COMMUNICABLE DISEASE SCHOOL MANUAL

The Florida Department of Health in Escambia County
1295 West Fairfield Drive
Pensacola, FL 32501
850-595-6500
www.escambiahealth.com

This manual serves as a tool to encourage common understanding of communicable (infectious) diseases in schools and child care settings. It is designed for use by school health professionals, teachers/caregivers, and parents/guardians. This manual is an easy reference guide that addresses:

How Infections are spread
School Exclusion Criterion
Infection Control Methods
Additional Resources and Handouts

This manual is brought to you by:

The Florida Department of Health in Escambia County
Preparedness Surveillance and Response Program
1300 West Gregory Street
Pensacola, FL 32502
(850)595-6683 Phone
(850)595-6268 Fax
Available online at: www.escambiahealth.com

Unless otherwise specified, the content of this manual was adapted from the Centers for Disease Control and Prevention (CDC) and the American Academy of Pediatrics (AAP).

Table of Contents

1. How Infections are spread.....03

   1.1 Direct Transmission.....03

   1.2 Indirect Transmission.....04

2. Exclusion Criterion.....05

3. School Exclusion Quick Guide.....06

4. Prevention and Control.....09

   4.1 Hand washing.....09

   4.2 Respiratory Etiquette.....11

   4.3 Cleaning, Disinfecting, Sanitizing.....11

5. Disease Fact Sheets.....14

6. Additional Forms/Resources.....42

   6.1 Reportable Diseases/Conditions in Florida.....43

   6.2 What is a Line List 44

   6.3 Line List Templates.....45-46

   6.4 Posters.....47

1.HOW INFECTIONS ARE SPREAD

1.1 Direct Transmission

Person-to-Person

The most common way to spread disease is by spreading bacteria, viruses, or other germs from one person to another. This can occur when an individual with the illness touches, coughs on, or kisses someone who is not sick.

Body Fluids

Contact with blood or other body fluids of another person usually means a more personal exposure than those that can occur in a group setting. Contaminated blood and other body fluids must come into contact with another person via cuts, scrapes, or mucus membranes (i.e., the inside of your nose or mouth); thus allowing germs to enter the body. While possible, infected children are unlikely to spread infection by biting. Because it is impossible to know who has a blood-borne disease, routine use of the standard precautions outlined in this manual in the **Cleaning, Disinfecting, and Sanitizing** section will reduce the chances of spreading germs. Saliva and urine often contain viruses long after a child has recovered from an illness. Good hand washing and standard precautions will help prevent the spread of these viruses.

Animal-to-Person

Though pets may seem harmless, they often carry many germs. Being bitten or scratched by an animal may make you sick if the animal has an infection that can cause disease in humans. Handling animal waste also can be hazardous. For example, a person can acquire Toxoplasmosis infection from handling the contents of a cat's litter box. This disease can be incredibly dangerous, especially for pregnant women. It is important to have pets fully vaccinated and routinely checked by a veterinarian.

1.2 Indirect Transmission

Many germs can linger on an inanimate object, such as a tabletop, doorknob or faucet handle. When you touch the same doorknob that was touched by someone who was ill, you could pick up the germs he or she left behind. If you touch your eyes, mouth, or nose before washing your hands, you may become infected. Some infections occur from germs that naturally live in the environment but are not passed from person-to-person.

Droplet and Airborne

When you cough or sneeze, you expel droplets into the air around you. When you are sick, these droplets may contain the germ that caused your illness. Spread of germs in this manner is called droplet spread or droplet transmission. Droplets travel for only about three feet because they are usually too large to stay suspended in the air for a long time. However, if a droplet from an infected person comes in contact with your eyes, nose, or mouth, you may soon experience symptoms of the illness. The most common way droplets are spread is on hands. This is why it is so important to teach children and adults to wash their hands after they cough or sneeze, or to sneeze into a covered area, like the crook of the arm (not the hands). Crowded, indoor environments may also increase the chances of droplet transmission because people are much more likely to be within three feet of each other. Some disease-causing germs travel through the air in particles considerably smaller than droplets. These tiny particles remain suspended in the air for extended periods of time and can travel in air currents. If you breathe in an airborne germ, you may become infected and show signs and symptoms of the disease. Colds caused by viruses, influenza and tuberculosis are a few types of infectious diseases usually spread through the air, in both particle and droplet forms.

Vectors

Some germs rely on insects (such as mosquitoes, fleas, lice, or ticks) to move from host to host. These insects are known as vectors. Mosquitoes can carry the West Nile virus and deer ticks may carry the bacteria that cause Lyme disease. Vector-borne spread of germs happens when an insect that carries the germ lands on you or bites you. The germs move into your body and can make you sick.

Fecal-Oral/Foodborne

Children who are in diapers constitute a high risk for the spread of gastrointestinal infections. Diseases can be spread by the child themselves or by the person(s) changing the diaper when hands, toys, or areas become contaminated with fecal material that contain germs. The germs can be ingested during playtime, food preparation, or in the case of young children, just by putting their hands or toys into their mouths. Hand washing is the best prevention method to reduce the risk of spreading these types of illnesses. Even if you wear gloves, you should always wash your hands after removal of the gloves.

2. SCHOOL EXCLUSION CRITERION

Children attending school or child care should be free of known infectious diseases. When a child becomes ill but does not require immediate medical help, a determination should be made regarding whether the child should be sent home or remain at school. Most illnesses do not require exclusion, however, if any of the following criteria are met, the child should be excluded regardless of the type of illness.

1. The child has a fever equal or greater than 100.4°F.
2. The child is vomiting repetitively (more than 2 times in 24 hours and is not from a known condition).
3. The child has diarrhea (more than two loose stools above normal for that child).

The following Exclusion Quick Guide outlines the recommendations for specific diseases. If you suspect or know of a child attending **child care /private school** that has one of the conditions listed below with a reportable conditions symbol, please call the Florida Department of Health in Escambia County, Division of Epidemiology, at 850.595.6683 to report. **Public schools** should notify their immediate supervisor, according to agency protocol. For more information about any of these conditions, please visit www.escambiahealth.com or www.cdc.gov.

3. SCHOOL EXCLUSION QUICK GUIDE

Disease	School Exclusion	Child care Exclusion	Return
Bacterial Meningitis	**Yes**	**Yes**	When the child is cleared to return by a health care provider
Camplyobacteriosis	**Yes**	**Yes**	Once stool frequency has reduced to fewer than 2 stools above normal for that child
Chickenpox (Varicella)	**Yes**	**Yes**	When all blisters have scabs (usually 6 days after start of rash)
Cryptosporidiosis	**Yes**	**Yes**	When diarrhea and vomiting have ceased
Diarrhea caused by specific types of *E coli*	**Yes**	**Yes**	Test results from 2 consecutive stool cultures taken 24 hours apart are negative for Shiga toxin-producing E coli. Public Health Professionals will need to review the case and approve child's return
Fifth Disease (Human Parvovirus B19)	**No**	**No**	When any other symptoms are resolved (i.e., fever)
Flu (Influenza)	**Yes**	**Yes**	When any other symptoms are resolved (i.e., fever)

Giardiasis	**Yes**	**Yes**	Once stool frequency has reduced to fewer than 2 stools above normal
Haemophilus influenza Type b (Hib)	**Yes**	**Yes**	After child has been cleared by a health care provider
Hand-Foot-and-Mouth Disease	**No**	**No**	When any other symptoms are resolved (i.e., fever)
Hepatitis A	**Yes**	**Yes**	One week after onset of illness and after all contacts have received vaccine or immune globulin
Impetigo	**Yes**	**Yes**	As long as lesions are covered, the child can return once antibiotic
Lice (Pediculosis)	**Yes**	**Yes**	After the child has received treatment recommended by health care provider and checked by school clinic staff
Measles	**Yes**	**Yes**	Four days after beginning of rash
Molluscum Contagiosum	**No**	**No**	When any other symptoms are resolved (i.e., fever)
Mononucleosis	**No**	**No**	When any other symptoms are resolved (i.e., fever)
Mumps	**Yes**	**Yes**	Five days after onset of swelling

MRSA (Methicillin-resistant Staphylococcus aureus)	**No**	**No**	When any other symptoms are resolved (i.e., fever)
Pinkeye (conjunctivitis)	**No**	**No**	When any other symptoms are resolved (i.e., fever)
RSV Respiratory Syncytial Virus	**No**	**No**	When any other symptoms are resolved (i.e., fever)
Salmonellosis	**Yes**	**Yes**	Health care provider must clear child for readmission for all cases of Salmonella- 3 negative test results from stool cultures needed for Salmonella serotype Typhi
Scabies	**Yes**	**Yes**	After treatment has been complete (usually overnight)
Shigellosis	**Yes**	**Yes**	Health care provider must clear child for readmission- at least one stool culture taken 24 hours after diarrhea has resolved should be negative
Strep Throat	**Yes**	**Yes**	24 hours after antibiotic treatment
Viral Meningitis	**Yes**	**Yes**	When the child is cleared to return by a health care provider

4. PREVENTION AND CONTROL

The close, prolonged contact of children to one another in the school/child care setting may expose them to many different germs. Though it is not possible to completely eliminate every germ from every surface, reducing their numbers can greatly protect one from illness. The two best practices for controlling exposure to germs are: 1) hand washing and 2) cleaning, sanitizing, and disinfecting contaminated objects and surfaces. It should also be noted that proper disposal of contaminated items is essential to keeping children and staff healthy. It is easy to forget how tiny germs are that cause disease and to overlook commonly contaminated items simply because they do not look dirty. Similarly, children who do not show symptoms of illness may not be suspected of carrying or spreading germs, even though they may be just as infectious as those children who have symptoms.

4.1 Hand Washing

Keeping hands clean is one of the best ways to keep from getting sick and spreading illnesses. Practicing good hand hygiene gets rid of bacteria and viruses from contact with other people or surfaces. Schools and child care centers play a key role in supporting hand hygiene. This involves teaching good hand-hygiene practices and providing hand-hygiene information to students and families. In addition to education, providing hand soap and paper towels is also necessary to reduce the spread of infectious diseases in the school environment.Studies have shown that unwashed or improperly washed hands are the primary carriers of infections. Lack of hand washing and poor hand washing techniques contributes to many outbreaks of diarrhea among children and staff in school and child care settings, while adherence to good hand washing techniques consistently demonstrates a reduction in disease transmission. When working with children, teachers/caregivers should not wear elaborate jewelry or long artificial fingernails because these interfere with effective hand washing.

When should you wash your hands?

- ✓ Before, during, and after preparing food
- ✓ Before eating food
- ✓ Before and after caring for someone who is sick
- ✓ Before and after treating a cut or wound

- ✓ After using the toilet
- ✓ After changing diapers or cleaning up a child who has used the toilet
- ✓ After blowing your nose, coughing, or sneezing
- ✓ After touching an animal, animal feed, or animal waste
- ✓ After handling pet food or pet treats
- ✓ After touching garbage

What is the right way to wash your hands?

- **Wet** your hands with clean, running water (warm or cold), turn off the tap, and apply soap.
- **Lather** your hands by rubbing them together with the soap. Be sure to lather the backs of your hands, between your fingers, and under your nails.
- **Scrub** your hands for at least 20 seconds. Need a timer? Hum the "Happy Birthday" song from beginning to end twice.
- Turn on the tap and **rinse** your hands well under clean, running water.
- **Dry** your hands using a clean towel and turn off the tap with a paper towel.

What if I don't have soap and running water?

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

For more information on keeping hands clean, visit CDC's hand washing page at: http://www.cdc.gov/handwashing/.

For educational materials and posters on hand washing, see Additional Forms/Resources on page 42.

4.2 Respiratory Etiquette

Respiratory infections can spread from person to person in respiratory droplets of coughs and sneezes. Droplets from a cough or sneeze of an infected person can be propelled through the air and land on the mouth or nose of people nearby. To prevent the spread of respiratory illnesses, the nose and mouth should be covered with a tissue when coughing or sneezing and the tissue should be thrown in the trash immediately after use. Schools can teach respiratory etiquette to students and staff — including coughing or sneezing into the arm if no tissue is available — and can ensure that tissues are available. For more information on covering your cough, visit CDC's "Cover Your Cough" page at http://www.cdc.gov/flu/protect/covercough.htm.

4.3 Cleaning, Disinfecting, and Sanitizing

Cleaning, disinfecting, and sanitizing are part of a broad approach to preventing infectious diseases in schools. Best practices must be followed routinely whether or not surfaces or items appear to be soiled or children appear to be ill. There are numerous diseases that can be spread by soiled items, blood, and body fluids that may not cause an individual to appear ill. It is also important to treat the cleanup of blood or body fluids seriously, as they have the potential to spread illness.

1. Know the difference between cleaning, disinfecting, and sanitizing

Cleaning removes germs, dirt, and impurities from surfaces or objects. Cleaning works by using soap (or detergent) and water to physically remove germs from surfaces. This process does not necessarily kill germs, but by removing them, it lowers their numbers and the risk of spreading infection.

Disinfecting kills germs on surfaces or objects. Disinfecting works by using chemicals to kill germs on surfaces or objects. This process does not necessarily clean dirty surfaces or remove germs, but by killing germs on a surface after cleaning, it can further lower the risk of spreading infection.

Sanitizing lowers the number of germs on surfaces or objects to a safe level, as judged by public health standards or requirements. This process works by either cleaning or disinfecting surfaces or objects to lower the risk of spreading infection.

2. Clean and disinfect surfaces and objects that are touched often

Follow your school's standard procedures for routine cleaning and disinfecting. Typically, this means daily sanitizing surfaces and objects that are touched often, such as desks, countertops, doorknobs, computer keyboards, hands-on learning items, faucet handles, phones, and toys. Some schools may also require daily disinfecting these items. Standard procedures often call for disinfecting specific areas of the school, like bathrooms.

Immediately clean surfaces and objects that are visibly soiled. If surfaces or objects are soiled with body fluids or blood, use gloves and other standard precautions to avoid coming into contact with the fluid. Remove the spill, and then clean and disinfect the surface.

3. Simply do routine cleaning and disinfecting

It's important to match your cleaning and disinfecting activities to the types of germs you want to remove or kill. Most studies have shown that the flu virus can live and potentially infect a person for only 2 to 8 hours after being deposited on a surface. Therefore, it is not necessary to close schools to clean or disinfect every surface in the building to slow the spread of flu. Also, if students and staff are dismissed because the school cannot function normally (e.g., high absenteeism during a flu outbreak), it is not necessary to do extra cleaning and disinfecting.

Flu viruses are relatively fragile, so standard cleaning and disinfecting practices are sufficient to remove or kill them. Special cleaning and disinfecting processes, including wiping down walls and ceilings, frequently using room air deodorizers, and fumigating, are not necessary or recommended. These processes can irritate eyes, noses, throats, and skin; aggravate asthma; and cause other serious side effects.

4. Clean and disinfect correctly

Always follow label directions on cleaning products and disinfectants. Wash surfaces with a general household cleaner to remove germs. Rinse with water, and follow with an EPA-registered disinfectant to kill germs. Read the label to make sure it states that EPA has approved the product for effectiveness against influenza A virus.

If an EPA-registered disinfectant is not available, use a fresh chlorine bleach solution. To make and use the solution:

- Add 1 tablespoon of bleach to 1 quart (4 cups) of water. For a larger supply of disinfectant, add ¼ cup of bleach to 1 gallon (16 cups) of water.
- Apply the solution to the surface with a cloth.
- Let it stand for 3 to 5 minutes.
- Rinse the surface with clean water.

If a surface is not visibly dirty, you can clean it with an EPA-registered product that both cleans (removes germs) and disinfects (kills germs) instead. Be sure to read the label directions carefully, as there may be a separate procedure for using the product as a cleaner or as a disinfectant. Disinfection usually requires the product to remain on the surface for a certain period of time.

Use disinfecting wipes on electronic items that are touched often, such as phones and computers. Pay close attention to the directions for using disinfecting wipes. It may be necessary to use more than one wipe to keep the surface wet for the stated length of contact time. Make sure that the electronics can withstand the use of liquids for cleaning and disinfecting.

5. Use products safely

Pay close attention to hazard warnings and directions on product labels. Cleaning products and disinfectants often call for the use of gloves or eye protection. For example, gloves should always be worn to protect your hands when working with bleach solutions.

Do not mix cleaners and disinfectants unless the labels indicate it is safe to do so. Combining certain products (such as chlorine bleach and ammonia cleaners) can result in serious injury or death.

Ensure that custodial staff, teachers, and others who use cleaners and disinfectants read and understand all instruction labels and understand safe and appropriate use. This might require that instructional materials and training be provided in other languages.

6. Handle waste properly

Follow your school's standard procedures for handling waste, which may include wearing gloves. Place no-touch waste baskets where they are easy to use. Throw disposable items used to clean surfaces and items in the trash immediately after use. Avoid touching used tissues and other waste when emptying waste baskets. Wash your hands with soap and water after emptying waste baskets and touching used tissues and similar waste.

5. Disease Fact Sheets

Bacterial Meningitis

Camplyobacteriosis

Chickenpox

Cryptosporidiosis

Diarrhea caused by *E coli*

Fifth Disease

Flu (Influenza)

Giardiasis

Haemophilus influenza (Hib)

Hand-Foot-and-Mouth Disease

Hepatitis A

Impetigo

Lice

Measles

Molluscum Contagiosum

Mononucleosis

Mumps

MRSA

Pinkeye (Conjunctivitis)

RSV (Respiratory Syncytial Virus)

Salmonellosis

Scabies

Shigellosis

Strep Throat

Viral Meningitis

BACTERIAL MENINGITIS

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

What are the signs and symptoms?
Meningitis infection may show up in a person by a sudden onset of fever, headache, and stiff neck. It will often have other symptoms, such as nausea, vomiting, increased sensitivity to light (photophobia), and altered mental status (confusion).

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

How long is a person with bacterial meningitis contagious?
The symptoms of bacterial meningitis can appear quickly or over several days. Typically they develop within 3-7 days after exposure.

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

Neisseria meningitidis (meningococcal)
Streptococcus pneumoniae (pneumococcus)
Haemophilus influenzae type b (Hib)

What should I do about it?
Bacterial meningitis can be treated effectively with antibiotics**.** It is important that treatment be started as soon as possible**.** Appropriate antibiotic treatment of the most common types of bacterial meningitis should reduce the risk of dying from meningitis to below 15%, although the risk remains higher among young infants and the elderly. Children should not return to school until cleared by a health care provider. This is a **Reportable Disease**, requiring healthcare providers to report cases to the Florida Department of Health in Escambia County.

For more information, please contact the FDOH Preparedness Surveillance and Response Program at 850-595-6683.

CAMPYLOBACTERIOSIS

What is Campylobacter?
Campylobacter is a bacterium that causes infection in the small intestine. It is one of the most common causes of diarrheal illness (loose, watery stools that occur more frequently than usual) in the United States.

What are the signs and symptoms of Campylobacteriosis?
Symptoms include diarrhea, cramping, abdominal pain, body weakness, fever, nausea, vomiting, and some instances of bloody diarrhea. Some infected persons do not exhibit any symptoms.

How is Campylobacter spread?
Most cases are associated with eating raw or undercooked poultry or from cross-contamination of other foods by these items. Infants may get the infection by contact with poultry packages in shopping carts. Other sources of contamination include raw meats, un-pasteurized or raw milk, untreated water, puppies and kittens, farm animals, or contact with an infected person.

How long is a person with Campylobacteriosis contagious?
The length of time between exposure and development of symptoms is normally 2 to 5 days, but symptoms may take 1 to 10 days to appear. Individuals with Campylobacteriosis are contagious throughout the course of the infection, usually for several days to several weeks.

How can Campylobacteriosis be prevented?
Individuals with diarrhea should wash their hands carefully and frequently with soap and water to reduce the risk of spreading the infection. In addition, there are a number of precautions you can take to avoid contracting the infection.

- ✓ After changing diapers, wash hands carefully with soap and water and dispose of the diaper properly.
- ✓ Avoid consumption of un-pasteurized (raw) milk and untreated water.
- ✓ Always wash your hands with soap and water after having contact with pet feces (stool).
- ✓ Be sure poultry products are cooked thoroughly before serving.
- ✓ Wash hands with soap after handling raw foods of animal origin and before touching anything else, or tending to a baby or child.
- ✓ Use a separate cutting board and utensils for foods of animal origin.
- ✓ All cooking utensils and countertops should be cleaned with soap and hot water after the food is prepared.

What should I do about it?
Individuals who have these symptoms should see their health care provider. This is a **Reportable Disease,** requiring health care providers to report cases to the Florida Department of Health in Escambia County. Symptomatic children and adults should be excluded from school/child care/work and must be symptom free for 24 hours before being returning to school or work.

For more information, please contact the DOH Preparedness Surveillance Response Program at 850-595-6683.

CHICKENPOX

What is Chickenpox?
Chickenpox is a very contagious disease caused by the varicella-zoster virus (VZV). It causes a blister-like rash, itching, tiredness, and fever. Chickenpox can be serious, especially in babies, adults, and people with weakened immune systems. It spreads easily from infected people to others who have never had chickenpox or received the chickenpox vaccine.

What are the signs and symptoms?
The classic symptom of chickenpox is a rash that turns into itchy, fluid-filled blisters that eventually turn into scabs. The rash may first show up on the face, chest, and back then spread to the rest of the body, including inside the mouth, eyelids, or genital area. It usually takes about one week for all the blisters to become scabs. Other typical symptoms that may begin to appear 1-2 days before rash include: high fever, tiredness, loss of appetite, and headache.

How is it spread?
The virus spreads in the air when an infected person coughs or sneezes. It can also be spread by touching or breathing in the virus particles that come from chickenpox blisters. Varicella-zoster virus also causes shingles. A person with shingles can spread the virus to others who have never had chickenpox or received the chickenpox vaccine. In these cases, the exposed person might develop chickenpox.

How long is a person with chickenpox contagious?
A person with chickenpox can spread the disease from 1 to 2 days before they get the rash until all their chickenpox blisters have formed scabs. It takes from 10 to 21 days after exposure to a person with chickenpox or shingles for someone to develop chickenpox. If a person vaccinated for chickenpox gets the disease, they can still spread it to others. For most people, getting chickenpox once provides immunity for life. However, for a few people, they can get chickenpox more than once, although this is not common.

How can chickenpox be prevented?
The best way to prevent chickenpox is to get the chickenpox vaccine. Children, adolescents, and adults should have two doses of chickenpox vaccine. Chickenpox vaccine is very safe and effective at preventing the disease. Most people who get the vaccine will not get chickenpox. If a vaccinated person does get chickenpox, it is usually mild—with fewer blisters and mild or no fever. The chickenpox vaccine prevents almost all cases of severe disease.

What should I do about it?
There are several things that can be done at home to help relieve symptoms of chickenpox and prevent skin infections. Calamine lotion and colloidal oatmeal baths may help relieve some of the itching. For individuals exposed to chickenpox, call a health care provider if the person has never had chickenpox disease (and is not vaccinated with the chickenpox vaccine), has a weakened immune system caused by disease or medication, or women who are pregnant. Individuals with chicken pox should not return to school until all blisters have scabbed over, usually about 6 days after rash onset. This is a **Reportable Disease**, requiring healthcare providers to report cases to the Florida Department of Health in Escambia County.

For more information, please contact the DOH Preparedness Surveillance and Response Program at 850-595-6683.

CRYPTOSPORIDIOSIS

What is Cryptosporidiosis?
Cryptosporidiosis (crypto) is a gastrointestinal illness, caused by the parasite, *Cryptosporidium*. This disease is a common cause of diarrhea in children, especially in childcare settings. The hallmark symptom of crypto is watery diarrhea, which might be accompanied by stomach ache, nausea and vomiting, fever, and a general sick feeling. Crypto outbreaks in childcare settings are most common during late summer/early fall (August/September) but might occur at any time.

What are the signs and symptoms?
The most common symptom of crypto is watery diarrhea. Others symptoms include: stomach cramps or pain, dehydration, nausea, vomiting, fever, and weight loss. Some individuals will experience no symptoms.

How is it spread?
Crypto can be spread by:

- Putting something in your mouth or accidentally swallowing something that has come in contact with the stool of a person or animal infected with crypto.
- Swallowing recreational water contaminated with crypto. Recreational water can be contaminated with sewage or feces from humans or animals.
- Swallowing water or beverages contaminated by stool from infected humans or animals.
- Eating uncooked food contaminated with crypto. All fruits and vegetables you plan to eat raw should be thoroughly washed with uncontaminated water.
- Touching your mouth with contaminated hands. Hands can become contaminated through a variety of activities, such as: toughing surfaces contaminated by stool from an infected person, changing diapers, caring for an infected person, handling an infected animal such as a cow or calf.

How long is a person with cryptosporidiosis contagious?
Symptoms usually last about 1 to 2 weeks (with a range of a few days to 4 or more weeks) in persons with healthy immune systems. Occasionally, people may experience a recurrence of symptoms after a brief period of recovery before the illness ends. Symptoms can come and go for up to 30 days.

How can cryptosporidiosis be prevented?
Good hand hygiene practices can help prevent cryptosporidiosis outbreaks.
Link: http://www.cdc.gov/parasites/crypto/childcare/outbreak.html.

What should I do about it?
Healthy people infected with the parasite usually get better without any treatment but treatment is available by prescription. An unusual feature of cryptosporidiosis is that some people seem to get better only to have the diarrhea come back in a few days. Adults or children with crypto should be excluded from school/child care until the diarrhea has ceased. Children who are infected with cryptosporidium but do not have diarrhea may be allowed to return. This is a **Reportable Disease**, requiring healthcare providers to report cases to the Florida Department of Health in Escambia County.

For more information, please contact the DOH Preparedness Surveillance and Response Program at 850-595-6683.

DIARRHEA CAUSED BY E. COLI

What is diarrhea caused by E. coli?
Escherichia coli (E. coli) bacteria normally live in the intestines of people and animals. Most *E. coli* are harmless and actually are an important part of a healthy human intestinal tract. However, some *E. coli* are pathogenic, meaning they can cause illness, either diarrhea or illness outside of the intestinal tract. The types of *E. coli* that can cause diarrhea can be transmitted through contaminated water or food, or through contact with animals or persons.

What are the signs and symptoms?
The symptoms of diarrheal E. coli infections vary for each person but often include severe stomach cramps, diarrhea (often bloody), and vomiting. If there is fever, it usually is not very high (less than 101˚F). Most people get better within 5–7 days. Some infections are very mild, but others are severe or even life-threatening.

How is it spread?
Infections start when you swallow tiny (usually invisible) amounts of human or animal feces infected with E. coli in your mouth. Some foods are considered to carry such a high risk of infection with *E. coli* O157 that health officials recommend people avoid them completely. These foods include unpasteurized (raw) milk, unpasteurized apple cider, and soft cheeses made from raw milk.

How long is a person with diarrheal E. coli contagious?
Diarrheal illness caused by E. coli typically disappear from the feces by the time the illness is resolved, but may be shed for several weeks, even after symptoms go away. Young children tend to carry the bacteria longer than adults. A few people keep shedding these bacteria for several months. Good hand-washing is always a smart idea to protect yourself, your family, and other persons.

How can diarrheal E. coli be prevented?
There are several important precautions one can take to avoid diarrheal E. coli infections. Wash your hands thoroughly after using the bathroom or changing diapers and before preparing or eating food. Wash your hands after contact with animals or their environments (at farms, petting zoos, fairs, even your own backyard). Cook meats thoroughly. Ground beef and meat that has been needle-tenderized should be cooked to a temperature of at least 160°F. It's best to use a thermometer, as color is not a very reliable indicator of "doneness." Avoid raw milk, unpasteurized dairy products, and unpasteurized juices (like fresh apple cider). Avoid swallowing water when swimming or playing in lakes, ponds, streams, swimming pools, and backyard "kiddie" pools. Prevent cross contamination in food preparation areas by thoroughly washing hands, counters, cutting boards, and utensils after they touch raw meat.

What should I do about it?
Individuals should see their health care provider if they have these symptoms. Children and adults should be cleared by a health care provider before they return to school/child care/work. This is a **Reportable Disease**, requiring healthcare providers to report cases to the Florida Department of Health in Escambia County.

For more information, please contact the DOH Preparedness Surveillance and Response Program at 850-595-6683.

FIFTH DISEASE
(Human Parvovirus B19 Infection)

What is Fifth Disease?
Fifth Disease is a mild rash illness caused by a virus (parvovirus B19) that primarily affects school age children.

What are the signs and symptoms?
The symptoms of Fifth Disease are usually fever, runny nose, headache and very red cheeks that look like they have been slapped. This "slapped cheek" appearance is the most recognizable feature of Fifth Disease. A lacey rash may also appear on the body, arms, and legs. The rash usually resolves in 7 to 10 days, but may re-appear and fade again with changes in temperature, sunlight and emotional stress for up to 6 weeks. Occasionally, the rash may itch.

How is it spread?
It is spread mainly through respiratory secretions (such as saliva or nasal mucus) when an infected person coughs or sneezes. It may be passed from mother to unborn baby. It may also be spread through transfusion of blood and blood products.

How long is a person with Fifth Disease contagious?
The length of time between exposure and development of symptoms varies from 4 to 20 days. It is more contagious in the week before the rash appears and is unlikely contagious after the rash begins.

How can Fifth Disease be prevented?
Since individuals are infectious before the rash appears, the best prevention is to practice good hygiene; wash hands frequently with soap and water and cover nose and mouth when coughing or sneezing. Children should be taught to blow their nose into a tissue, discard the tissue into the trash, and wash hands with soap and water. Children and adults should also avoid sharing drinking cups or utensils.

What should I do about it?
The virus may be severe in persons with sickle cell disease or certain blood disorders, as well as those with compromised immune systems. It is important to practice good hand hygiene and dispose of tissues containing nose and throat secretions. Situations in which **2** or more persons not living in the same household are ill with the same symptoms are considered **Reportable Disease clusters**, requiring that health care providers report them to the Florida Department of Health in Escambia County. Children and adults with Fifth Disease should **NOT** be excluded from schools or childcare centers **UNLESS** other exclusion criterion are present, such as fever equal or greater to 100.4.

For more information, please contact the DOH Preparedness Surveillance and Response Program at 850-595-6683.

GIARDIASIS

What is giardiasis?
Giardia is a microscopic parasite that causes the diarrheal illness known as giardiasis. Giardia is found on surfaces or in soil, food, or water that has been contaminated with feces (stool) from infected humans or animals.

How is it spread?
People become infected with giardia by swallowing giardia cysts (hard shells containing giardia) found in contaminated food or water. Cysts are instantly infectious once they leave the host through feces (stool). An infected person might shed 1-10 billion cysts daily in their feces (stool) and this might last for several months. However, swallowing as few as 10 cysts might cause someone to become ill. Giardia may be passed person-to-person or even animal-to-person.

What are the signs and symptoms?
The signs and symptoms of giardiasis include: diarrhea, gas, greasy stools, stomach or abdominal cramps, upset stomach or nausea/vomiting, and dehydration (loss of fluids). Other, less common symptoms include itchy skin, hives, and swelling of the eye and joints[1]. Sometimes, the symptoms of giardiasis might seem to resolve, only to come back again after several days or weeks. Giardiasis can cause weight loss and failure to absorb fat, lactose, vitamin A and vitamin B12.

How long is a person with giardiasis contagious?
Symptoms of giardiasis normally begin 1 to 3 weeks after becoming infected.

How can giardiasis be prevented?
To prevent and control infection with the giardia parasite, it is important to: practice good hygiene, avoid water (drinking or recreational) that may be contaminated, and avoid food that may be contaminated.

What should I do about it?
Individuals who have these symptoms should see their health care provider. Many prescription drugs are available to treat giardiasis. Although the giardia parasite can infect all people, infants and pregnant women may be more likely to experience dehydration from the diarrhea caused by giardiasis. This is a **Reportable Disease** requiring health care providers to report cases to the Florida Department of Health in Escambia County. Children and adults with this illness should be free of symptoms for a minimum of 24 hours before returning to school/child care/work. Individuals who work in food handling should be cleared by the DOH before returning to their jobs.

For more information, please contact the DOH Epidemiology Program at 850-595-6683.

HAEMOPHILUS INFLUENZAE, TYPE B
(Hib)

What is Haemophilus influenzae, Type B (Hib)?
Haemophilus influenzae bacteria, including Hib, can cause many kinds of infections. These can range from mild ear infections to severe diseases, like bloodstream infections. Haemophilus influenzae bacteria most often cause pneumonia, a lung infection. When the bacteria invade parts of the body that are normally free from germs, like spinal fluid or blood, this is known as "invasive disease." Invasive disease is usually severe and can sometimes result in death.

What are the signs and symptoms?
Haemophilus influenzae disease, including Hib disease, causes different symptoms depending on which part of the body is affected. The most common severe types of Haemophilus influenzae disease are:
Pneumonia (lung infection)
Bacteremia (bloodstream infection)
Meningitis (infection of the covering of the brain and spinal cord)

How is it spread?
Hib is spread person-to-person by direct contact or through respiratory droplets such as coughing and sneezing. Usually the bacteria remain in the nose and throat — causing no harm. Sometimes the bacteria can enter the blood and spread, causing serious infection in the individual. Haemophilus influenzae bacteria are usually spread by people who have the bacteria in their noses and throats but who are not ill (asymptomatic).

How long is a person with Hib contagious?
The time between exposure and the onset of symptoms of the disease is not certain, but could be as short as a few days.

How can Hib be prevented?
There's a vaccine that can prevent Haemophilus influenzae type b (Hib) disease, but not the other types ("strains") of Haemophilus influenzae bacteria. Hib vaccine is recommended for all children younger than 5 years of age in the United States and it is usually given to infants starting at 2 months of age. In certain situations, patients at increased risk for invasive Hib disease who are fully vaccinated need additional doses of Hib vaccine and unimmunized older children, adolescents, and adults with certain specified medical conditions should receive Hib vaccine. There are no vaccines to prevent against the other types of Haemophilus influenzae.

What should I do about it?
Individuals who are experiencing these symptoms should see their health care provider. Individuals should not return to school until cleared by a health care provider. This is a **Reportable Disease**, requiring healthcare providers to report cases to the Florida Department of Health in Escambia County.

For more information, please contact the DOH Preparedness Surveillance and Response Program at 850-595-6683.

HAND-FOOT- AND- MOUTH DISEASE
(COXSACKIEVIRUS)

What is Hand-Foot-and-Mouth Disease?
Hand-Foot-and-Mouth Disease is a common viral illness that usually affects infants and children younger than 5 years old.

What are the signs and symptoms?
Hand-Foot-and-Mouth Disease usually starts with fever, poor appetite, sore throat, and a general feeling of discomfort. Within 1 or 2 days of fever onset, painful sores usually develop in the mouth. They begin as small red spots that blister and often become ulcers. The sores are generally located in the back of the mouth. A skin rash then develops over the next 1-2 days. The rash has flat or raised red spots, sometimes with blisters. The rash is usually on the palms of the hands and soles of the feet; it may also appear on the knees and elbows. Individuals infected with the virus may not develop all symptoms of the disease. In a very small number of cases, the virus may cause more severe illness such as inflammation of the heart or brain.

How is it spread?
It is mainly spread through direct contact with nasal and throat discharge, aerosol droplet spread, and feces.

How long is a person with Hand-Foot-and-Mouth Disease contagious?
The symptoms begin 3-6 days after exposure to the virus. It is infectious until spots and mouth ulcers have disappeared. However, children remain mildly infectious for several weeks as the virus may be shed through the feces.

How can Hand-Foot-and-Mouth Disease be prevented?
- ✓ Washing hands often with soap and water, especially after changing diapers and using the toilet.
- ✓ Disinfecting dirty surfaces and soiled items, including toys. First wash the items with soap and water; then disinfect them with a solution of chlorine bleach (made by mixing 1 tablespoon of bleach and 4 cups of water).
- ✓ Avoiding close contact such as kissing, hugging, or sharing food/drink with ill individuals.

What should I do about it?
Individuals who have these symptoms should see their health care provider. A child may return to school/child care once the fever and mouth ulcers have disappeared. However, good hand hygiene is advisable in order to prevent ongoing transmission of the virus. Individuals with Hand-Foot-and-Mouth Disease should not be excluded from school/child care, unless other exclusion criteria are present, such as fever equal or greater than 100.4. Situations in which **2** or more persons not living in the same household are ill with the same symptoms are considered **Reportable Disease clusters**, requiring that health care providers report them to the Florida Department of Health in Escambia County.

For more information, please contact the DOH Preparedness Surveillance and Response Program at 850-595-6683.

HEPATITIS A

What is Hepatitis A?
Hepatitis A is a liver infection caused by the Hepatitis A virus (HAV). Hepatitis A is highly contagious. It is usually transmitted by the fecal-oral route, either through person-to-person contact or consumption of contaminated food or water. Hepatitis A is a viral infection that does not result in chronic infection. More than 80% of adults with Hepatitis A have symptoms but the majorities of children do not have symptoms or have an unrecognized infection.

What are the signs and symptoms?
Some people get Hepatitis A and have no symptoms of the disease. Adults are more likely to have symptoms than children. If you do have symptoms, they may include the following: fever, fatigue, loss of appetite, nausea, vomiting, abdominal pain, dark urine, clay-colored bowel movements, joint pain, and jaundice.

How is it spread?
Hepatitis A is usually spread when the Hepatitis A virus is taken in by mouth from contact with objects, food, or drinks contaminated by the feces (or stool) of an infected person. A person can get Hepatitis A through: person to person contact and contaminated food and/or water.

How long is a person with Hepatitis A contagious?
A person can transmit the virus to others up to 2 weeks before symptoms appear. If symptoms do occur, they usually appear anywhere from 2 to 6 weeks after exposure. Symptoms usually develop over a period of several days.

How can Hepatitis A be prevented?
Yes. The best way to prevent Hepatitis A is through vaccination with the Hepatitis A vaccine. Vaccination is recommended for all children, for travelers to certain countries, and for people at high risk for infection with the virus. Frequent hand washing with soap and warm water after using the bathroom, changing a diaper, or before preparing food can help prevent the spread of Hepatitis A.

What should I do about it?
There are no special treatments for Hepatitis A. Most people with Hepatitis A will feel sick for a few months before they begin to feel better. A few people will need to be hospitalized. During this time, doctors usually recommend rest, adequate nutrition, and fluids. Individuals with Hepatitis A should check with a health care provider before taking any prescription pills, supplements, or over-the-counter medications, which can potentially damage the liver. Alcohol should be avoided. Adults and children infected with hepatitis A may return to work or school when they no longer have symptoms. This is a **Reportable Disease**, requiring healthcare providers to report cases to the Florida Department of Health in Escambia County.

For more information, please contact the DOH Preparedness Surveillance and Response Program at 850-595-6683.

HEAD LICE

(Pediculosis)

What are head lice?
Head lice are parasitic insects that can be found on the head, eyebrows, and eyelashes of people. Head lice survive by feeding on human blood.

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

How is it spread?
Lice are spread most commonly by close person-to-person contact. Dogs, cats, and other pets do not play a role in the transmission of human lice. Lice move by crawling; they cannot hop or fly. They may also be spread by indirect contact, by sharing personal belongings, headgear, combs and clothing. Personal hygiene or cleanliness in the home or at school is not associated with developing head lice.

How long is a person with head lice contagious?
The eggs or nits of lice hatch in 8 to 9 days and mature 9 to 12 days. To survive, adult head lice must feed on blood. An adult head louse can live about 30 days on a person's head but will die within 1 or 2 days if it falls off a person. Lice can be transferred to another person as long as lice or eggs remain alive on the infested person or in clothing.

Can head lice be prevented?
The most important tips in preventing lice include:

- ✓ Avoid physical contact with infected individuals and their belongings, especially clothing and bedding.
- ✓ Launder clothing and bedding in hot water (over 129 °F) or dry clean to destroy lice and nits.
- ✓ Dry clothes in hot clothes dryer.
- ✓ Clothing and items that are not washable can be dry-cleaned OR sealed in a plastic bag and stored for 2 weeks.
- ✓ Regularly inspect all children for head lice.
- ✓ Vacuum floors and furniture, particularly where the infested person sat or lay.

What should I do about it?
Several medicated shampoos are available for treatment and should be used as directed. Follow the shampoo instructions and comb the hair thoroughly using a specially designed comb for nits. Re-treatment is recommended after 7-9 days ONLY if crawling bugs are found.

For more information, please contact the DOH Preparedness Surveillance and Response Program at 850-595-6683.

INFLUENZA
(Flu)

What is Influenza?
The flu is a contagious respiratory illness caused by influenza viruses that infect the nose, throat, and lungs. It can cause mild to severe illness, and at times can lead to death. The best way to prevent the flu is by getting a flu vaccine each year.

How is it spread?
People with flu can spread it to others up to about 6 feet away. Most experts think that flu viruses are spread mainly by droplets made when people with flu cough, sneeze or talk. These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs. Less often, a person might also get flu by touching a surface or object that has flu virus on it and then touching their own mouth or nose.

What are the signs and symptoms?
The symptoms of influenza include: fever or feeling feverish/chills, cough, sore throat, runny or stuffy nose, muscle or body aches, headaches, and fatigue (tiredness). Some people may have vomiting and diarrhea, though this is more common in children than adults. It is important to note that not everyone flu will have a fever.

How long is a person with influenza contagious?
Most healthy adults may be able to infect other people beginning 1 day **before** symptoms develop and up to 5 to 7 days **after** becoming sick. Children may pass the virus for longer than 7 days. Symptoms start 1 to 4 days after the virus enters the body. **That means that you may be able to pass on the flu to someone else before you know you are sick, as well as while you are sick.**

How can influenza be prevented?
The single best way to prevent the flu is to get a flu vaccine each season. Everyone 6 months of age and older should get a flu vaccine every season. Yearly flu vaccination should begin soon after flu vaccine is available, and ideally by October. However, getting vaccinated even later can be protective, as long as flu viruses are circulating. While seasonal influenza outbreaks can happen as early as October, most of the time influenza activity peaks in January or later. Since it takes about two weeks after vaccination for antibodies to develop in the body that protect against influenza virus infection, it is best that people get vaccinated so they are protected before influenza begins spreading in their community.

What should I do about it?
Individuals with these symptoms should see their health care provider. It is important to practice good hand hygiene and dispose of tissues containing nose and throat secretions. Situations in which **2** or more persons not living in the same household are ill with the same symptoms are considered **Reportable Disease clusters**, requiring that health care providers report them to the Florida Department of Health in Escambia County. Adults and children with influenza should not be excluded from school/child care, unless other exclusion criterion is present, such as fever equal or greater to 100.4.

For more information, please contact the DOH Epidemiology Program at 850-595-6683.

IMPETIGO

What is Impetigo?
Impetigo is a highly contagious skin infection that mainly affects infants and children. Impetigo usually appears as red sores on the face, especially around a child's nose and mouth. The sores burst and develop light-colored crusts. Impetigo is caused by streptococcus (strep) or staphylococcus (staph) bacteria.

What are the signs and symptoms?
Classic signs and symptoms of impetigo involve red sores that quickly rupture, ooze for a few days and then form a yellowish-brown crust. The sores usually occur around the nose and mouth but can be spread to other areas of the body by fingers, clothing and towels.

How is it spread?
Impetigo is extremely contagious. It can be spread from one person to another through direct contact or shared items such as clothes and towels. However, a person can also spread it to another part of their own body through scratching or picking at the blisters and scabs. Impetigo is spread most often in schools and child care settings, among children ages 2 to 6. Impetigo infections are more common in summer months.

How long is a person with Impetigo contagious?
The period of time between exposure to the disease and development of symptoms varies depending on the particular type of bacteria. It is usually 1–3 days for streptococcal and 4–10 days for staphylococcal infections. Without antibiotics, impetigo is contagious as long as sores persist.

How can Impetigo be prevented?
Good hygiene can help prevent impetigo. It is important to wash hands, bath or shower regularly, and to clean and cover any injuries to the skin.

What should I do about it?
If you are experiencing any of the above symptoms, it is important to see your health care provider for treatment. If you have impetigo, always use a clean washcloth and towel each time you bathe or shower. Do not share towels, clothing, razors, and other personal care products with other family members. Avoid touching blisters that are oozing. Wash your hands thoroughly after touching infected skin. Children may return to school or child care a minimum of 24 hours after antibiotic treatment has begun. Situations in which **2** or more associated persons not living in the same household are ill with the same symptoms are considered **Reportable Disease clusters**, requiring that health care providers report them to the Florida Department of Health in Escambia County.

For more information, please contact the DOH Preparedness Surveillance and Response Program at 850-595-6683.

MEASLES
(Rubeola)

What is Measles?
Measles virus is a highly contagious virus and spreads through the air through coughing and sneezing. Make sure you and your child are protected with (MMR) measles, mumps, and rubella vaccine.

What are the signs and symptoms?
The symptoms of measles generally appear about seven to 14 days after a person is infected. Measles typically begins with high fever, cough, runny nose (coryza), and red, watery eyes (conjunctivitis). Two or three days after symptoms begin, tiny white spots (Koplik spots) may appear inside the mouth. Three to five days after symptoms begin, a rash breaks out. It usually begins as flat red spots that appear on the face at the hairline and spread downward to the neck, trunk, arms, legs, and feet. When the rash appears, a person's fever may spike to more than 104°. After a few days, the fever subsides and the rash fades.

How is it spread?
Measles is a highly contagious virus that lives in the nose and throat mucus of an infected person. It can spread to others through coughing and sneezing. Also, measles virus can live for up to two hours in an airspace where the infected person coughed or sneezed. If other people breathe the contaminated air or touch the infected surface, then touch their eyes, noses, or mouths, they can become infected

How long is a person with Measles contagious?
The symptoms of measles generally appear about seven to 14 days after a person is infected. Infected people are usually contagious from 4 days before until 4 days after rash onset. Measles is so contagious that if one person has it, 90% of the people close to that person who are not immune will also become infected.

How can Measles be prevented?
Measles can be prevented with the MMR (measles, mumps, and rubella) vaccine. One dose of MMR vaccine is about 93% effective at preventing measles if exposed to the virus, and two doses are about 97% effective. In the United States, widespread use of measles vaccine has led to a greater than 99% reduction in measles cases compared with the pre-vaccine era. CDC recommends all children get two doses of MMR vaccine, starting with the first dose at 12 through 15 months of age, and the second dose at 4 through 6 years of age. Children can receive the second dose earlier as long as it is at least 28 days after the first dose.

What should I do about it?
Measles can be serious. Some people think of measles as a minor rash and fever that clears up in a few days, but measles can cause serious health complications especially in children younger than 5 years of age. There is no way to tell in advance the severity of the symptoms your child will experience. Individuals with measles will be allowed to return to school four days after beginning of rash. This is a **Reportable Disease**, requiring health care providers to report cases to the Florida Department of Health in Escambia County.

For more information, please contact the DOH Preparedness Surveillance and Response Program at 850-595-6683.

MOLLUSCUM CONTAGIOSUM

What is Molluscum contagiosum?
Molluscum contagiosum is a viral infection that causes a mild skin rash. The rash looks like one or more small growths or wart-like bumps (called mollusca) that are usually pink, white, or skin-colored. The bumps are usually soft and smooth and may have an indented center. Although not limited to children, it is most common in children 1 to 10 years of age.

What are the signs and symptoms?
The lesions, known as Mollusca, are small, raised, and usually white, pink, or flesh-colored with a dimple or pit in the center. They often have a pearly appearance. They are usually smooth and firm. In most people, the lesions range from about the size of a pinhead to as large as a pencil eraser (2 to 5 millimeters in diameter). They may become itchy, sore, red, and/or swollen. Mollusca may occur anywhere on the body including the face, neck, arms, legs, abdomen, and genital area, alone or in groups. The lesions are rarely found on the palms of the hands or the soles of the feet.

How is it spread?
The virus that causes molluscum spreads easily, and most commonly, through direct skin-to-skin contact, but individuals can also get it by touching objects that have the virus on them, such as toys, clothing, towels, and bedding. A person with molluscum can spread it to other parts of their body by touching or scratching a lesion and then touching their body somewhere else.

How long is a person with Molluscum contagiosum contagious?
It is unknown how long the virus and the rash are contagious, however it is estimated to be anywhere from 2 weeks to 6 months.

How can Molluscum contagiosum be prevented?
There are ways to prevent the spread of molluscum contagiosum. The best way is to follow good hygiene habits. Keeping your hands clean is the best way to avoid molluscum infection, as well as many other infections. It is important not to touch, pick, or scratch skin that has lesions, that includes not only your own skin but anyone else's. Picking and scratching can spread the virus to other parts of the body and makes it easier to spread the disease to other people too.

What should I do about it?
It is important to keep the area with molluscum lesions clean and covered with clothing or a bandage so that others do not touch the lesions and become infected. Do remember to keep the affected skin clean and dry. Individuals with molluscum should not take part in contact sports like wrestling, basketball, and football unless all lesions can be covered by clothing or bandages. Individuals with molloscum should not be excluded from school unless other exclusion criteria are present, such as fever equal to or greater than 100.4. Situations in which **2** or more associated persons not living in the same household are ill with the same symptoms are considered **Reportable Disease clusters**, requiring that health care providers report them to the Florida Department of Health in Escambia County.

For more information, please contact the DOH Preparedness Surveillance and Response Program at 850-595-6683.

MONONUCLEOSIS (MONO)
Epstein - Barr virus

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

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

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

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

How can mononucleosis be prevented?
There is no vaccine to protect against mononucleosis. You can help protect yourself by not kissing or sharing drinks, food, or personal items, like toothbrushes, with people who have mononucleosis.

What should I do about it?
Individuals with these symptoms should see their health care provider. You can help relieve symptoms of mononucleosis by drinking fluids to stay hydrated, getting plenty of rest, and taking over-the-counter medications for pain and fever. If you have mononucleosis, you should not take ampicillin or amoxicillin. Based on the severity of the symptoms, a health care provider may recommend treatment of specific organ systems affected by mononucleosis. Because your spleen may become enlarged as a result of infectious mononucleosis, you should avoid contact sports until you fully recover. Individuals with mono should not be excluded from school unless other exclusion criteria are present, such as fever. Situations in which **2** or more associated persons not living in the same household are ill with the same symptoms are considered **Reportable Disease clusters**, requiring that health care providers report them to the Florida Department of Health in Escambia County.

For more information, please contact the DOH Preparedness Surveillance and Response Program at 850-595-6683.

MUMPS

What is Mumps?
Mumps is a contagious disease caused by a virus. It typically starts with a few days of fever, headache, muscle aches, tiredness, and loss of appetite, followed by swollen salivary glands. You can protect yourself and your family against mumps with the MMR vaccination.

What are the signs and symptoms?
Mumps is best known for the puffy cheeks and swollen jaw that it causes. This is a result of swollen salivary glands. The most common symptoms include: fever, headache, muscle aches, tiredness, loss of appetite, and swollen and tender salivary glands under the ears on one or both sides.

How is it spread?
Mumps is spread through saliva or mucus from the mouth, nose, or throat. An infected person can spread the virus by coughing, sneezing, or talking, by sharing items, such as cups or utensils, and touching objects or surfaces with unwashed hands that are then touched by others.

How long is a person with Mumps contagious?
The period of time from infection with the disease to onset of symptoms is 16-18 days. The contagious period for mumps is from 1 to 2 days before to 5 days after swelling of glands.

How can Mumps be prevented?
Mumps can be prevented with the MMR (measles-mumps-rubella) vaccine. MMR vaccine prevents most, but not all, cases of mumps and complications caused by the disease. Two doses of the vaccine are approximately 88% effective at preventing mumps; one dose is approximately 78% effective.

What should I do about it?
Let your health care provider know right away if you think you or someone in your family may have mumps. When an individual is ill with mumps, he or she should avoid contact with others from the time of diagnosis until at least 5 days after the onset of swelling by staying home from work or school and staying in a separate room if possible. This is a **Reportable Disease**, requiring healthcare providers to report cases to the Florida Department of Health in Escambia County.

For more information, please contact the DOH Preparedness Surveillance and Response Program at 850-595-6683.

MRSA
(Methicillin-resistant Staphylococcus aureus)

What is MRSA?
MRSA is methicillin-resistant Staphylococcus aureus, a type of staph bacteria that is resistant to several antibiotics. In the general community, MRSA can cause skin and other infections.

What are the signs and symptoms?
Most staph skin infections, including MRSA, appear as a bump or infected area on the skin that might be: red, swollen, painful, and warm to the touch, full of pus or other drainage, accompanied by a fever.

How is it spread?
Anyone can get MRSA through direct contact with an infected wound or by sharing personal items, such as towels or razors that have touched infected skin. MRSA infection risk can be increased when a person is in certain activities or places that involve crowding, skin-to-skin contact, and shared equipment or supplies. This might include athletes, school, and child care students.

How long is a person with MRSA contagious?
The time period from exposure to MRSA and development of symptoms is unknown, however, MRSA commonly causes infections through a break in the skin, such as those caused by scratches or bug bites.

How can MRSA be prevented?
Do not share personal items. Personal items include towels, washcloths, razors, clothing, and uniforms. Wash used sheets, towels, and clothes with water and laundry detergent. Use a dryer to dry them completely.
Wash clothes according to manufacturer's instructions on the label.
It is important to use good hand hygiene at all times, avoid sharing personal items, such as towels, and to cover opening or draining sores or boils.

What should I do about it?
If you have MRSA, it is important to cover your wounds. Keep wounds covered with clean, dry bandages until healed. Follow your health care provider's instructions about proper care of the wound. You, your family, and others in close contact should wash their hands often with soap and water or use an alcohol-based hand rub, especially after changing the bandage or touching the infected wound. Once an individual has sought medical treatment for MRSA and the wound is covered with a clean bandage, they may be allowed to return to school. Situations in which **2** or more persons not living in the same household are ill with the same symptoms are considered **Reportable Disease clusters**, requiring that health care providers report them to the Florida Department of Health in Escambia County.

For more information, please contact the DOH Preparedness Surveillance and Response Program at 850-595-6683.

NOROVIRUS

What is Norovirus?
Norovirus is a very contagious virus. You can get norovirus from an infected person, contaminated food or water, or by touching contaminated surfaces. The virus causes your stomach or intestines (or both) to become inflamed (acute gastroenteritis). Norovirus is the most common cause of community outbreaks of gastroenteritis in the United States.

What are the signs and symptoms?
The symptoms are nausea, vomiting, diarrhea, low-grade fever, chills, headache, muscle aches and a general sense of fatigue. If you have norovirus illness, you can feel extremely ill and throw up or have diarrhea many times a day. This can lead to dehydration, especially in young children, older adults, and people with other illnesses.

How is it spread?
Individuals can become infected by eating food or drinking liquids that are contaminated; touching contaminated surfaces and then placing their hand in their mouth; or having direct contact with another person who is infected and showing symptoms. Schools and child care centers should exclude or isolate sick children or adults because this virus spreads rapidly throughout such environments.

How long is a person with norovirus contagious?
You are most contagious when you are sick with norovirus and during the first few days after you recover from norovirus illness. A person usually develops symptoms 12 to 48 hours after being exposed to the virus. Most people with norovirus get better within 1 to 3 days. However, the illness can stay in your stool for 2 weeks or more after you feel better. So, it is important to continue washing your hands often during this time.

How can Norovirus infections be prevented?
The best prevention is to wash hands carefully with soap and water—

- ✓ especially after using the toilet and changing diapers
- ✓ always before eating, preparing, or handling food

What should I do about it?
There is no specific medicine to treat people with norovirus illness. Norovirus infection cannot be treated with antibiotics because it is a viral (not a bacterial) infection. If you have norovirus illness, you should drink plenty of liquids to replace fluid lost from throwing up and diarrhea. This will help prevent dehydration. Dehydration can lead to serious problems. If you think you or someone you are caring for is severely dehydrated, please see your health care provider. Situations in which **2** or more persons not living in the same household are ill with the same symptoms are considered **Reportable Disease clusters**, requiring that health care providers report them to the Florida Department of Health in Escambia County. Children and adults with Norovirus should be free of symptoms for a minimum of 24 hours before returning to school/child care/work.

For more information, please contact the DOH Preparedness Surveillance and Response Program at 850-595-6683.

PERTUSSIS
(WHOOPING COUGH)

What is Pertussis?
Pertussis is a respiratory infection commonly known as whooping cough. It is a very contagious infection caused by a type of bacteria called *Bordetella pertussis*.

What are the signs and symptoms?
Pertussis can cause serious illness, especially in infants. Early symptoms can last 1 to 2 weeks and usually include: runny nose, low-grade fever, and mild occasional cough. Fever is absent or minimal. As the disease progresses, the traditional symptoms of pertussis may appear and include fits of many rapid coughs followed by a high-pitched "whoop", vomiting, and exhaustion. Unlike the common cold, pertussis can cause coughing fits for 10 weeks or even longer. In infants, the cough can be minimal or not even there. Infants may have pauses in their breathing and get blue lips or fingers. Such infants should be evaluated by a healthcare provider immediately.

How is it spread?
Pertussis is an infection only found in humans and is spread from person to person. Individuals with pertussis usually spread the disease by coughing or sneezing while in close contact with others, who then breathe in the pertussis bacteria. Many infants who get pertussis are infected by older siblings, parents, grandparents, or caregivers who might not even know they have the infection.

How long is a person with pertussis contagious?
Symptoms of pertussis usually develop within 7–10 days after being exposed, but sometimes not for as long as 6 weeks. Without antibiotic treatment, you could pass the infection to someone else for up to 3 weeks. With antibiotics, you are only contagious for the first 5 days of treatment. Antibiotics are recommended to shorten the length of the illness and limit the spread of the infection.

How can pertussis be prevented?
The best way to prevent pertussis among infants, children, teens, and adults is to get vaccinated. Keep infants and other people at high risk for complications away from infected individuals. In infants younger than one year of age who get pertussis, more than half require hospitalization. If you are often around children under one year of age you should get your vaccination to prevent getting sick with pertussis and possibly spreading it to the infant.

What should I do about it?
Persons who have symptoms of the infection should avoid close contact with others, especially infants, and see their health care provider for treatment. Remember to cover your cough with a tissue or the crook of your elbow, and wash your hands often. Stay home when you are ill. Adults or children with pertussis should be excluded from school/child care/work for the first 5 days of antibiotics. This is a **Reportable Disease**, requiring healthcare providers to report cases to the Florida Department of Health in Escambia County.

For more information, please contact the DOH Preparedness Surveillance and Response Program at 850-595-6683.

PINK EYE
(CONJUCTIVITIS)

What is Pink eye?
Pink eye, also known as conjunctivitis, is one of the most common and treatable eye conditions in children and adults. It is an inflammation of the conjunctiva, the thin, clear tissue that lines the inside of the eyelid and the white part of the eyeball. This inflammation makes blood vessels more visible and gives the eye a pink or reddish color.

What are the signs and symptoms?
There are four main causes of pink eye: viruses, bacteria, allergens, and irritants (like smog or swimming pool chlorine) that infect or irate the eye and eyelid lining. The symptoms of pinkeye may vary depending on the cause but usually include: redness or swelling of the white of the eye or inside the eyelids, increased amount of tears, white, yellow or green eye discharge, itchy, irritated, and/or burning eyes, increased sensitivity to light, gritty feeling in the eye, and crusting of the eyelids or lashes.

How is it spread?
Pink eye caused by a virus or bacteria is very contagious and spreads easily and quickly from person to person by direct contact. Pink eye that is caused by allergens or irritants is not contagious, but it is possible to develop a secondary infection caused by a virus or bacteria that is contagious.

How long is a person with pink eye contagious?
Depending on the type of pink eye, the contagious period varies. For bacterial conjunctivitis, the contagious period ends when the course of medication is started or when symptoms are no longer present. For viral conjunctivitis, the contagious period continues while signs and symptoms are present.

How can pink eye be prevented?
It is important to practice careful hand hygiene before and after touching the eyes, nose, and mouth. Avoid sharing eye and face makeup, makeup brushes, contact lenses and containers, and eyeglasses. Careful sanitation of objects that are commonly touched by hands or faces, such as tables, doorknobs, telephones, cots, blankets, and toys is also recommended in preventing the spread of pink eye.

What should I do about it?
Most cases of pink eye are mild and get better on their own, even without treatment. However, you should see a healthcare provider if you have pink eye **AND** any of the following symptoms: moderate to severe pain in your eye, sensitivity to light or blurred vision, intense redness in the eyes, a weakened immune system, or symptoms that get worse or don't improve, including bacterial pink eye that does not improve after 24 hours of antibiotic use. Individuals with pinkeye should not return to school until they have seen their health care provider and treatment has begun. Situations in which **2** or more persons not living in the same household are ill with the same symptoms are considered **Reportable Disease clusters**, requiring that health care providers report them to the Florida Department of Health in Escambia County

For more information, please contact the DOH Preparedness Surveillance and Response Program at 850-595-6683.

RESPIRATORY SYNCYTIAL VIRUS
(RSV)

What is RSV?
RSV is a respiratory virus that infects the lungs and breathing passages. Healthy people usually experience mild, cold-like symptoms and recover in a week or two. But RSV can be serious, especially for infants and older adults. In fact, RSV is the most common cause of pneumonia and bronchiolitis in children younger than 1 year of age in the United States. Almost all children are infected at least once with RSV by 2 years of age.

What are the signs and symptoms?
Symptoms may include fever, chills, headache, general aching, fatigue, and a decrease in appetite. There is generally a lot of mucous drainage from the nose and throat. In infants, the signs may be minimal and often include decreased activity, irritability, poor feeding, and apnea (temporary stopping of breathing). In some individuals, the cough may last a long time, sometimes lasting for a month or more. The infection can be very dangerous in newborns and infants who were born prematurely.

How is it spread?
RSV can be spread when an infected person coughs or sneezes into the air, creating virus-containing droplets that can linger briefly in the air. Other people can become infected if the droplet particles contact their nose, mouth, or eye. Infection can also result from direct and indirect contact with nasal or oral secretions from infected people. Direct contact with the virus can occur, for example, by kissing the face of a child with RSV. Indirect contact can occur if the virus gets on an environmental surface, such as a doorknob, that is then touched by other people. RSV can survive on hard surfaces such as tables and crib rails for many hours.

How long is a person with RSV contagious?
Infants and children infected with RSV usually show symptoms within 4 to 6 days of infection. Individuals infected with RSV are usually contagious for 3 to 8 days. Most will recover in 1 to 2 weeks. However, even after recovery, very young infants and children with weakened immune systems can continue to spread the virus for 1 to 3 weeks. Infants and children are often exposed to and infected with RSV outside the home, such as in school or childcare. They can then transmit the virus to other members of the family.

How can RSV be prevented?
There are several steps you can take to prevent RSV. Individuals should cover coughs and sneezes, practice good hand hygiene, avoid sharing cups and eating utensils, and refrain from kissing others. In addition, cleaning contaminated surfaces (such as doorknobs) may help stop the spread of RSV.

What should I do about it?
Individuals who are experiencing these symptoms should see their health care provider. Adults and children with known RSV infection may return to school/child care/work once symptoms have resolved and no other exclusion criterion is present. Situations in which **2** or more persons not living in the same household are ill with the same symptoms are considered **Reportable Disease clusters**, requiring that health care providers report them to the Florida Department of Health in Escambia County.

For more information, please contact the DOH Preparedness Surveillance and Response Program at 850-595-6683.

SALMONELLOSIS

What is Salmonellosis?
Salmonellosis is an infection with bacteria called salmonella. Most people infected with salmonella develop diarrhea, fever, and abdominal cramps between 6 and 72 hours after infection. It is typically diagnosed by testing the feces (stool) of an infected person.

What are the signs and symptoms?
Symptoms include headache, abdominal pain, diarrhea, nausea, sometimes vomiting, and fever. Dehydration (loss of bodily fluids), especially in infants and the elderly, may be severe.

How is it spread?
Salmonella live in the intestinal tracts of humans and animals. You can get salmonella infection from a variety of sources, including: eating contaminated food or drinking contaminated water, and touching infected animals and not washing your hands afterwards.

How long is a person with Salmonellosis contagious?
After infection with the salmonella bacteria, it usually takes 6 to 72 hours for symptoms to begin. Symptoms typically will last 4 to 7 days, and the infected person is most contagious while having symptoms. Even after symptoms are no longer present, salmonella bacteria may be found in the stool for several weeks.

How can Salmonellosis be prevented?
There is no vaccine to prevent salmonella. Good hand hygiene is important in preventing the spread of the bacteria. Individuals should take care not to eat raw or undercooked eggs, poultry, or meat. People who have salmonellosis should not prepare food or pour water for others until their diarrhea has resolved. Also, adults and children should remember to wash hands thoroughly after contact with animals and animal feces.

What should I do about it?
Salmonella infections usually resolve, or get better, in 5-7 days. Most do not require treatment other than oral fluids. Individuals with severe diarrhea may require rehydration with intravenous fluids. Individuals who have more severe symptoms should see their health care provider. This is a **Reportable Disease** requiring health care providers to report cases to the Florida Department of Health in Escambia County. Children and adults with this illness should be free of symptoms for a minimum of 24 hours before returning to school/child care/work. Ill individuals that work in food-handling or child care situations may not return to work until cleared by the DOH.

For more information, please contact the DOH Preparedness Surveillance and Response Program at 850-595-6683.

SCABIES

What is Scabies?
Scabies is an infestation of the skin by the human itch mite. The microscopic scabies mite burrows into the upper layer of the skin where it lives and lays its eggs. The most common symptoms of scabies are intense itching and a pimple-like skin rash.

What are the signs and symptoms?
The most common symptoms of scabies, itching and a skin rash are caused by sensitization (a type of "allergic" reaction) to the parasite. Severe itching, especially at night, is the earliest and most common symptom of scabies. Itching and rash may affect much of the body or be limited to common sites such as: the wrist, elbow, armpit, webbing between the fingers, nipple, genitals, waist, and buttocks. The rash also can include tiny blisters and scales. Scratching the rash can cause skin sores; sometimes these sores become infected by bacteria.

How is it spread?
Scabies usually is spread by direct, prolonged, skin-to-skin contact with a person who has scabies. Contact generally must be prolonged; a quick handshake or hug usually will not spread scabies. Scabies is spread easily to household members and sexual partners. Sometimes scabies is spread indirectly by sharing articles such as clothing, towels, or bedding used by an infected person.

How long is a person with scabies contagious?
If a person has never had scabies before, symptoms may take as long as 4-6 weeks to begin. It is important to remember that an infected person can spread scabies during this time, even if he or she does not have symptoms yet. In a person who has had scabies before, symptoms usually appear much sooner (1-4 days) after exposure. Scabies mites can live on a human for as long as 1-2 months.

How can scabies be prevented?
Scabies is prevented by avoiding direct skin-to-skin contact with an infected person or with items such as clothing or bedding used by an infected person. Scabies treatment usually is recommended for members of the same household, particularly for those who have had prolonged skin-to-skin contact. All household members and other potentially exposed persons should be treated at the same time as the infested person to prevent possible infestation.

What should I do about it?
Individuals with the above symptoms should see their health care provider. The products used to treat scabies are available by prescription only. Retreatment may be necessary if itching continues more than 2-4 weeks after treatment or if new burrows or rash continue to appear. Items such as bedding, clothing, and towels used by a person with scabies can be decontaminated by machine-washing in hot water and drying using the hot cycle or by dry-cleaning. In the environment, scabies mites usually do not survive more than 48-72 hours. Children and adults may return to school/child care/work the after treatment is completed (usually overnight). Situations in which **2** or more persons not living in the same household are ill with the same symptoms are considered **Reportable Disease clusters**, requiring that health care providers report them to the Florida Department of Health in Escambia County.

For more information, please contact the DOH Preparedness Surveillance and Response Program at 850-595-6683.

SHIGELLOSIS

What is Shigellosis?
Shigellosis is an infection of the intestines caused by the Shigella bacteria.

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

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

How long is a person with Shigellosis contagious?
The incubation period is usually 1 to 3 days but may range from 12 to 96 hours. The ill person is infectious during the time he/she has symptoms and until the *Shigella* bacteria is no longer present in the feces (stool), usually about four weeks.

How can Shigellosis be prevented?
The best prevention is to wash your hands well with soap and water especially:
After: Toilet visits
Cleaning up vomit or diarrhea
Handling diapers
Handling soiled clothes or linens
Contact with a symptomatic person
Before: Eating
It is recommended to use spray bottles to apply disinfectant (1 part bleach to 9 parts of cool water to be prepared daily) on contaminated surfaces such as toilets, sinks, floors, tables, water fountains or any areas where a sick individual has been.

What should I do about it?
Individuals who have these symptoms should see their health care provider. This is a **Reportable Disease** requiring health care providers to report cases to the Florida Department of Health in Escambia County. Children and adults with this illness should be free of symptoms for a minimum of 24 hours before returning to school/child care/work. Individuals who work in food handling should be cleared by the DOH before returning to their jobs.

For more information, please contact the DOH Epidemiology Program at 850-595-6683.

STREP THROAT

What is strep throat?
Strep throat is an infection in the throat and tonsils caused by group A Streptococcus bacteria (called "group A strep"). Group A strep bacteria can also live in a person's nose and throat without causing illness.

What are the signs and symptoms?
The most common symptoms of strep throat include: sore throat, usually starts quickly and can cause severe pain when swallowing, a fever (101°F or above), red and swollen tonsils, sometimes with white patches or streaks of pus, tiny red spots on the roof of the mouth (the soft or hard palate), headache, nausea, or vomiting, swollen lymph nodes in the neck, body aches or rash.

How is it spread?
The bacteria are spread through contact with droplets after an infected person coughs or sneezes. If you touch your mouth, nose, or eyes after touching something that has these droplets on it, you may become ill. If you drink from the same glass or eat from the same plate as the sick person, you could also become ill. It is also possible to get strep throat from contact with sores from group A strep skin infections.

How long is a person with contagious?
The time from exposure to onset of symptoms is 2 to 5 days. The risk of spreading strep throat is reduced when sick individuals are treated with antibiotics. Children do not usually pass the bacteria to others once they have been on an antibiotic for 24 hours.

How can strep throat be prevented?
It is important to use good hand hygiene to prevent strep throat. It is also recommended that health care providers evaluate individuals with a severe sore throat with a rash or severe sore throat that last for more than 24 hours.

What should I do about it?
Strep throat is a common type of sore throat in children, but it's not very common in adults. Health care providers are able to perform a quick test to determine if a sore throat is strep throat and decide if antibiotics are needed. Proper treatment can help you feel better faster and prevent spreading it to others. Children with strep throat should not return to school or child care until 24 hours of antibiotic treatment has been completed. Situations in which **2** or more persons not living in the same household are ill with the same symptoms are considered **Reportable Disease clusters**, requiring that health care providers report them to the Florida Department of Health in Escambia County.

For more information, please contact the DOH Preparedness Surveillance and Response Program at 850-595-6683.

VIRAL MENINGITIS

What is viral meningitis?
Meningitis is an inflammation of the tissue that covers the brain and spinal cord. Viral meningitis is the most common type of meningitis. It is often less severe than bacterial meningitis, and most people usually get better on their own (without treatment). However, infants younger than 1 month old and people with weakened immune systems are more likely to have severe illness.

What are the signs and symptoms?
Common symptoms include: fever, headache, stiff neck, and sensitivity to bright light, sleepiness or trouble waking up, nausea, vomiting, lack of appetite, lethargy (lack of energy).

How is it spread?
If you have close contact with a person who has viral meningitis, you may become infected with the virus that made that person sick. However, you are not likely to develop meningitis as a complication of the illness. Viruses that can cause meningitis spread in different ways. Learn more about how the following viruses spread by visiting the CDC's website at: http://www.cdc.gov/meningitis/viral.html.

How long is a person with viral meningitis contagious?
Some of the viruses that cause viral meningitis are contagious, while others, such as those carried by mosquitoes, cannot be spread from person to person. Fortunately, most people exposed to these viruses experience mild or no symptoms. Most people are exposed to these viruses at some time in their lives, but few actually develop meningitis.

How can viral meningitis be prevented?
You can take the following steps to help lower your chances of getting infected with non-polio enteroviruses or spreading them to other people:
-Wash your hands often with soap and water, especially after changing diapers, using the toilet, or coughing or blowing your nose.
-Avoid touching your face with unwashed hands.
-Avoid close contact such as kissing, hugging, or sharing cups or eating utensils with people who are sick.
-Cover your coughs and sneezes with a tissue or your upper shirt sleeve, not your hands.
-Clean and disinfect frequently touched surfaces, such as toys and doorknobs, especially if someone is sick.

What should I do about it?
In most cases, there is no specific treatment for viral meningitis. Most people who get viral meningitis completely recover on their own within 7 to 10 days. Antibiotics will not work against viruses. Health care providers often recommend bed rest, plenty of fluids and medicine to relieve fever and headache. Children should not be excluded from school or child care with viral meningitis unless other exclusion criterion are present. Situations in which **2** or more persons not living in the same household are ill with the same symptoms are considered **Reportable Disease clusters**, requiring that health care providers report them to the Florida Department of Health in Escambia County.

For more information, please contact the DOH Preparedness Surveillance and Response Program at 850-595-6683.

6. ADDITIONAL FORMS/RESOURCES

Reportable Diseases/Conditions in Florida

What is a Line List?

School Line List Template

Child Care Line List Template

Hand Hygiene Poster

Germs Poster

Influenza Poster

Measles Poster

MRSA Poster

Enterovirus D68 Poster

Reportable Diseases/Conditions in Florida

Practitioner List (Laboratory Requirements Differ)

Effective June 4, 2014

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

During Business Hours (Monday-Friday 8am-5pm)

Escambia (850) 595-6683 Secure Fax (850) 595-6268

Santa Rosa (850) 983-5200 Secure Fax (850) 983-4504

After Hours (850) 418-5566

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

- ! Outbreaks of any disease, any case, cluster of cases, or exposure to an infectious or non-infectious disease, condition, or agent found in the general community or any defined setting (e.g., hospital, school, other institution) not listed that is of urgent public health significance
- + Acquired immune deficiency syndrome (AIDS)
- ☎ Amebic encephalitis
- ! Anthrax
- • Arsenic poisoning
- • Arboviral diseases not otherwise listed
- ! Botulism, foodborne, wound, and unspecified
- • Botulism, infant
- ! Brucellosis
- • California serogroup virus disease
- • Campylobacteriosis
- + Cancer, excluding non-melanoma skin cancer and including benign and borderline intracranial and CNS tumors
- • Carbon monoxide poisoning
- • Chancroid
- • Chikungunya fever
- ☎ Chikungunya fever, locally acquired
- • Chlamydia
- ! Cholera (*Vibrio cholerae* type O1)
- • Ciguatera fish poisoning
- + Congenital anomalies
- • Conjunctivitis in neonates <14 days old
- • Creutzfeldt-Jakob disease (CJD)
- • Cryptosporidiosis
- • Cyclosporiasis
- • Dengue fever
- ☎ Dengue fever, locally acquired
- ! Diphtheria
- • Eastern equine encephalitis
- • Ehrlichiosis/anaplasmosis
- • *Escherichia coli* infection, Shiga toxin-producing
- • Giardiasis, acute
- ! Glanders
- • Gonorrhea
- • Granuloma inguinale
- ! *Haemophilus influenzae* invasive disease in children <5 years old
- • Hansen's disease (leprosy)
- ☎ Hantavirus infection
- ☎ Hemolytic uremic syndrome (HUS)
- ☎ Hepatitis A
- • Hepatitis B, C, D, E, and G
- • Hepatitis B surface antigen in pregnant women or children <2 years old
- ☎ Herpes B virus, possible exposure
- • Herpes simplex virus (HSV) in infants <60 days old with disseminated infection and liver involvement; encephalitis; and infections limited to skin, eyes, and mouth; anogenital HSV in children <12 years old
- + Human immunodeficiency virus (HIV) infection
- • HIV, exposed infants <18 months old born to an HIV-infected woman
- • Human papillomavirus (HPV), associated laryngeal papillomas or recurrent respiratory papillomatosis in children <6 years old; anogenital papillomas in children <12 years old
- ! Influenza A, novel or pandemic strains
- ☎ Influenza-associated pediatric mortality in children <18 years old
- • Lead poisoning
- • Legionellosis
- • Leptospirosis
- ☎ Listeriosis
- • Lyme disease
- • Lymphogranuloma venereum (LGV)
- • Malaria
- ! Measles (rubeola)
- ! Melioidosis
- • Meningitis, bacterial or mycotic
- ! Meningococcal disease
- • Mercury poisoning
- • Mumps
- + Neonatal abstinence syndrome (NAS)
- ☎ Neurotoxic shellfish poisoning
- ☎ Pertussis
- • Pesticide-related illness and injury, acute
- ! Plague
- ! Poliomyelitis
- • Psittacosis (ornithosis)
- • Q Fever
- ☎ Rabies, animal or human
- ! Rabies, possible exposure
- ! Ricin toxin poisoning
- • Rocky Mountain spotted fever and other spotted fever rickettsioses
- ! Rubella
- • St. Louis encephalitis
- • Salmonellosis
- • Saxitoxin poisoning (paralytic shellfish poisoning)
- ! Severe acute respiratory disease syndrome associated with coronavirus infection
- • Shigellosis
- ! Smallpox
- ☎ Staphylococcal enterotoxin B poisoning
- ☎ *Staphylococcus aureus* infection, intermediate or full resistance to vancomycin (VISA, VRSA)
- • *Streptococcus pneumoniae* invasive disease in children <6 years old
- • Syphilis
- ☎ Syphilis in pregnant women and neonates
- • Tetanus
- • Trichinellosis (trichinosis)
- • Tuberculosis (TB)
- ! Tularemia
- ☎ Typhoid fever (*Salmonella* serotype Typhi)
- ! Typhus fever, epidemic
- ! Vaccinia disease
- • Varicella (chickenpox)
- ! Venezuelan equine encephalitis
- • Vibriosis (infections of *Vibrio* species and closely related organisms, excluding *Vibrio cholerae* type O1)
- ! Viral hemorrhagic fevers
- • West Nile virus disease
- ! Yellow fever

*Section 381.0031 (2), *Florida Statutes* (*F.S.*), provides that "Any practitioner licensed in this state to practice medicine, osteopathic medicine, chiropractic medicine, naturopathy, or veterinary medicine; any hospital licensed under part I of chapter 395; or any laboratory licensed under chapter 483 that diagnoses or suspects the existence of a disease of public health significance shall immediately report the fact to the Department of Health." Florida's county health departments serve as the Department's representative in this reporting requirement. Furthermore, Section 381.0031 (4), *F.S.* provides that "The department shall periodically issue a list of infectious or noninfectious diseases determined by it to be a threat to public health and therefore of significance to public health and shall furnish a copy of the list to the practitioners…"

What is a Line List?

A line list is a table that summarizes information about persons who may be associated with an outbreak. Each row represents a single individual, and each column represents a specific characteristic about that person. Column information includes identifying, demographic, clinical, and other epidemiologic information, including risk factors possibly related to the illness.

The data obtained during a case finding can provide clues about the outbreak and potential risk factors associated with illness. The Epidemiology Program uses this information to create both the case definition and the line list.

Line List Example:

Dengue Fever Line Listing

Name	Date of Birth	Onset Date	Rash	Fever? If yes, temp	Other symptoms	Lab results
Elizabeth Hatch	21 Jun, 1970	July 6	Yes	Yes – 101°	Vomiting, muscle aches	Yes
Mary Ridgeway	12 Dec, 1971	July 6	No	Yes - 102°	Headache, muscle ache	Yes
Stephen Mara	3 Jul, 2004	July 7	Yes	No	Headache, vomiting	No
Rajneesh Ram	23 Sep, 2000	July 2	Yes	No	Vomiting	Yes
Lauran Korovavala	4 Apr, 1995	July 10	No	Yes – 102.5°	Headache	No

The line list shows that several ill individuals experienced similar symptoms around the same date in early July. Based on this limited information, it is highly possible that these individuals became ill after a common exposure to infected mosquitoes during this timeframe.

For more information, please contact the DOH Preparedness Surveillance and Response Program at 850-595-6683.

School Line List 2015/2016

Florida Department of Health in Escambia County
Preparedness Surveillance and Response Program
Phone 850-595-6683
Fax 850-595-6268

Symptoms

A-Abdominal Cramps
B-Body Ache
C-Cough
Co-Congestion
D-Diarrhea
F-Fever>100.4
H-Headache
N-Nausea
R-Rash
RR-Runny Nose
S-Sore Throat
V-Vomiting

Date: _____
School Name: _____
Nurse/HST: _____
Phone Number: _____

Last Name, First Name	D.O.B.	Grade/ Class	Teacher	Onset Date	Symptoms (List all that Apply)

Additional Comments:

Child Care Line List 2015/2016

Florida Department of Health in Escambia County
Preparedness Surveillance and Response Program
Phone 850-595-6683
Fax 850-595-6268

Symptoms

A-Abdominal Cramps
B-Body Ache
C-Cough
Co-Congestion
D-Diarrhea
F-Fever>100.4
H-Headache
N-Nausea
R-Rash
RR-Runny Nose
S-Sore Throat
V-Vomiting

Date: _____
Facility Name: _____
Director: _____
Phone Number: _____

Last Name, First Name	D.O.B.	Grade/ Class	Teacher	Onset Date	Symptoms (List all that Apply)

Additional Comments:

KEEP CALM AND WASH YOUR HANDS

U.S. Department of
Health and Human Services
Centers for Disease
Control and Prevention

CS243041B

1,000,000,000,000
germs can live in one gram of poop

(That's the weight of a paper clip!)

WASH YOUR HANDS
after using the toilet

U.S. Department of Health and Human Services
Centers for Disease Control and Prevention

CS243017

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.

U.S. Department of Health and Human Services
Centers for Disease Control and Prevention

For more information, visit **http://www.flu.gov**

CS253727C

Help him fight measles with
the most powerful defense.

Vaccines. Defend him against 14 serious childhood diseases, like measles and whooping cough, with the safe, proven protection of vaccines. Giving him the recommended immunizations by age two is the best way to protect him. For more reasons to vaccinate, talk to your child's doctor or go to **http://www.cdc.gov/vaccines** or call **1-800-CDC-INFO**.

Immunization. Power to Protect.

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™

MRSA FACT SHEET FOR EARLY CHILDHOOD CARE AND EDUCATION PROFESSIONALS

MRSA in Early Childhood Care and Education Settings

The Centers for Disease Control and Prevention (CDC) wants to help early childhood educators prevent the spread of MRSA in early childhood care and education settings.

If you suspect or learn that a child in your facility has an MRSA skin infection:

- Ask the parents to contact the child's doctor.
- Frequently inspect bandages covering the wound, and change them before drainage is visible through the bandage. Wash your hands thoroughly and apply clean gloves before removing the bandage. Dispose of the used bandage in a closed waste receptacle. After applying a clean bandage, remove and dispose of the gloves, and again wash your hands thoroughly.
- Wash the infected child's clothes, linens, and towels daily and never share them with other children.
- Make sure that everyone in the facility practices good hand washing techniques and follows recommended procedures for cleaning and disinfecting toys.
- Ensure all staff and children clean hands well before eating and after using the bathroom.
- Distribute MRSA education materials to parents (see www.cdc.gov/mrsa). Note: This may be done prior to a reported infection so parents know how to prevent and recognize MRSA infections early.

Can a child or staff member pass on an infection to others?

Yes. MRSA skin infections are transmitted primarily by skin-to-skin contact and by contact with surfaces that have come into contact with someone else's infection.

Should a child with an MRSA skin infection be excluded from early childhood care and education settings?

Generally speaking, unless directed by a physician or a public health official, a child with an MRSA skin infection should not be excluded from early childhood care and education settings if the infected skin can be kept covered with a clean, dry bandage (preventing the infected skin from coming in to contact with other children, the environment or the child's hands).

Exclusion from early childhood care and education settings should be reserved for those with wound drainage ("pus") that cannot be covered and contained by using the bandage technique mentioned above.

Should early childhood care and education facilities close if a child has an MRSA skin infection?

The decision to close an early childhood care and education facility for any communicable disease should be made by the facility's officials in consultation with local and/or state public health officials. However, in most cases, it is not necessary to close a facility because a student has an MRSA skin infection.

Should early childhood care and education facilities be closed to be cleaned or disinfected when an MRSA skin infection occurs?

In general, it is not necessary to close early childhood care and education facilities to disinfect them when MRSA skin infections occur. When MRSA skin infections occur, more focused cleaning and disinfection efforts, in addition to normal cleaning routines, should be performed on surfaces that are likely to contact uncovered or poorly covered infections.

How can MRSA skin infections be prevented?

Make sure that everyone in the early childhood and education setting practices good hand washing technique and follows recommended procedures for cleaning and disinfecting toys.

Materials for early childhood care and education professionals, as well as for parents, are available free of charge by calling 1-800-CDC-INFO or by visiting www.cdc.gov/MRSA.

Developed with support from the CDC Foundation through an educational grant from Pfizer Inc.

DEPARTMENT OF HEALTH & HUMAN SERVICES · USA

CDC SAFER · HEALTHIER · PEOPLE™

Keep Your Child from Getting and Spreading ENTEROVIRUS D68

Avoid close contact with **sick people**

Cover your coughs & sneezes

Wash your hands often with **soap & water**

Clean & disinfect surfaces

Avoid touching your face with unwashed hands

Stay home when you're **sick**

www.cdc.gov/non-polio-enterovirus/EV68/