## **Disease-Specific Guidelines**

Follow **recommended actions** when a health care provider has diagnosed a communicable disease, **or a person exhibits related symptoms.**NOTE: This document is not a diagnostic tool. Related symptoms may inform exclusion decisions, but school staff do not diagnose.

Restrictable diseases require school exclusion. If the student or staff has any of the following diseases, then clearance by the local public health authority is required before the individual returns to school: chickenpox, diphtheria, Hepatitis A, Hepatitis E, measles, mumps, pertussis (whooping cough), rubella, Salmonella enterica serotype Typhi infection, scabies, Shiga-toxigenic E. coli (STEC) infection (O157 and others), shigellosis, and infectious tuberculosis.

Oregon public health laws regulate which diseases are "restrictable" and/or "reportable." See Appendix III regarding reportable diseases.

DISEASE/SYMPTOMS	SCHOOL EXCLUSION/	TRANSMISSION/	RECOMMENDED SCHOOL
	SCHOOL RESTRICTION and	COMMUNICABILITY	CONTROL MEASURES
	REPORTING TO LOCAL		
	PUBLIC HEALTH AUTHORITY		
ATHLETE'S FOOT	Exclude: NO	Spread by:	Restrict walking barefoot, sharing towels,
<ul> <li>Dry scaling and/or cracking blisters and itching, especially between toes and bottoms of feet.</li> </ul>	Restriction: NO	<ul> <li>Direct contact with infectious areas.</li> <li>Indirect contact with infected articles.</li> </ul>	<ul> <li>socks &amp; shoes.</li> <li>Encourage use of sandals in shower</li> <li>Routine disinfection of showers and locker room floors with approved agents.</li> </ul>
		Communicable:	
		• Until treated.	





DISEASE/SYMPTOMS	SCHOOL EXCLUSION/ SCHOOL RESTRICTION and REPORTING TO LOCAL PUBLIC HEALTH AUTHORITY	TRANSMISSION/ COMMUNICABILITY	RECOMMENDED SCHOOL CONTROL MEASURES
Malaise, slight fever, blister-like rash, or red rash, usually beginning on trunk, blisters scab over	Exclude: Refer to Symptom-Based Exclusion Guidelines (pages 9-11) and see below.  Restriction: YES. Exclude until chickenpox lesions have crusted or dried with no further drainage (minimum of 5 days after rash appears).	<ul> <li>Spread by:</li> <li>Airborne or respiratory droplets from coughing.</li> <li>Direct contact with drainage from blisters or nasal secretions.</li> <li>Indirect contact with infected articles.</li> <li>Communicable:</li> <li>2 days before to 5 days after rash appears.</li> </ul>	<ul> <li>Immunization required – see website for current information: Immunization Requirements for School and Child Care:</li> <li>Getting Immunized</li> <li>Exclude exposed, susceptible persons from school</li> <li>Wash hands thoroughly and often.</li> <li>Cover mouth and nose if coughing or sneezing.</li> <li>Encourage safe disposal of used tissues Contact school nurse regarding possible earlier return to school if lesions are crusted/dried before 5th day after rash appears.</li> <li>Staff and students with impaired immune responses or who are pregnant should consult their health care provider, if exposure to a confirmed or suspected case has occurred.</li> </ul>
COMMON COLD (Upper/Lower Respiratory Infection)  • Runny nose and eyes, cough, sneezing, possible sore throat, fever Uncommon.	Exclude: Refer to Symptom-Based Exclusion Guidelines (pages 9-11).  Restriction: NO	<ul> <li>Spread by:</li> <li>Droplets from coughing or sneezing.</li> <li>Direct contact with nose and throat secretions.</li> <li>Indirect contact with infected articles.</li> </ul> Communicable: Variable and poorly defined.	<ul> <li>Wash hands thoroughly and often.</li> <li>Cover mouth, nose if coughing or sneezing.</li> <li>Encourage appropriate disposal of used tissues.</li> </ul>





DISEASE/SYMPTOMS	SCHOOL EXCLUSION/ SCHOOL RESTRICTION and REPORTING TO LOCAL PUBLIC HEALTH AUTHORITY	TRANSMISSION/ COMMUNICABILITY	RECOMMENDED SCHOOL CONTROL MEASURES
<ul> <li>Mild to severe illness that can include fever or chills, cough, shortness of breath or difficulty breathing, new loss of taste or smell</li> <li>Other symptoms include fatigue, muscle or body aches, headache, sore throat, nasal congestion or running nose, nausea or vomiting, and diarrhea</li> </ul>	Exclude: Refer to Symptom-Based Exclusion Guidelines (page 9-11) and see below.  Restriction: NO		<ul> <li>Maximize implementation of <u>layered</u> mitigation strategies such as vaccination and face coverings.</li> <li>Consider masking for 10 days after symptom onset.</li> <li>Avoid contact with people at high risk of severe illness.</li> <li>Wash hands thoroughly and often.</li> <li>Cover mouth/nose when coughing or sneezing.</li> <li>Encourage appropriate disposal of used tissues.</li> </ul>
<ul> <li>DIARRHEAL DISEASES</li> <li>Loose, frequent stools, sometimes with mucous or blood</li> <li>Vomiting, abdominal pain or fever may be present</li> </ul>	Exclude: Refer to Symptom-Based Exclusion Guidelines (pages 9-11) and see below.  Restriction: Exclude students with acute diarrhea. Diarrhea with diagnosis of E. coli, Salmonella, or Shigella, requires school exclusion until cleared for return per local public health authority.	<ul> <li>Spread by:</li> <li>Direct or indirect contact with feces</li> <li>Consumption of water or food contaminated with feces</li> </ul> Communicable: Variable	<ul> <li>Wash hands thoroughly and often, especially after using bathroom or diapering/toileting children.</li> <li><u>No</u> food handling.</li> <li><u>No</u> cafeteria duty.</li> </ul>





DISEASE/SYMPTOMS	SCHOOL EXCLUSION/ SCHOOL RESTRICTION and REPORTING TO LOCAL PUBLIC HEALTH AUTHORITY	TRANSMISSION/ COMMUNICABILITY	RECOMMENDED SCHOOL CONTROL MEASURES
FIFTH DISEASE     Bright red cheeks, blotchy, lace appearing rash on extremities that fades and recurs, runny nose, loss of appetite, sore throat, low grade fever, headache.	Exclude: Refer to Symptom-Based Exclusion Guidelines (pages 9-11).  Restriction: May attend with licensed health care provider permission or when no rash or signs of illness are present.	<ul> <li>Spread by:</li> <li>Droplets from coughing or sneezing.</li> <li>Communicable:</li> <li>Greatest before onset of rash when illness symptoms occur.</li> <li>No longer contagious after rash appears.</li> </ul>	<ul> <li>Wash hands thoroughly and often</li> <li>Encourage student to cover mouth/nose when coughing/sneezing.</li> <li>Encourage safe disposal of used tissues.</li> <li>Contact school nurse for recommendations for pregnant females / immunocompromised persons exposed by suspected/confirmed case Contact local public health authority for latest recommendation for pregnant females exposed in school outbreak situations.</li> </ul>
HAND, FOOT & MOUTH DISEASE  • Sudden onset fever, sore throat and lesions affecting mouth, hands, feet and genitals.	Exclude: Refer to Symptom-Based Exclusion Guidelines (pages 9-11).  Restriction: May attend with licensed health care provider permission or when blisters have healed.	<ul> <li>Spread by: <ul> <li>Direct contact with lesions or feces.</li> </ul> </li> <li>Communicable: <ul> <li>During acute stage of illness and potentially for several weeks after in stool.</li> </ul> </li> </ul>	Wash hands thoroughly and often     Good personal hygiene especially following bathroom use.     Reinforce use of standard precautions.
<ul> <li>HEAD LICE</li> <li>Itching of scalp.</li> <li>Lice or nits (small grayish brown eggs) in the hair.</li> <li>*See additional ODE guidance document on Head Lice</li> </ul>	Exclude: Refer to CDC guidance on head lice.  Restriction: NO	<ul> <li>Spread by:</li> <li>Direct contact with infected person.</li> <li>Indirect contact with infected articles (rarely).</li> <li>Communicable:</li> <li>Only when live bugs present.</li> </ul>	<ul> <li>Refer to CDC guidance on head lice. Check siblings/close contacts for symptoms.</li> <li>Avoid sharing/touching clothing, head gear, combs/brushes.</li> <li>Contact school nurse or local medical provider for further treatment information.</li> </ul>





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	REPORTING TO LOCAL	0 01/11/101 (101120121111	
	PUBLIC HEALTH AUTHORITY		
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<ul> <li>HEPATITIS A &amp; E</li> <li>Sudden onset with loss of appetite, fever, nausea, right upper abdominal discomfort.</li> <li>Later student may have jaundice (yellow color to skin and eyes), dark urine, or clay-colored stools.</li> </ul>	Exclude: Refer to Symptom-Based Exclusion Guidelines (pages 9-11) and see below.  Restricted: YES. May attend only with local public health authority permission.	<ul> <li>Spread by:         <ul> <li>Direct contact with feces.</li> </ul> </li> <li>Consumption of water or food contaminated with feces.</li> <li>Communicable:         <ul> <li>Two weeks before symptoms until two</li> </ul> </li> </ul>	<ul> <li>Wash hands thoroughly and often.</li> <li>No food handling or sharing.</li> <li>School restrictions on home prepared foods for parties.</li> <li>Immunization required - see website for current information:</li> <li>Immunization Requirements for School and Child Care   Getting Immunized</li> </ul>
May have mild or no symptoms.		weeks after onset.	Exclude exposed, susceptible persons from school.
Fever, headache, fatigue, vomiting, aching, loss of appetite, dark urine, abdominal pain, clay- colored stools and jaundice.	Exclude: Refer to Symptom-Based Exclusion Guidelines (pages 9-11).  Restriction: NO. Restriction may apply to "hepatitis B infection in a child, who, in the opinion of the local health officer, poses an unusually high risk to other children (for example, exhibits uncontrollable biting or spitting)" [OAR 333-019-0010]	<ul> <li>Spread by:         <ul> <li>Infectious body fluids (blood, saliva, semen) getting under the skin (e.g., through needles) or into the eyes; or through sexual contact; or mother to baby transmission.</li> </ul> </li> <li>Communicable:         <ul> <li>One month prior to symptoms to 4 to 6 months or longer after jaundice.</li> <li>Some individuals have no symptoms but can transmit the disease.</li> </ul> </li> </ul>	<ul> <li>Strict adherence to standard precautions when handling body fluids Report all body fluid contact that penetrates the skin such as bites, scratches and needle sticks to the health consultant.</li> <li>Immunization required for Hepatitis B - see website for current information:</li> <li>Immunization Requirements for School and Child Care   Getting Immunized.</li> <li>Refer to Information for Employers         Complying with OSHA's Bloodborne Pathogens Standard or Guidelines for the Management of Occupational Exposures to HBV, HCV, and HIV     </li> </ul>





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HIV Disease (Human Immunodeficiency Virus Disease)  May have acute flu-like illness.  Most often, no symptoms present in controlled infection.  AIDS is a later stage of HIV infection.	Exclude: Refer to Symptom-Based Exclusion Guidelines (pages 9-11).  Restriction: NO	<ul> <li>Spread by:         <ul> <li>Blood getting under the skin (e.g., through needles); or through sexual contact.</li> <li>Some individuals have no symptoms but can spread the disease.</li> </ul> </li> <li>Communicable:         <ul> <li>Lifetime infectivity after initial infection with virus.</li> </ul> </li> </ul>	<ul> <li>Strict adherence to standard precautions when handling body fluids Report all body fluid contact that penetrates the skin such as bites, scratches and needle sticks to the school nurse.</li> <li>Refer to Information for Employers         Complying with OSHA's Bloodborne         Pathogens Standard or Guidelines for the Management of Occupational Exposures to HBV, HCV, and HIV.     </li> </ul>
<ul> <li>IMPETIGO</li> <li>Honey-crusted sores, often around the mouth and nose.</li> </ul>	Exclude: Refer to Symptom-Based Exclusion Guidelines (pages 9-11).  Restriction: May attend with licensed health care provider permission, or when lesions are dry and crusted with no drainage.	<ul> <li>Spread by:</li> <li>Direct contact with drainage from sores.</li> <li>Communicable:</li> <li>As long as sore drains if untreated.</li> </ul>	<ul> <li>Wash hands thoroughly and often.</li> <li>No cafeteria duty while sores present.</li> <li>Avoid scratching or touching sores.</li> <li>Cover sores if draining.</li> <li>No sharing personal items when lesions are present.</li> <li>No contact sports (wrestling) if drainage cannot be contained.</li> </ul>
<ul> <li>INFLUENZA (flu)</li> <li>Mild to severe illness that can include fever or chills, cough, shortness of breath or difficulty breathing</li> <li>Other symptoms include fatigue, muscle or body aches, headache, sore throat, nasal congestion or running nose, nausea or vomiting, and diarrhea</li> </ul>	Exclude: Refer to Symptom-Based Exclusion Guidelines (pages 9-11).  Restriction: NO	<ul> <li>Spread by: <ul> <li>Droplets from coughing or sneezing.</li> </ul> </li> <li>Communicable: <ul> <li>1-2 days before onset of symptoms, up to 5 days or more following the onset of illness.</li> </ul> </li> </ul>	<ul> <li>Vaccination: recommended annually for all persons ≥6 months of age         Wash hands thoroughly and often         Cover mouth/nose when coughing or sneezing.</li> <li>Encourage appropriate disposal of used tissues.</li> <li>See website for up-to-date information:         http://flu.oregon.gov/Pages/Learn.aspx     </li> </ul>





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<ul> <li>MEASLES</li> <li>Fever, eye redness or discharge, runny nose, cough.</li> <li>3–7 days later dusky red rash (starts at hairline and spreads down); Koplik spots in mouth.</li> </ul>	Exclude: Refer to Symptom-Based Exclusion Guidelines (pages 9-11) and see below.  Restriction: YES. May attend with local public health authority permission.	<ul> <li>Spread by:         <ul> <li>Airborne small particles released when breathing, talking, and singing.</li> <li>Droplets from coughing or sneezing.</li> </ul> </li> <li>Communicable:         <ul> <li>4 days before rash until 4 days after rash begins.</li> </ul> </li> </ul>	Contact school nurse or public health authority immediately for direction School nurse or public health authority will identify population at risk and assist with parent notification.  Immunization required – see website for current information: Immunization Requirements for School and Child Care   Getting Immunized  Exclude exposed, susceptible persons from school.
<ul> <li>MENINGOCOCCAL DISEASE</li> <li>Sudden onset of high fever, nausea, vomiting, headache, stiff neck, lethargy.</li> <li>May have blotchy, purplish, non-blanching rash.</li> </ul>	Exclude: Refer to Symptom-Based Exclusion Guidelines (pages 9-11).  Restriction: May attend after treatment and clearance from provider. Patients are not contagious after treatment.	<ul> <li>Spread by:         <ul> <li>Direct contact with nose and throat secretions.</li> <li>Droplets from coughing or sneezing.</li> </ul> </li> <li>Communicable:         <ul> <li>Until bacteria are no longer present in discharges from nose and mouth.</li> </ul> </li> <li>Cases and contacts usually no longer infectious after 24 hours on antibiotics.</li> </ul>	<ul> <li>Wash hands thoroughly and often.</li> <li>Cover mouth/nose when coughing or sneezing and practice safe disposal of used tissues.</li> <li>No sharing food, drink or eating utensils</li> <li>Meningococcal vaccine available and recommended for all children 11 years and older as well as some younger children.</li> <li>See local public health authority CD</li> <li>Specialist for further information.</li> </ul>
MONONUCLEOSIS  • Fever, sore throat, swollen lymph nodes, fatigue and abdominal pain.	Exclude: Refer to Symptom-Based Exclusion Guidelines (pages 9-11).  Restrictions: NO –Withdrawal from PE/Athletic activities may be recommended by licensed health care provider permission.	<ul> <li>Spread by:</li> <li>Direct contact with saliva.</li> <li>Communicable:</li> <li>May be infectious for several months.</li> </ul>	Wash and disinfect shared items.     No sharing food, drink or eating utensils.





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<ul> <li>MUMPS</li> <li>Painful swelling of neck and facial glands, fever and possible abdominal pain.</li> </ul>	Exclude: Refer to Symptom-Based Exclusion Guidelines (pages 9-11) and see below.  Restriction: YES. May attend with local public health authority permission.	<ul> <li>Spread by:</li> <li>Direct contact with nose and throat secretions.</li> <li>Droplets from coughing or sneezing.</li> <li>Communicable:</li> <li>2 days before onset until 5 days after onset of symptoms.</li> </ul>	<ul> <li>Wash hands thoroughly and often</li> <li>Report to school nurse.</li> <li>No sharing of personal items.</li> <li>Immunization required - see website for current information: Immunization         Requirements for School and Child Care   Getting Immunized     </li> <li>Exclude exposed, susceptible persons from school.</li> </ul>
PERTUSSIS (Whooping Cough)  Begins with mild "cold" symptoms and may progress to violent coughing fits that may end in a whooping sound (infants & toddlers) or vomiting (older children & adults).  Slight or no fever.	Exclude: Refer to Symptom-Based Exclusion Guidelines (pages 9-11) and see below.  Restriction: YES. May attend only with local public health authority permission.	<ul> <li>Spread by:</li> <li>Direct contact nose and throat secretions.</li> <li>Droplets from coughing or sneezing.</li> </ul> Communicable: <ul> <li>Greatest just before and during "cold" symptoms to about 3 weeks without treatment.</li> <li>If treated with antibiotics, infected person is communicable 5 days.</li> </ul>	Immunization required - see website for current information:     Immunization Requirements for School and Child Care   Getting Immunized     Exclude exposed, susceptible persons from school may be required; consult with local public health authority.
PINK EYE (Conjunctivitis)  Eyes tearing, irritated and red. Eyes may have yellow discharge.	Exclude: Refer to Symptom-Based Exclusion Guidelines (pages 9-11).  Restriction: May attend with licensed health care provider/school nurse permission or symptoms are gone.	<ul> <li>Spread by:</li> <li>Direct contact with infectious saliva or eye secretions.</li> <li>Indirect contact with infected articles.</li> <li>Communicable:</li> <li>As long as drainage is present.</li> </ul>	<ul> <li>Wash hands thoroughly.</li> <li>No sharing of personal items.</li> <li>Consult with school nurse or licensed medical provider.</li> <li>Eye redness alone, with no colored drainage, may be considered for attendance per CDC guidelines and school nurse assessment.</li> </ul>





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<ul><li>PINWORMS</li><li>Anal itching.</li><li>Sometimes no symptoms are present.</li></ul>	Exclude: NO  Restriction: Restriction may be necessary in situations where students are unable to control bowel function, otherwise No.	<ul> <li>Spread by:         <ul> <li>Direct contact with infectious eggs by hand from anus to mouth of infected person.</li> <li>Indirect contact with infected articles.</li> </ul> </li> <li>Communicable:         <ul> <li>As long as female worms are discharging eggs in the anal area.</li> <li>Eggs remain infective in an outdoor area for about 2 weeks.</li> </ul> </li> </ul>	Wash hands thoroughly.     Good personal hygiene.     Consult with school nurse or licensed medical provider.
<ul> <li>RINGWORM – SCALP</li> <li>Patchy areas of scaling with mild to extensive hair loss.</li> <li>May have round areas of "stubs" of broken hair.</li> </ul>	Exclude: Refer to Symptom-Based Exclusion Guidelines (pages 9-11).  Restriction: May attend with licensed health care provider or school nurse permission or when symptoms are gone.	<ul> <li>Spread by:         <ul> <li>Direct contact with infectious areas.</li> </ul> </li> <li>Indirect contact with infectious areas.</li> <li>Communicable:         <ul> <li>Until treatment initiated</li> </ul> </li> </ul>	Wash hands thoroughly.     No sharing of personal items, especially combs, brushes, hats, etc.     It is not necessary to shave the student's head.
RINGWORM – SKIN  Ring-shaped red sores with blistered or scaly border.  "Itching" may occur.	Exclude: Refer to Symptom-Based Exclusion Guidelines (pages 9-11).  Restriction: May attend with licensed health care provider or school nurse permission or when symptoms are gone.	<ul> <li>Spread by:</li> <li>Direct contact with infectious areas.</li> <li>Indirect contact with infectious areas.</li> <li>Communicable:</li> <li>Until treatment initiated</li> </ul>	Wash hands thoroughly.     No sharing of personal items.     Special attention to cleaning and disinfecting, with approved anti- fungal agent, gym/locker areas No sport activity until lesions disappear.





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<ul> <li>SCABIES</li> <li>Intense itching, raised small red or pus-filled sores.</li> <li>Common between fingers, behind knees, around waist, inside of wrists, on arms.</li> </ul>	Exclude: Refer to Symptom-Based Exclusion Guidelines (pages 9-11) and see below.  Restriction: YES. May attend with licensed health care provider/school nurse permission.	<ul> <li>Spread by:</li> <li>Direct skin contact.</li> <li>Indirect contact with infected articles.</li> </ul> Communicable: <ul> <li>Until treated</li> </ul>	<ul> <li>Wash hands thoroughly.</li> <li>Screen close contacts/siblings for symptoms.</li> <li>Disinfection of shared surfaces.</li> <li>No sharing of personal items.</li> </ul>
<ul> <li>SHINGLES (Herpes Zoster)</li> <li>Painful skin lesions which are a result of the same virus that causes chicken pox.</li> <li>Lesions may appear in crops.</li> <li>May occur in immunecompromised children.</li> <li>Usually on trunk, may be accompanied by pain, itching or burning of affected area.</li> </ul>	Exclude: Refer to Symptom-Based Exclusion Guidelines (pages 9-11).  Restriction: May attend with licensed health care provider permission and if lesions can be covered with dressing or when lesions are scabbed/dried.	Spread by: Direct contact with draining skin areas.  Communicable: As long as lesions are draining.	Keep lesions covered with dressings. If lesions are on area of body where dressing cannot be secured (e.g., face, hand), consult with school nurse if available or local public health authority.      Contact school nurse or local public health authority for recommendations for pregnant females/Immunocompromised person if exposure occurs at school.
• Draining sores, slight fever, aches and headache. Affected area may be red, warm and/or tender.	Exclude: Refer to Symptom-Based Exclusion Guidelines (pages 9-11).  Restriction: May attend with licensed health care provider permission or when lesions are dry/crusted or gone.	<ul> <li>Spread by:</li> <li>Direct contact with drainage from sores</li> <li>Indirect contact with infected articles.</li> </ul> Communicable: <ul> <li>As long as sores are draining.</li> </ul>	<ul> <li>Wash hands thoroughly.</li> <li>Good personal hygiene.</li> <li>No sharing towels, clothing or personal items.</li> <li>No food handling.</li> <li>No contact sports until lesions are gone.</li> </ul>





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<ul> <li>STREP THROAT &amp; SCARLET FEVER</li> <li>Strep throat: Sore throat, fever, swollen, red tonsils, tender neck glands, headache, abdominal pain or nausea.</li> <li>Scarlet Fever: Strep throat with a red, sandpaper rash on trunk.</li> </ul>	Exclude: Refer to Symptom-Based Exclusion Guidelines (pages 9-11).  Restriction: May attend with licensed health care provider/school nurse permission.	<ul> <li>Spread by:</li> <li>Direct contact with nose and throat secretions.</li> <li>Communicable:</li> <li>Greatest during symptoms of illness. Some individuals are carriers without symptoms and may be infectious for weeks or months.</li> <li>Treated cases are no longer infectious after 24 hours on antibiotics unless fever persists.</li> </ul>	<ul> <li>Wash hands thoroughly.</li> <li>Encourage covering mouth &amp; nose when coughing &amp; sneezing.</li> <li>Encourage appropriate disposal of used tissues.</li> </ul>
TUBERCULOSIS (infectious/active)  • Fatigue, weight loss, fever, night sweats, cough, chest pain, hoarseness & coughing up blood in later stages of disease.	Exclude: Refer to Symptom-Based Exclusion Guidelines (pages 9-11) and see below.  Restriction: YES. May attend only with local public health authority permission. Note: tuberculosis can be chronic/latent; is only restrictable in the infectious/active stage.	<ul> <li>Spread by: <ul> <li>Primarily by airborne droplets from infected person through coughing, sneezing or singing.</li> </ul> </li> <li>Communicable: <ul> <li>As long as living bacteria are discharged through coughing. Specific drug therapy usually diminishes communicability within weeks.</li> </ul> </li> </ul>	Observe TB rule compliance:     CDC - Tuberculosis (TB)     Report to school nurse or consult with local public health authority.

## **Section References**

Centers for Disease Control and Prevention. COVID-19. <a href="https://www.cdc.gov/coronavirus/2019-ncov/index.html">https://www.cdc.gov/coronavirus/2019-ncov/index.html</a>. Accessed May 2023.

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