

General Guidelines for Foodborne Illness in Food Handlers (Work Exclusion List)



The U.S. Food and Drug Administration defines 'Food employee' as an individual working with unpackaged food, food equipment or utensils, or food contact surfaces. This chart provides information about some communicable diseases that may occur in food handlers. It is meant as a guide to answer questions frequently asked of persons responsible for handling food as part of their job duties. This is not an all–inclusive list of significant diseases or a comprehensive guide to all information about each disease or condition. More specific information about these and other diseases may be obtained by contacting your local health department or the New Jersey Department of Health, Communicable Disease Service.

INFECTION OR CONDITION	COMMON SYMPTOMS	ADDITIONAL INFORMATION	EXCLUSION	REPORTABLE TO HEALTH DEPARTMENT
Campylobacter (Campylobacteriosis)	Diarrhea (may be bloody), abdominal pain, fever, nausea, sometimes vomiting. Symptoms can last several days to more than a week.	Campylobacteriosis is communicable via the fecal-oral route for as long as infected persons excrete the organism in their feces. This can occur from days to several weeks.	Exclude from food handling duties until 24 hours after symptoms resolve. In outbreak situations, special precautions such as submission of additional stool specimens prior to allowing cases to return to food handling duties may be warranted.	Yes, individual cases and outbreaks.
Salmonella Typhi (Typhoid fever)	Fever, anorexia, lethargy, malaise, headache.	The disease is communicable for as long as the infected persons excrete S. typhi in the feces or urine. This usually begins about a week after onset of illness and continues through convalescence and for a variable period thereafter. Approximately 5% of cases become chronic carriers.	Exclude from food handling duties until symptom free and three consecutive negative stool tests taken at least 48 hours apart and at least 48 hours after the cessation of antibiotic treatment are obtained. All food handling employees, symptomatic or asymptomatic, who are contacts of a patient with Typhoid Fever shall be considered the same as a case and handled in the same fashion.	Yes, individual cases and outbreaks.
Shiga Toxin–Producing Escherichia Coli (STEC) (including E. Coli O157:H7)	Nausea, vomiting, diarrhea (may be bloody), abdominal cramps.	STEC infection is communicable via the fecal-oral route for as long as infected persons excrete bacteria in their stool. Fecal shedding can last 3-4 weeks. Low infectious dose for <i>E. coli</i> O157:H7.	Exclude from food handling duties until symptom free and two negative stool tests taken at least 24 hours apart and at least 48 hours after the cessation of antibiotic treatment are obtained. All symptomatic food handling contacts of a case shall be considered the same as a case and handled in the same fashion.	Yes, individual cases and outbreaks.

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Hepatitis A	Fever, fatigue, malaise, anorexia, nausea, jaundice (yellowing of the skin and whites of the eyes), dark urine, light clay-colored stool, diarrhea.	Individuals with Hepatitis A are most contagious from two weeks prior to until one week after the onset of illness.	Exclude from work until two weeks after date of onset of illness.	Yes, immediately reportable condition.
Norovirus	Nausea, vomiting, diarrhea, abdominal cramps. May also have low grade fever, chills, body aches, headache.	Norovirus is highly contagious foodborne illness and can be easily transmitted from an infected food worker to customers. Very low infectious dose.	48-72 hours after symptoms resolve.	Outbreaks only.
Salmonella (non-typhoid) (Salmonellosis)	Fever, nausea, vomiting, diarrhea, abdominal cramps.	Salmonellosis is communicable via the fecal-oral route for as long as infected persons excrete <i>Salmonella</i> bacteria in their stool. Fecal shedding can occur from days to months. Low infectious dose for some serotypes.	Exclude from food handling duties until symptom free and two negative stool tests taken at least 24 hours apart and 48 hours after the cessation of antibiotic treatment are obtained. All symptomatic food handling contacts of a case shall be considered the same as a case and handled in the same fashion.	Yes, individual cases and outbreaks.
Shigella (Shigellosis)	Nausea, vomiting, diarrhea (may be bloody), and abdominal cramps.	Shigellosis is communicable for as long as infected persons excrete Shigella bacteria their stool. FecaL shedding usually lasts for about four weeks after onset of illness. Low infectious dose.	Exclude from food handling duties until symptom free and two negative stool tests taken at least 24 hours apart and at least 48 hours after the cessation of antibiotic treatment are obtained. All symptomatic food handling contacts of a case shall be considered the same as a case and handled in the same fashion.	Yes, individual cases and outbreaks.
Gastrointestinal Illness (organism/cause not identified or not yet determined)	Diarrhea, vomiting		Excluded from food handling duties until 24 hours after symptoms resolve unless a non-infectious cause is identified.	Outbreaks.

For specific reporting requirements refer to NJDOH Reporting Requirements http://nj.gov/health/cd/reporting.shtml

Sources:

NJDOH http://nj.gov/health/cd/find.shtml Communicable Disease Chapters Centers for Disease Control and Prevention http://www.cdc.gov