 72 hours	Seek medical diagnosis & effective treatment (i.e., Rx eye drops). Student may return to school when released by physician in writing or 24 hours after treatment begins. Exclude if unable to participate, fever, recommended by MD, or if close contact with other students cannot be avoided (e.g. very young children).	Avoid touching/rubbing eyes. Good hand washing. <i>Do not</i> share eye make-up or towels.
PINWORM (Intestinal Worms)	Severe rectal itch. Intestinal worms 1/2 inch long (look like heavy white thread). Easier to find at night.	1 - 2 months	Seek medical care. All members of household require treatment at the same time.	Good hand washing. Good personal hygiene.
RINGWORM (Fungus)	SCALP: Evident patches of hair broken off near scalp (bald spot). BODY: Patch, ring or oval shape, slightly raised, pink/scaly with clear area in center. Usually two or more rings. NAIL: Nail becomes discolored, pitted, grooved and brittle. FEET: (Athletes' Foot)-sogginess between toes, scaling, itching, small blisters. Progress to larger blister, raw place, swelling/redness. Reinfection is common.	1 - 2 weeks	Seek medical care. Breaks in skin may cause serious secondary infection. A dog or cat with ringworm can transmit disease to humans and should be treated by veterinarian. May return to school if patches are covered.	Good hand washing. <i>Do not</i> share clothing. Proper laundering of shared towels and linens.
RUBELLA (German Measles)	Low-grade fever, headache, malaise, anorexia, mild cold symptoms, and swelling of lymph nodes behind ears. Blotchy rash appears in 3 to 5 days.	14 - 21 days	Seek medical diagnosis. Exclude 7 days from onset of rash.	Vaccine
SCABIES (Infection by a mite)	Severe itching (especially at night) prominent on wrists, elbows, webs of fingers, thighs, belt line, buttocks.	4 - 6 weeks	Seek medical care. Student may return to school when released by physician in writing or 24 hours after treatment completed.	Good hand washing. <i>Do not</i> share clothing, bedding.
SKIN INFECTIONS (Staph - i.e. MRSA, Impetigo)	Skin disease characterized by blisters, pustules, or boils that are red, painful, swollen and may be draining. Often found at sites of visible skin trauma and areas of the body covered by hair.	2 - 10 days	Seek medical care immediately. Student may return on doctor's written recommendation following treatment.	Good hand washing. Avoid contact with blisters. Blisters must be covered to attend school. No swimming until fully healed. Gloves to be worn if bandages changed at school.
STREPTOCOCCAL INFECTION (Strep throat or scarlatina)	Vomiting, fever, sore throat, sudden headache. A bright rash MAY appear within 24 hours.	1 - 5 days	Seek medical diagnosis. Student may return on doctor's written recommendation following treatment.	Good hand washing, sneezing and coughing hygiene. <i>Do not</i> share eating utensils and/or food.