

# Prevention and Mitigation of Common Childhood Infectious Illnesses

NJDOH Daycares, Schools, & Higher  
Education (DSH) Team

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# Common Childhood Infectious Illnesses

## On Today's Agenda

**Hand, Foot, &  
Mouth Disease**



**Fifth  
Disease**



**Conjunctivitis**



**GI Illnesses**



# DSH Team Webpage

## Communicable Disease Service

[Home](#) [Diseases & Health Topics A-Z List](#) [Disease Reporting](#) [Immunization Requirements](#) [Education & Training](#) [Statistics, Reports & Publications](#) [Forms](#)

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### Education & Training

[Antimicrobial Stewardship Recognition Program](#)

[CDS Training Resources](#)

[Daycares, Schools, and Higher Education \(DSH\) Team](#)

[Project Firstline](#)

### DSH Webpage

This page contains educational and training materials, but does not include guidance documents for schools, childcares and institutes of higher education. Click the button below to access the general CDS school health page:

[CDS School Health Page](#)

## Daycares, Schools, and Higher Education (DSH) Team

The Daycares, Schools, and Higher Education (DSH) Team prioritizes collaboration, education, and training to strengthen public health and minimize infectious disease transmission in daycares, schools, and higher education institutions. The materials on this page were created to serve these educational settings. If you have requests for additional resources and trainings, please contact [CDS.REP.Communications@doh.nj.gov](mailto:CDS.REP.Communications@doh.nj.gov).

### Resources for Educational Settings

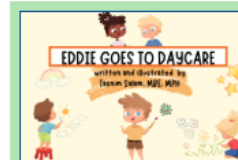
#### Webinars

- [Norovirus in Childcare Centers and Schools](#) (9:11 min)
  - [Webinar Resources](#) [LHD Directory]
- [Infectious Disease Communications in Educational Settings](#) (4:51 min)
- [Ticks and Tips for Infectious Disease Prevention](#)
  - [Webinar Resources](#) [Slide Deck] [NJDOH Tickborne Disease Page] [NJDOH K-12 Tickborne Disease Education Toolkit] [CDC Tickborne Disease Page]
- [Say No to Norovirus](#) (43:13 min)
  - [Webinar Resources](#) [Slide deck] [NJDOH Norovirus Webpage] [CDC Norovirus Webpage] [EPA List G]

#### Educational Materials

- [Be a Friend, Prevent Pertussis](#) **NEW** 11/24
- [Holiday Flyers](#) [Childcare/K-12] [Teen/IHE]
- [Reasons to Contact Your Local Health Department](#)
- [It's Not Just COVID! \(Camp Version\)](#) **UPDATED** 6/19/24
- [Norovirus Prevention Tips and Facts for Childcares and Schools](#) [English] [Spanish]
- [Impetigo: Facts and Prevention Tips for Schools and Childcare Centers](#) [English] [Spanish]
- [Prevention Tips for Student Athletes](#) [English] [Spanish]
- [Strep Throat: Facts and Prevention Tips for Schools and Childcare Centers](#) [English] [Spanish]
- [Stop the Spread of Germs in your Classroom](#) (teacher flyer) [English] [Spanish] **UPDATED** 4/24

## NEW! Eddie Goes to Daycare



[Click here](#) to view this new children's book featuring Eddie and his pals as they learn about staying healthy!

## Join Our Email List!

[Click Here to Join](#)

## Infectious Disease Training!



# School Health Webpage

## Surveillance

The Surveillance for Infectious Conditions (SIC) Dashboard is now live.

[See the SIC Dashboard](#)

## Disease Reporting Requirements

### Administrators:

Click [here](#) to view a letter to clarify legal obligations required by administrators in regard to public health investigations

## School Health

Prevention and control of communicable disease is a shared responsibility between schools, health care providers, parents, students, local and state health departments, and other community partners. The school environment is conducive to the acquisition and transmission of communicable diseases but is also where good preventive practices can lessen the impact of these diseases.

### Outbreaks

Outbreaks and suspected outbreaks of **any** illness/condition are immediately reportable to the local health department where the school is located. This pertains to youth camps, child care centers, preschools, schools and institutions of higher education referred to in general as "schools."

### Some school related illnesses reported to NJDOH include:

- [Fifth Disease](#)
- [Hand, Foot, and Mouth Disease \(HFMD\)](#)
- [Influenza](#)
- [Measles: Preventing the Spread in Child Care and School Settings](#)
- [MRSA](#)
- [Scabies](#)

### Guidance

- [Prevention and Control Measures for Outbreaks in School Settings](#)
- [Prevention and Control Measures for Outbreaks in Camp Settings](#)  
**NEW! 6/24/24**
- [Prevention of Norovirus Outbreaks in School and Daycare Settings](#)  
**Updated 11/14/2024**
- [Guidelines for Skin Infections in Contact Sports](#)
- [Strategies for the Prevention of MRSA in Schools](#)
- [Respiratory Virus Guidance](#) **NEW! 4/18/24**
- [School Exclusion List](#)

## Resources

- [NJDOH Camp Vectorborne Disease Prevention Flyers](#) **NEW**
- [Centers for Disease Control and Prevention - Healthy Schools](#)
- [Directory of Local Health Departments](#)
- [Epidemiology and Prevention of Vaccine-Preventable Diseases \(Pink Book\)](#)
- [Handwashing](#)
- [Quick Reference Magnet: Reporting Requirements for Communicable Diseases and Work-Related Conditions](#)
- [Disinfection, Ventilation, and Indoor Air Quality](#)
- [Selected EPA Registered Disinfectants](#)
- [Toolkit for Keeping Your Child Care Center Healthy](#)



# Exclusion List

## General Guidelines for the Control of Outbreaks in School and Childcare Settings School Exclusion List

This chart provides information about some communicable disease that may occur in schools, day care centers, summer camps and other group settings for children. It is meant as a guide to answer questions frequently asked of persons responsible for groups of children. 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. **Outbreaks and suspect outbreaks of illness are immediately reportable to the Local Health Department where the school is located.**<sup>1</sup>

Fever is defined as a body temperature  $\geq 100.4$  F (38°C) from any site.

Infection or Condition	Common Signs and Symptoms	Exclusion for School/Daycare Children	Exclusion for Childcare Provider and/or Food Handler	Notes	Individual Cases Reportable to Health Department
<b>Acute Respiratory Illness (ARI)</b>	Fever $\geq 100.4^{\circ}\text{F}$ and rhinorrhea, nasal congestion, sore throat, or cough in absence of a known cause.	Until fever free for 24 hours without fever reducing medication and symptoms are improving. <sup>2</sup>			
<b>COVID-19</b>	New or worsening cough, shortness of breath, difficulty breathing, new olfactory or taste disorder. Fever, chills, myalgia, headache, sore throat, GI, fatigue, congestion, rhinorrhea	Until fever free for 24 hours without fever reducing medication <b>AND</b> symptoms are improving.		Once individuals return to normal activities, they should take additional precautions for the next five days. <sup>2</sup>	
<b>Diarrhea Unspecified (organism/cause not identified or not yet determined)</b>	Defined by stool that is occurring more frequent or is less formed in consistency than usual in the child and not associated with changes of diet.	Exclude children whose stool frequency exceeds 2 above normal per 24 hours for that child.  Exclude diapered children whose stool is not contained in the diaper and toilet-trained	Exclude from cooking, preparing and touching food until 24 hrs. after symptoms resolve.	See norovirus  Medical evaluation for stools with blood or mucus.	







## GENERAL GUIDELINES FOR THE PREVENTION AND CONTROL OF OUTBREAKS IN EDUCATIONAL SETTINGS

### Introduction

Per New Jersey Administrative Code (N.J.A.C.) 6A:16-2.2 and N.J.A.C. 3A:52-7.1, each school district and childcare center shall immediately report by telephone to the health officer of the jurisdiction in which the school is located any communicable diseases identified as reportable pursuant to N.J.A.C. 8:57-1, whether confirmed or presumed.

These regulations pertain to youth camps, childcare/early care and education programs (ECEs), schools and institutions of higher education. Additional outbreak guidance specific to the camp setting can be found on the New Jersey Department of Health (NJDOH) [School Health](#) webpage. Throughout the rest of this document, unless otherwise noted, these educational settings will be referred to generally as “schools”. This document has been prepared to guide in both identification and response to outbreaks occurring in the school setting.

### Reporting

Information related to school absenteeism plays a crucial role in detecting disease clusters or outbreaks. In accordance with Executive Order 302 and Executive Directive No. 21-011, **K-12 schools are required to submit weekly data**, including student census and absenteeism, to the New Jersey Department of Health (NJDOH) through the Surveillance for Infectious Conditions (SIC) Module in New Jersey’s Communicable Disease Reporting and Surveillance System (CDRSS). Weekly reporting into the SIC Module does not take the place of reporting outbreaks to the local health department (LHD).

Reporting communicable disease outbreaks in schools serves various purposes. The primary objective is to immediately control the further spread of the disease. Additionally, insights gained from outbreak investigations assist schools and public health agencies in identifying and eliminating sources of infection, understanding emerging problems, identifying carriers to mitigate their role in disease transmission, and implementing new prevention strategies within schools.

In the school setting, determining if an outbreak is occurring can be challenging. **An outbreak is defined as an occurrence of disease greater than expected at a specific time and place.** The following examples of confirmed or suspected outbreaks should be reported by the school to their local health department (LHD). This list is not exhaustive; if the situation doesn't align with these criteria and an outbreak is suspected, consultation with the LHD is recommended.

# General Guidelines for the Prevention and Control of Outbreaks in Educational Settings



Five children in second grade from classroom A at ABC Elementary School have been diagnosed with HFMD this week.

*These individuals do not interact with each other outside of school.*

**Is this an outbreak?**

 POLL

1

Yes

2

No

# Red flags that may indicate an outbreak:

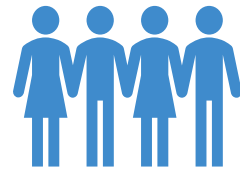


- Several individuals with a ***known interaction*** become ill
- There is an ***increase*** in sick absences with reports of individuals showing ***similar symptoms***
- Two or more individuals are diagnosed with the same **reportable illness**
- One case of a **highly infectious disease**





# Be prepared for your local health department to ask questions about:



**PERSON**



**PLACE**



**TIME**

## Blank Line List (Excel)



## Blank Line List (Google Sheet)

NEW JERSEY DEPARTMENT OF HEALTH  
COMMUNICABLE DISEASE PROGRAM

### EDUCATIONAL SETTING (SCHOOL/DAYCARE/INSTITUTE OF HIGHER EDUCATION) SYMPTOMS LINE-LIST

ALWAYS OPEN THIS FILE IN EXCEL APP

Select Exposure Setting:	SCHOOL	School Name		Reported By		Phone	
Outbreak/Investigation Number (E/I Number)		Report Date		Total Number of Students		Total Number of Staff	

Total Number of OB associated Cases (Auto-calculated)	0
Total Number of OB-associated Hospitalized (Auto-calculated)	0
Line-list last updated on (Auto-calculated)	

[illegible]

# Prevention

## Help Your Child's School Prevent the Spread of Infections

You can play an important role in helping your child have a healthy place to learn. The Centers for Disease Control and Prevention (CDC) developed [guidance](#) for schools to help students, families, and school staff keep kids healthy and learning. Here are some ways you can help your child's school stop the spread of germs:



1. Encourage your child to practice healthy habits, like [washing their hands](#) often and covering their mouth and nose when [coughing and sneezing](#).

2. Make sure your child goes for their [yearly check-ups](#) and gets the [recommended routine vaccines they need](#). This helps keep your child healthy and in school by reducing the spread of germs in school and making sickness shorter and milder.

3. Know when your child is well enough to go to school and when they should stay home because of their symptoms. Some reasons to have your child stay home include fever, vomiting, diarrhea, and respiratory symptoms that are getting worse or not improving. [Guidance on staying home when sick](#) can also help you decide whether your child needs to stay home. Ask your child's school if they have specific policies for returning after being sick.



4. Help make decisions about how your child's school is preventing illness, by taking steps for cleaner air, for example. You can join a school or district committee such as a school health advisory committee (SHAC), wellness committee, or parent teacher association (PTA). These committees help set the policies for health and wellness, work to include language about infections in school policies and practices and inform emergency operations and recovery plans.

5. Volunteer for school or community activities that support a healthy education environment. You can also attend, or support meetings and training events offered by your child's school or district to learn more about how schools can help prevent the spread of infections.





# Teaching Children to Prevent Disease



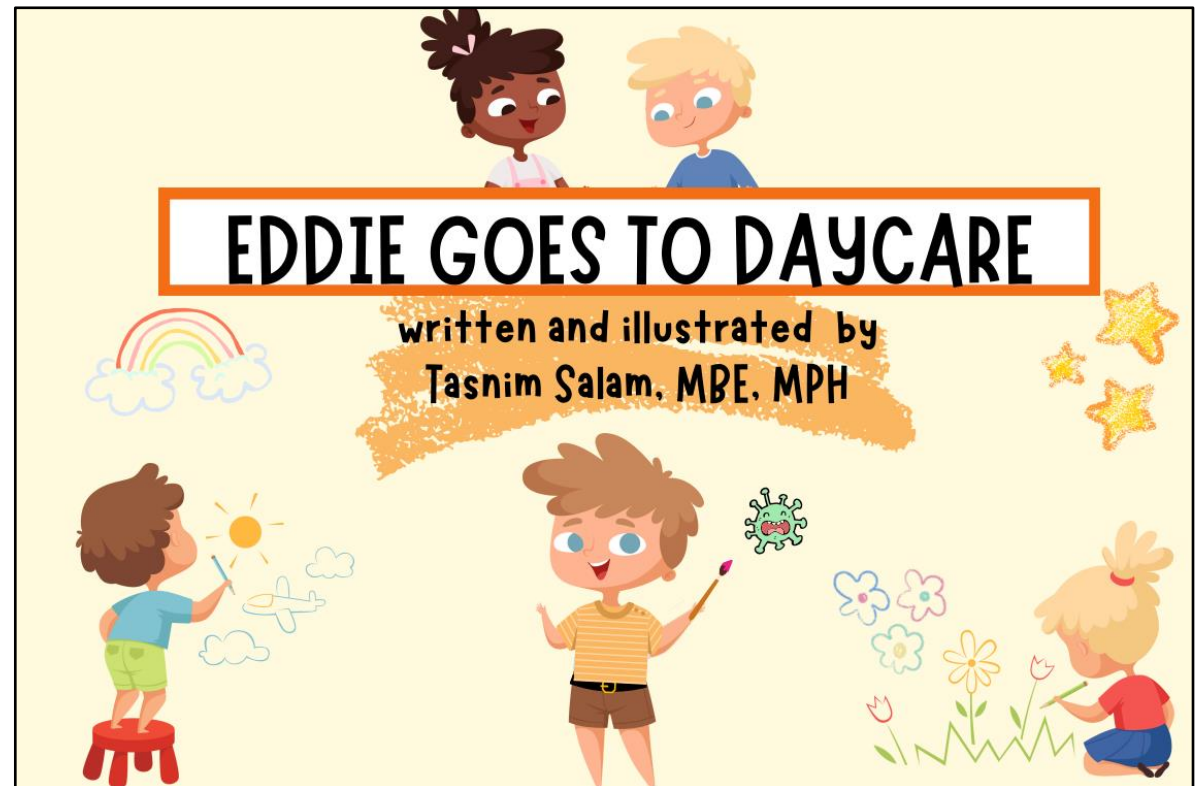
# Handwashing & Hygiene







# Teaching Good Hygiene





# Keeping Your Facility Clean



Clean frequently touched objects and surfaces such as toys, door handles, tables, faucets, and drinking fountains regularly. Disinfect when someone is sick.



Carefully follow rules for cleaning and disinfecting when diapering and feeding infants.

# Keeping Your Facility Clean



Information about listed products is current as indicated by the dates on the lists.

- [EPA's Registered Antimicrobial Products Effective as Sterilizers \[List A\]](#)
- [EPA's Registered Antimicrobial Products Effective Against \*Mycobacterium tuberculosis\* \(TB\) \[List B\]](#)
- [EPA's Registered Antimicrobial Products Effective Against Norovirus \(Feline calicivirus\) \[List G\]](#)
- [EPA's Registered Antimicrobial Products Effective Against Methicillin-resistant \*Staphylococcus aureus\* \(MRSA\) and/or Vancomycin Resistant \*Enterococcus faecalis\* or \*faecium\* \(VRE\) \[List H\]](#)
- [EPA's Registered Antimicrobial Products for Medical Waste Treatment \[List J\]](#)
- [EPA's Registered Antimicrobial Products Effective Against \*Clostridium difficile\* Spores \[List K\]](#)
- [EPA's Registered Antimicrobial Products Effective Against Ebola Virus \[List L\]](#)
- [EPA's Registered Antimicrobial Products Effective Against Avian Influenza \[List M\]](#)
- [Disinfectants for Use Against SARS-CoV-2 \[List N\]](#)
- [Disinfectants for Use Against Rabbit Hemorrhagic Disease Virus \(RHDV2\) \[List O\]](#)
- [EPA's Registered Antimicrobial Products Effective Against \*Candida auris\* \[List P\]](#)
- [Disinfectants for Emerging Viral Pathogens \(EVPs\) \[List Q\]](#)
- [EPA's Registered Antimicrobial Products Effective Against Bloodborne Pathogens \(HIV, Hepatitis B and Hepatitis C\) \[List S\]](#)



# Cleaning, Sanitizing, and Disinfecting

<b>Recommended Cleaning Protocols for Child Care Centers</b>			
<b>Areas/Objects</b>	<b>Clean with a green cleaner</b>	<b>Sanitize</b>	<b>Disinfect</b>
General: shelves, windows, high countertops, carpets, glass	yes		
Surfaces touched by many hands: include doorknobs, cabinet handles, stair railings	yes		yes
Diaper changing areas, bathrooms, cots, cribs	yes		yes
Water fountains	yes		yes
Floors, walls, partitions	yes		yes
Surface and objects contaminated with blood and body fluids	yes		yes
Kitchen: eating utensils, bottles, dishes; food preparation and serving areas (high chairs, meal tables)	yes	yes	
Plastic toys and pacifiers	yes	yes	



# Routine Cleaning Resources

## How to Read a Disinfectant Label

Read the entire label.

The label is the law!

Note: Below is an **example** of information that can be found on a disinfectant label

**Active Ingredients:**  
What are the main disinfecting chemicals?

**ACTIVE INGREDIENTS:**  
Alcohol (60% C14, 30% C15, 5% C12, 5% C18) ..... 10.0%  
Dimethyl Benzyl Ammonium Chloride ..... 50.0%  
**OTHER INGREDIENTS:** ..... 50.0%  
**TOTAL:** ..... 100.0%

**EPA Registration Number:**  
U.S. laws require that all disinfectants be registered with EPA.

EPA REG NO. 55555-55 55555

**Directions for Use (Instructions for Use):**  
Where should the disinfectant be used?

**Directions for Use**  
**INSTRUCTIONS FOR USE:**  
It is a violation of Federal law to use this product in a manner inconsistent with its labeling.

What germs does the disinfectant kill?

**For Disinfection of Healthcare Organisms:**  
Staphylococcus aureus,  
Pseudomonas aeruginosa.

What types of surfaces can the disinfectant be used on?

**To Disinfect Hard, Nonporous Surfaces:**  
Pre-wash surface.  
Mop or wipe with disinfectant solution.

How do I properly use the disinfectant?

Allow solution to stay wet on surface for at least 10 minutes.  
Rinse well and air dry.

**Contact Time:**  
How long does the surface have to stay wet with the disinfectant to kill germs?

EXP. DATE: 12/31/2015  
LOT: 12345678901234567890

**Signal Words (Caution, Warning, Danger):**  
How risky is this disinfectant if it is swallowed, inhaled, or absorbed through the skin?

**CAUTION**

**PRECAUTIONARY STATEMENTS:**  
Hazardous to humans and domestic animals. Wear gloves and eye protection.

**Precautionary Statements:**  
How do I use this disinfectant safely? Do I need PPE?

**CAUSES MODERATE EYE IRRITATION.** Avoid contact with eyes, skin or clothing. Wash thoroughly with soap and water after handling. Avoid contact with foods.

**First Aid:**  
What should I do if I get the disinfectant in my eyes or mouth, on my skin, or if I breathe it in?

**FIRST AID: IF IN EYES:** Hold eye open and rinse slowly and gently with water for 15-20 minutes. Remove contact lenses, if present, after the first 5 minutes, then continue rinsing eye. **IF ON SKIN OR CLOTHING:** Take off contaminated clothing. Rinse skin immediately with plenty of water for 15-20 minutes.

**Storage & Disposal:**  
How should the disinfectant be stored? How should I dispose of expired disinfectant? What should I do with the container?

**POISON CONTROL:** Call a Poison Control Center (1-800-368-5048) or doctor for treatment advice.

**STORAGE AND DISPOSAL:** Store this product in a cool, dry area away from direct sunlight and heat. When not in use keep center cap of lid closed to prevent moisture loss. Non-refillable container. Do not reuse or refill this container.



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



WWW.CDC.GOV/PROJECTFIRSTLINE



SAFER CHOICE  
Schools

## About the Safer Choice Program

Finding products that are safer for children, school staff, and the environment should be easy—that's why EPA created the Safer Choice label. When you see a product with the Safer Choice label, it means that every ingredient in the product has been evaluated by EPA scientists. EPA's Safer Choice program helps school purchasers and consumers identify cleaning and other products that contain ingredients that are safer for people and the environment.



### Safer Choice Products

Safer Choice labels a wide range of products, including:

- All-purpose cleaners
- Bathroom cleaners
- Carpet cleaners
- Degreasers
- Dish detergents
- Floor care products
- Glass cleaners
- Hand soaps
- Laundry products
- Whiteboard cleaners
- Wood cleaners
- Vehicle cleaners
- And more...

[epa.gov/saferchoice/products](http://epa.gov/saferchoice/products)

### Questions?

[saferchoice@epa.gov](mailto:saferchoice@epa.gov)

### The Safer Choice Label

Our product review process is grounded in more than 40 years of EPA experience evaluating the human health and environmental characteristics of chemicals.

Safer Choice-labeled products must:

- Contain safer ingredients;
- Pass product performance standards;
- Disclose all ingredients; and
- Meet environmentally sustainable packaging requirements.

### Why is Safer Choice important for schools?

Cleaning with Safer Choice-labeled products can help schools maintain a healthy and safer learning environment which is important to attendance and academic performance.

Indoor air can be more polluted than outdoor air: indoor levels of pollutants may be two to five times – and occasionally more than 100 times – higher than outdoor levels.

Staff and students spend a lot of time in school and children are often more susceptible to pollutants than adults.

Fumes from cleaning products can linger long after they have been applied, which can exacerbate asthma and expose students and staff to potentially harmful substances.

EPA SAFER CHOICE

EPA 950-F-16-001

[www.epa.gov/saferchoice](http://www.epa.gov/saferchoice)  
October 2016



# Using Disinfectants Safely

## 6 Steps for Safe & Effective Disinfectant Use



### Step 1: Check that your product is EPA-approved

Find the EPA registration number on the product. Then, check to see if it is on EPA's list of approved disinfectants at: [epa.gov/listn](https://www.epa.gov/listn)



### Step 2: Read the directions

Follow the product's directions. Check "use sites" and "surface types" to see where you can use the product. Read the "precautionary statements."

### Step 3: Pre-clean the surface

Make sure to wash the surface with soap and water if the directions mention pre-cleaning or if the surface is visibly dirty.



### Step 4: Follow the contact time

You can find the contact time in the directions. The surface should remain wet the whole time to ensure the product is effective.

### Step 5: Wear gloves and wash your hands

For disposable gloves, discard them after each cleaning. For reusable gloves, dedicate a pair to disinfecting COVID-19. Wash your hands after removing the gloves.



### Step 6: Lock it up

Keep lids tightly closed and store out of reach of children.



## What's Wrong with Using Bleach?



Best practices for healthy child care centers



### Isn't bleach a good disinfectant?

Yes. Many child care center operators use bleach because it is effective, inexpensive, and readily available. However, bleach can have harmful health impacts on both children and adults that should be taken into consideration:

- Bleach can make asthma worse in someone who already has asthma.
- It can cause asthma in people who never had asthma.
- Using diluted bleach in a spray bottle creates small droplets that can be inhaled into the lungs by the staff and children.
- Children are at greater risk from breathing bleach vapors because their lungs are still developing.
- Bleach can irritate the skin and eyes.
- Breathing in bleach over a long period of time can increase your risk of cancer.

- A dangerous gas can be formed when bleach is combined with certain chemicals (like ammonia).
- Bleach causes the buildup of chloroform in the air. Elevated levels of chloroform have been found in some New Jersey child care centers due to the mixing of too much bleach with water. Chloroform is a known cancer-causing chemical.

### Is there a safer alternative to bleach?

Yes. Products that contain hydrogen peroxide (HP) as an active ingredient are available in ready to use formulas or concentrate (follow label for proper dilution).

- HP is an effective disinfectant and sanitizer with a specified "contact time" designed to kill the microorganisms listed on the label.
- HP also rapidly breaks down to water and oxygen and does not leave harmful residues or introduce irritating vapors into the air.

### If You Choose to Use Bleach:

- Follow the instructions provided to make safe dilutions
- Do not mix bleach with other chemicals
- Dilute by adding bleach to cool water to reduce vapors
- Wear gloves and eye protection always
- Ventilate the area
- Label, date, and cap the bottle or container
- Make a fresh bleach dilution daily due to its short shelf life
- Always clean the surfaces before you disinfect with bleach
- Call Poison Control at 1-800-222-1222 in case of an emergency



Mixing bleach with other chemicals containing ammonia, quaternary ammonium compounds (found in other disinfectants), vinegar, or other acids can create a toxic gas.

# Hand, Foot, & Mouth Disease (HFMD)

## Symptoms

Fever, sore throat, malaise, ulcers in the mouth, blisters on the hands and feet.

## Exclusion

Until fever free for 24 hours without fever reducing medication  
*(and no longer drooling steadily due to mouth sores).*

## Reportable?

Outbreaks and suspect outbreaks only.





# HFMD Exclusion

Infection or Condition	Common Signs and Symptoms	Exclusion for School/Daycare Children	Exclusion for Childcare Provider and/or Food Handler	Notes	Individual Cases Reportable to Health Department
<b>Hand Foot and Mouth (coxsackievirus)</b>	Fever, sore throat, malaise, ulcers in the mouth and blisters on hands and feet.	Daycare: Fever free for 24 hours without fever reducing medication and no longer drooling steadily due to mouth sores.  School: Fever free for 24 hours without fever reducing medication.		Most often seen in summer and early fall.	

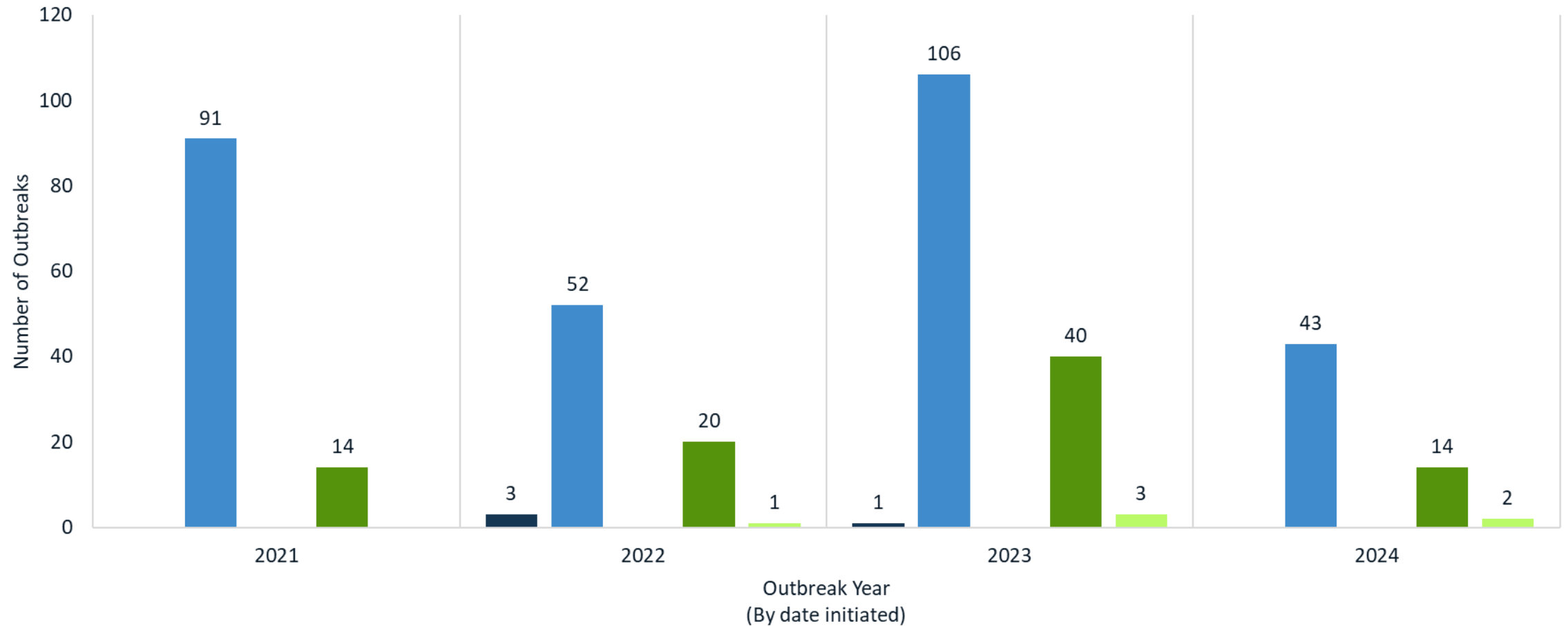
<sup>1</sup> An outbreak may be occurring if: several children who exhibit similar symptoms are in the same classroom, same wing or attended a common event. There is an increase in school absences with report of similar symptoms. Two or more students diagnosed with the same reportable disease. A single case of a highly infectious disease exists or is suspected to exist.

## Conditions Requiring Temporary Exclusion

Temporary exclusion is recommended when the illness prevents the child from participating comfortably in activities as determined by the staff of the school or program; the illness results in a greater need for care than the staff of the program determine they can provide without compromising their ability to care for other children; the child has any of the following conditions, unless a health professional determines the child's condition does not require exclusion, appears to be severely ill (this could include lethargy/lack of responsiveness, irritability, persistent crying, difficult breathing, or having a quickly spreading rash, fever (as defined above) and behavior change or other signs and symptoms (e.g., sore throat, rash, vomiting, and diarrhea).



## Hand, foot, and mouth disease (Coxsackievirus) outbreaks in NJ educational settings June 2021- October 2024



N=390

Current to 11/01/2024\*

■ Camp ■ Daycare Facility ■ Institutes of Higher Education ■ School or University ■ Sports Team

\*Data is preliminary and is subject to change.

# Hand, Foot and Mouth Disease (HFMD) Coxsackievirus

## Frequently Asked Questions

### What is hand, foot and mouth disease (HFMD)?

Hand, foot, and mouth disease is an illness caused by a virus and is more common in summer and early fall. This illness is usually mild. HFMD is seen more often in children under age 5, but adult cases are not unusual. Outbreaks frequently occur among groups of children such as in childcare and preschool settings.

### What are the symptoms of HFMD?

A person with HFMD may have some or all of these mild symptoms:

- Fever, sore throat, poor appetite, feeling unwell
- Tiny sores in the mouth
- Skin rash (flat or bumpy red spots) and may have blisters

The skin rash is usually on the palms of the hands and the soles of the feet. It may also appear on the knees, elbows, buttocks or genital areas.

### How do people get HFMD?

The virus that causes HFMD can be found in the throat, nose, feces (poop), and in the blister fluid of an infected person. HFMD is spread from an infected person to others through close personal contact (such as kissing, or sharing forks, cups, etc.). It can also be spread through the air when an infected person coughs or sneezes. Contact with feces or contact with contaminated objects can also spread the virus.

Generally, a person with HFMD is most contagious (able to spread the disease to others) during the first week of illness. People can sometimes be contagious for days or weeks after symptoms go away. Some people, especially adults, who get infected with a virus that causes HFMD may not have any symptoms. However, they may still be contagious. This is why people should always try to wash their hands and cover coughs and sneezes, so they can help prevent the spread of germs.

If someone is exposed to HFMD, symptoms usually develop within three to five days.





# HFMD Prevention



## SAFE AND HEALTHY DIAPER CHANGING STEPS IN CHILDCARE SETTINGS



Keep a hand on the child for safety at all times!



### 1 PREPARE

- Cover the diaper changing surface with disposable liner.
- If you will use diaper cream, dispense it onto a tissue now.
- Bring your supplies (for example, clean diaper, wipes, diaper cream, gloves, plastic or waterproof bag for soiled clothing, extra clothes) to the diapering area.



### 2 CLEAN CHILD

- Place the child on diapering surface and unfasten diaper.
- Clean the child's diaper area with disposable wipes. Always wipe front to back!
- Keep soiled diaper/clothing away from any surfaces that cannot be easily cleaned. Securely bag soiled clothing.



### 3 REMOVE TRASH

- Place used wipes in the soiled diaper.
- Discard the soiled diaper and wipes in the trash can.
- Remove and discard gloves.



### 4 REPLACE DIAPER

- Slide a fresh diaper under the child.
- Apply diaper cream, if needed, with a freshly gloved finger.
- Fasten the diaper and dress the child.



### 5 WASH CHILD'S HANDS

- Use soap and water to wash the child's hands thoroughly.
- Return the child to a supervised area.



### 6 CLEAN UP

- Remove liner from the changing surface and discard in the trash can.
- Wipe up any visible soil with damp paper towels or a baby wipe.
- Wet the **entire surface** with disinfectant; make sure you read and follow the directions on the disinfecting spray, fluid, or wipe. Choose disinfectant appropriate for the surface material.



### 7 WASH YOUR HANDS

- Wash your hands thoroughly with soap and water.



Centers for Disease  
Control and Prevention  
National Center for Emerging and  
Zoonotic Infectious Diseases

DECEMBER 2022



# Keeping Your Facility Clean



Information about listed products is current as indicated by the dates on the lists.

- [EPA's Registered Antimicrobial Products Effective as Sterilizers \[List A\]](#)
- [EPA's Registered Antimicrobial Products Effective Against \*Mycobacterium tuberculosis\* \(TB\) \[List B\]](#)
- [EPA's Registered Antimicrobial Products Effective Against Norovirus \(Feline calicivirus\) \[List G\]](#)
- [EPA's Registered Antimicrobial Products Effective Against Methicillin-resistant \*Staphylococcus aureus\* \(MRSA\) and/or Vancomycin Resistant \*Enterococcus faecalis\* or \*faecium\* \(VRE\) \[List H\]](#)
- [EPA's Registered Antimicrobial Products for Medical Waste Treatment \[List J\]](#)
- [EPA's Registered Antimicrobial Products Effective Against \*Clostridium difficile\* Spores \[List K\]](#)
- [EPA's Registered Antimicrobial Products Effective Against Ebola Virus \[List L\]](#)
- [EPA's Registered Antimicrobial Products Effective Against Avian Influenza \[List M\]](#)
- [Disinfectants for Use Against SARS-CoV-2 \[List N\]](#)
- [Disinfectants for Use Against Rabbit Hemorrhagic Disease Virus \(RHDV2\) \[List O\]](#)
- [EPA's Registered Antimicrobial Products Effective Against \*Candida auris\* \[List P\]](#)
- [Disinfectants for Emerging Viral Pathogens \(EVPs\) \[List Q\]](#)
- [EPA's Registered Antimicrobial Products Effective Against Bloodborne Pathogens \(HIV, Hepatitis B and Hepatitis C\) \[List S\]](#)





### EXPOSURE NOTICE: Hand Foot and Mouth Disease (HFMD)

HFMD is an illness usually seen in children under age 10, but can be seen in all age groups. It is caused by a virus and most often occurs from spring to fall. It spreads from person to person through contact with saliva coughs, sneezes, or contact with the feces (poop) of an infected person. A person with HFMD is most contagious (able to spread the disease to others) during the first week of illness. HFMD has no specific treatment and will go away by itself.

#### PREVENT THE SPREAD OF HFMD

- Wash hands often, especially after changing diapers or using the toilet.
- Cover coughs and sneezes. Teach children to do the same.
- Clean and disinfect things that are touched often, including toys.
- Avoid close contact such as kissing, hugging, sharing cups, or eating utensils with people who have HFMD.

#### WHAT TO LOOK FOR

- Fever
- Sore throat
- Lack of appetite
- Feeling unwell
- Tiny sores in mouth
- Skin rash (flat or bumpy red spots) on the palms of hands and soles of feet.



#### WHEN CAN MY CHILD GO BACK TO SCHOOL OR CHILD CARE

Children with HFMD should stay home until the fever is gone and any drooling due to mouth sores has stopped. The child care setting may ask that your child stay home longer if they have other symptoms that would exclude them from coming to child care.



# Hand, Foot, & Mouth Disease



### AVISO DE EXPOSICIÓN: La enfermedad de manos, pies y boca (HFMD, por sus siglas en inglés)

HFMD es una enfermedad que generalmente se observa en niños menores de 10 años, pero también se puede observar en grupos de diferentes edades. Esta enfermedad es causada por un virus y ocurre con mayor frecuencia desde el inicio de la primavera hasta el otoño. Se contagia de persona a persona a través del contacto con la saliva, al toser, estornudar o por el contacto con las heces (caca) de una persona infectada. Una persona con HFMD es más contagiosa (capaz de transmitir la enfermedad a otros) durante la primera semana de enfermedad. HFMD no tiene un tratamiento específico y desaparecerá por sí solo.

#### ¿CÓMO PREVENIR LA PROPAGACIÓN DE HFMD?

- Lávese las manos con frecuencia, especialmente después de cambiar pañales o usar el baño.
- Cúbrase la boca al toser o estornudar. Enseñe a los niños a hacer lo mismo.
- Limpie y desinfecte las áreas comunes y las cosas que se tocan con frecuencia, incluyendo los juguetes.
- Evite el contacto cercano con otras personas, como besar, abrazar, compartir tazas o utensilios con personas con la enfermedad de HFMD.

#### ¿Cuáles son los síntomas?

- Fiebre
- Dolor de garganta
- Falta de apetito
- Sentirse mal
- Pequeñas llagas en la boca
- Erupción cutánea (manchas rojas planas o protuberantes) en las palmas de las manos y las plantas de los pies.



#### ¿CUÁNDO PUEDE MI HIJO(A) REGRESAR A LA ESCUELA, GUARDERÍA O CUIDADO DE NIÑOS?

Los niños con HFMD deben quedarse en casa hasta que la fiebre desaparezca y el babeo debido a las llagas en la boca haya cesado. El entorno de cuidado infantil puede pedir que su hijo se quede en casa más tiempo si tiene otros síntomas que lo excluirían de ir al cuidado infantil.





## True or False?

Hand, Foot, & Mouth disease only occurs in children.

 POLL

1

True

2

False



# Parvovirus B19 and Fifth Disease

EXPLORE TOPICS ▾

Q SEARCH

## CDC is monitoring increased parvovirus B19 activity in the U.S.



Certain groups, including pregnant people, people with a weakened immune system, or people with certain blood disorders, can face serious complications from infection. [Read the Health Alert Network \(HAN\) advisory](#) for recommendations and prevention information.

AUGUST 13, 2024

## About Parvovirus B19

### AT A GLANCE

- Parvovirus B19 infection is usually mild in people who are otherwise healthy.
- Common symptoms include "slapped cheek" rash in children, and joint pains in adults.
- Complications can occur among people with underlying blood disorders or weakened immune system.
- Infection early during pregnancy can cause a slight increase in the risk of a miscarriage.



# Fifth Disease (Parvovirus B19)

## Symptoms

Mild cold symptoms followed by rash, characterized by "slapped face" appearance.

## Exclusion

No exclusion.

## Reportable?

Outbreaks and suspect outbreaks only.



# Fifth Disease Exclusion

Infection or Condition	Common Signs and Symptoms	Exclusion for School/Daycare Children	Exclusion for Childcare Provider and/or Food Handler	Notes	Individual Cases Reportable to Health Department
<b>Fifth Disease (Erythema infectiosum)</b>	Mild cold symptoms followed by rash, characterized by "slapped face" appearance.	No exclusion.		Pregnant women and immuno- compromised persons should seek medical advice.	

<sup>1</sup> An outbreak may be occurring if: several children who exhibit similar symptoms are in the same classroom, same wing or attended a common event. There is an increase in school absences with report of similar symptoms. Two or more students diagnosed with the same reportable disease. A single case of a highly infectious disease exists or is suspected to exist.



Infection or Condition	Common Signs and Symptoms	Exclusion for School/Daycare Children	Exclusion for Childcare Provider and/or Food Handler	Notes	Individual Cases Reportable to Health Department
<b>Acute Respiratory Illness (ARI)</b>	Fever $\geq 100.4^{\circ}\text{F}$ <b>and</b> rhinorrhea, nasal congestion, sore throat, or cough in absence of a known cause.	Until fever free for 24 hours without fever reducing medication and symptoms are improving. <sup>2</sup>			
<b>Fever (only)</b>	Elevation of normal body temperature.  Body temperature $\geq 100.4^{\circ}\text{F}$ ( $38^{\circ}\text{C}$ ) from any site	Until fever free for 24 hours without fever reducing medication.			

<sup>1</sup> An outbreak may be occurring if: several children who exhibit similar symptoms are in the same classroom, same wing or attended a common event. There is an increase in school absences with report of similar symptoms. Two or more students diagnosed with the same reportable disease. A single case of a highly infectious disease exists or is suspected to exist.

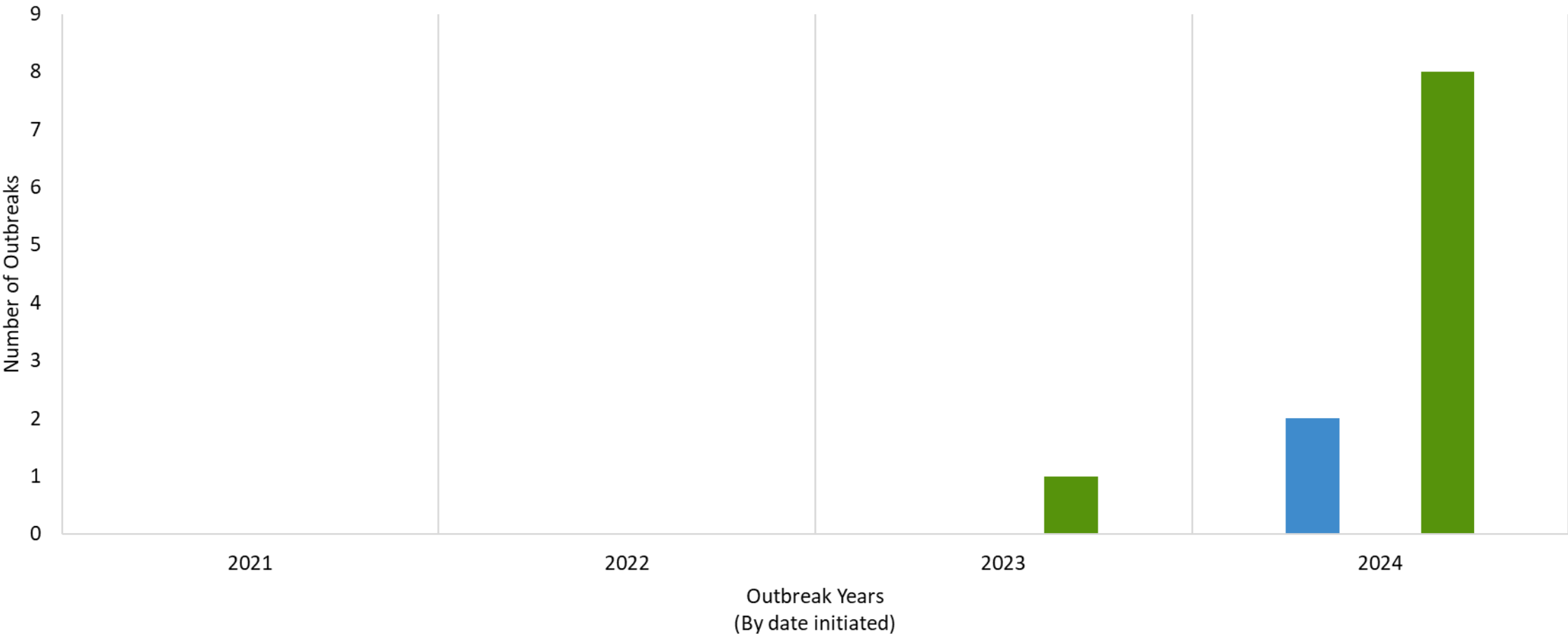
<sup>2</sup> See Respiratory Virus Guidance for K-12 Schools, Youth Camps, and Early Care and Education Programs at <https://www.nj.gov/health/cd/topics/schoolhealth.shtml>

#### Conditions Requiring Temporary Exclusion

Temporary exclusion is recommended when the illness prevents the child from participating comfortably in activities as determined by the staff of the school or program; the illness results in a greater need for care than the staff of the program determine they can provide without compromising their ability to care for other children; the child has any of the following conditions, unless a health professional determines the child's condition does not require exclusion, appears to be severely ill (this could include lethargy/lack of responsiveness, irritability, persistent crying, difficult breathing, or having a quickly spreading rash, fever (as defined above) and behavior change or other signs and symptoms (e.g., sore throat, rash, vomiting, and diarrhea).



Fifth Disease outbreaks in NJ educational settings  
January 2021 - October 2024



N=11  
Current to 11/01/2024\*

■ Camp   ■ Daycare Facility   ■ Institutes of Higher Education   ■ School or University   ■ Sports Team

\*Data is preliminary and is subject to change.



# Fifth Disease

## Frequently Asked Questions

### What is fifth disease?

Fifth disease is a mild rash illness caused by parvovirus B19. It is more common in children than adults. A person usually gets sick within four to 14 days (sometimes up to 20 days) after getting infected with the virus. About 20% of children and adults who get infected with this virus will not have any symptoms.

### How do people get fifth disease?

Fifth disease spreads when an infected person coughs or sneezes. You are most contagious (able to spread the disease to others) when it seems like you have "just a cold" and before you get the rash or joint pain and swelling. After you get the rash, you are probably not contagious.

The virus can also spread through blood or blood products. A pregnant woman who is infected with the virus can pass the virus to her baby.

### What are the symptoms of fifth disease?

The first symptoms of fifth disease are usually mild such as:

- fever
- sore throat
- runny nose
- headache

After several days, you may get a red rash on your face. This is called "slapped cheek" rash. This rash is the most common symptom of fifth disease. It is more common in children than adults. Some people may get a second rash a few days later on their chest, back, buttocks, or arms and legs. The rash may be itchy, especially on the soles of the feet. The rash usually goes away in seven to 10 days, but may come and go. As the rash starts to go away, it may look lacy.



### **How is fifth disease controlled?**

You can reduce your chance of being infected with the virus or infecting others by:

- Washing your hands often with soap and water
- Covering your mouth and nose when you cough or sneeze
- Not touching your eyes, nose, or mouth
- Avoiding close contact with people who are sick
- Staying home when you are sick

Health care providers who are pregnant should know about potential risks to their baby and discuss this with their doctor. All health care providers and patients should follow strict infection control practices to prevent parvovirus B19 from spreading.

### **Should people with fifth disease be kept out of group settings?**

No, unless:

- The child has an underlying blood disorder, such as sickle cell disease, or a weak immune system
- Child is unable to participate and staff members are not able to care for the child without compromising the safety of the other children in the group
- Child meets other exclusion criteria, such as fever

After you get the rash, you are probably not contagious. So, it is usually safe for you to go back to work or for your child to return to school or a child care center.

### **Are there any risks for pregnancy and fifth disease?**

Fifth disease is usually not a problem for pregnant women and their babies. About 50% of pregnant women are immune to the virus. So, these women and their babies are usually protected from getting the virus and fifth disease.

Pregnant women who are not immune usually do not have serious complications after they are exposed to others with fifth disease. They usually have only mild illness. Also, their babies usually do not have any problems. However, sometimes a baby will develop severe anemia, and the woman may have a miscarriage. But, this is not common. It happens in less than 5% of all pregnant women with parvovirus B19 infection and more commonly during the first half of pregnancy. Pregnant women who are not immune and are not currently infected with parvovirus B19 may want to stay away from people with fifth disease.

# Fifth Disease Prevention





## Parvovirus B19 and Fifth Disease

EXPLORE TOPICS ▾

Q SEARCH

### CDC is monitoring increased parvovirus B19 activity in the U.S.



Certain groups, including pregnant people, people with a weakened immune system, or people with certain blood disorders, can face serious complications from infection. [Read the Health Alert Network \(HAN\) advisory](#) for recommendations and prevention information.

AUGUST 13, 2024

## Preventing Parvovirus B19

### KEY POINTS

- There is no vaccine or treatment that can prevent parvovirus B19 infection.
- Follow general respiratory precautions to prevent spread of parvovirus B19.
- See your healthcare provider if you have complications from a parvovirus B19 infection or are infected while pregnant.



## EXPOSURE NOTICE: Fifth Disease

Fifth disease is a mild rash illness cause by a virus. It is most often seen in children. The virus spreads from an infected person to others through saliva, coughs and sneezes. A person with fifth disease is most contagious (able to spread the disease to others) when they have symptoms similar to a cold, but before the rash begins. Fifth disease has no specific treatment and will go away by itself. Pregnant women should talk to a doctor if they have been near someone with fifth disease.

### PREVENT THE SPREAD OF FIFTH DISEASE

- Wash hands often with soap and water.
- Cover coughs and sneezes. Teach children to do the same.
- Clean and disinfect things that are touched often, including toys.
- Avoid close contact with people who are sick.
- Stay home when you or your child are sick.

### WHAT TO LOOK FOR

- Fever
- Sore throat
- Runny nose
- Headache
- Red rash on face
- Joint pain or swelling (mostly in adults)



### WHEN CAN MY CHILD GO BACK TO SCHOOL OR CHILD CARE

Children with fifth disease do not need to stay home from school or child care unless the child has an underlying blood disorder or weak immune system.

The child care setting may ask that your child stay home longer if they have other symptoms that would exclude them from coming to child care.

July 2024



# POLL

Fifth Disease may also be called?  
*(Choose all that apply)*

1

Coxsackievirus

2

Parvovirus B19

3

Erythema Infectiosum

4

Metapneumovirus

5

None of the above



## True or False?

Conjunctivitis can be caused by a variety of agents, including bacteria, viruses, fungi, chemicals, and allergens.

≡ POLL

1

True

2

False

# Pink Eye (Conjunctivitis)

## Symptoms

May affect one or both eyes. Pink or red conjunctivae with white or yellow discharge, often with matted eyelids after sleep and eye pain or redness of the eyelids or skin surrounding the eye.

## Exclusion

Symptom-free, which means redness and drainage are gone OR approved for return by HCP.

## Reportable?

Outbreaks and suspect outbreaks only.



# Pink Eye Exclusion

Infection or Condition	Common Signs and Symptoms	Exclusion for School/Daycare Children	Exclusion for Childcare Provider and/or Food Handler	Notes	Individual Cases Reportable to Health Department
<b>Pink Eye (conjunctivitis)</b>	May affect one or both eyes. Pink or red conjunctivae with white or yellow discharge, often with matted eyelids after sleep and eye pain or redness of the eyelids or skin surrounding the eye.	Symptom-free, which means redness and drainage are gone OR approved for return by HCP.		There are several types of conjunctivitis including bacterial, viral, allergic, and chemical.  Sometimes will occur early in the course of a viral respiratory infection that has other signs or symptoms.	

<sup>1</sup> An outbreak may be occurring if: several children who exhibit similar symptoms are in the same classroom, same wing or attended a common event. There is an increase in school absences with report of similar symptoms. Two or more students diagnosed with the same reportable disease. A single case of a highly infectious disease exists or is suspected to exist.



Infection or Condition	Common Signs and Symptoms	Exclusion for School/Daycare Children	Exclusion for Childcare Provider and/or Food Handler	Notes	Individual Cases Reportable to Health Department
<b>Acute Respiratory Illness (ARI)</b>	Fever $\geq 100.4^{\circ}\text{F}$ <b>and</b> rhinorrhea, nasal congestion, sore throat, or cough in absence of a known cause.	Until fever free for 24 hours without fever reducing medication and symptoms are improving. <sup>2</sup>			
<b>Fever (only)</b>	Elevation of normal body temperature.  Body temperature $\geq 100.4^{\circ}\text{F}$ ( $38^{\circ}\text{C}$ ) from any site	Until fever free for 24 hours without fever reducing medication.			

<sup>1</sup> An outbreak may be occurring if: several children who exhibit similar symptoms are in the same classroom, same wing or attended a common event. There is an increase in school absences with report of similar symptoms. Two or more students diagnosed with the same reportable disease. A single case of a highly infectious disease exists or is suspected to exist.

<sup>2</sup> See Respiratory Virus Guidance for K-12 Schools, Youth Camps, and Early Care and Education Programs at <https://www.nj.gov/health/cd/topics/schoolhealth.shtml>

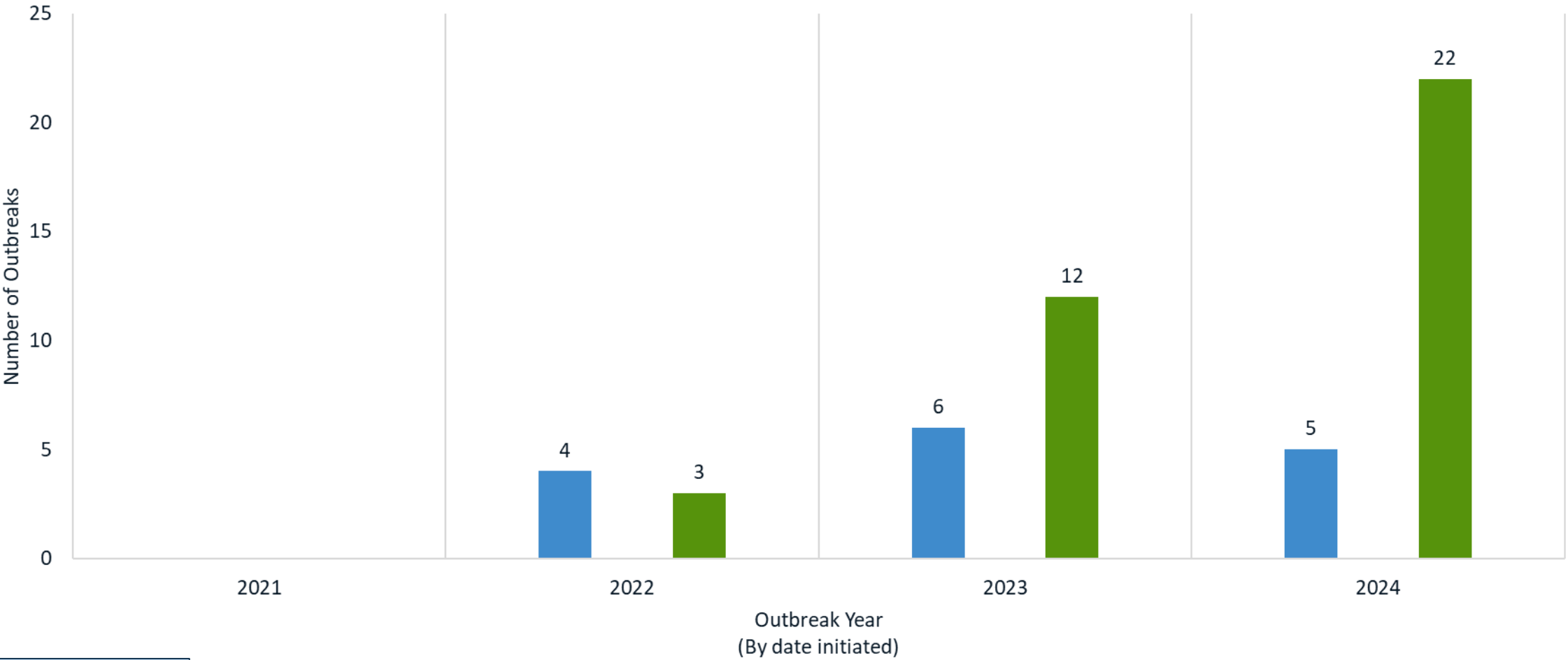
#### Conditions Requiring Temporary Exclusion

Temporary exclusion is recommended when the illness prevents the child from participating comfortably in activities as determined by the staff of the school or program; the illness results in a greater need for care than the staff of the program determine they can provide without compromising their ability to care for other children; the child has any of the following conditions, unless a health professional determines the child's condition does not require exclusion, appears to be severely ill (this could include lethargy/lack of responsiveness, irritability, persistent crying, difficult breathing, or having a quickly spreading rash, fever (as defined above) and behavior change or other signs and symptoms (e.g., sore throat, rash, vomiting, and diarrhea).





# Conjunctivitis outbreaks in NJ educational settings January 2021 - October 2024



N=52  
Current to 11/01/2024\*

■ Camp ■ Daycare Facility ■ Institutes of Higher Education ■ School or University ■ Sports Team

\*Data is preliminary and is subject to change.

# CDC Conjunctivitis Infographic



PINK EYE IS EXTREMELY COMMON.  
PUBLIC SCHOOL KIDS IN THE U.S. MISS  
**3 MILLION**  
SCHOOL DAYS EACH YEAR AS A RESULT OF PINK EYE.

## CDC Pink Eye Podcast for Parents (4min)

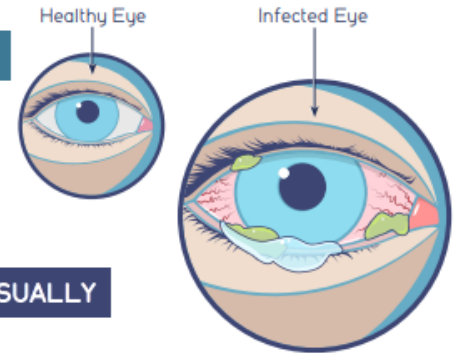


### HELP PROTECT YOURSELF FROM GETTING & SPREADING **PINK EYE** (CONJUNCTIVITIS)

PINK EYE IS OFTEN HIGHLY CONTAGIOUS.

IT CAN BE CAUSED BY

- Viruses (very contagious)
- Bacteria (very contagious)
- Allergens, like pollen (not contagious)
- Irritants, like smoke or dust (not contagious)



SYMPTOMS USUALLY

INCLUDE:

- Redness or swelling
- Watery eyes
- A gritty feel
- Itchiness, irritation, or burning
- Discharge
- Crusting of the eyelids or eyelashes



**SEE A DOCTOR** IF YOU  
HAVE PINK EYE ALONG  
WITH ANY OF THE  
FOLLOWING:

- Eye pain
- Sensitivity to light or blurred vision
- Intense eye redness
- Symptoms that get worse or don't improve
- A weakened immune system, for example from HIV or cancer treatment
- Pre-existing eye conditions

A doctor can usually  
diagnose the cause  
of pink eye based  
on symptoms and  
patient history.

- Newborns with symptoms of pink eye should see a doctor right away.



PROTECT YOURSELF AND OTHERS FROM PINK EYE

- Wash your hands often with soap and water, and help young children do the same. Wash hands especially well after touching someone with pink eye or their personal items.
- Avoid touching or rubbing your eyes. This can worsen the condition or spread it to your other eye.
- Avoid sharing personal items, such as makeup, eye drops, towels, bedding, contact lenses and containers, and eyeglasses.
- Do not use the same eye products for your infected and non-infected eyes.
- Stop wearing contact lenses until your eye doctor says it's okay.
- Clean, store, and replace your contact lenses as instructed by your eye doctor.

[WWW.CDC.GOV/PINKEYE](http://WWW.CDC.GOV/PINKEYE)



# Gastrointestinal (GI) Illness

## Symptoms

Nausea, vomiting, diarrhea, abdominal cramps, fever, chills, body aches, headaches

## Exclusion

Refer to exclusion list!

## Reportable?

See exclusion list.



# Norovirus Exclusion

Infection or Condition	Common Signs and Symptoms	Exclusion for School/Daycare Children	Exclusion for Childcare Provider and/or Food Handler	Notes	Individual Cases Reportable to Health Department
Norovirus	Nausea, vomiting, diarrhea, abdominal cramps. May also have low grade fever, chills, body aches, headache.	Until 24-48 hrs. after symptoms resolve and fever free for 24 hours without fever reducing medication.	Exclude from cooking, preparing, and touching food 48-72 hrs. after symptoms resolve. Staff may perform duties not associated with food preparation 24 hrs. after symptoms resolve.	Exclusion time on a case-by-case basis after consultation with the local health department (i.e., during an outbreak).	

<sup>1</sup> An outbreak may be occurring if: several children who exhibit similar symptoms are in the same classroom, same wing or attended a common event. There is an increase in school absences with report of similar symptoms. Two or more students diagnosed with the same reportable disease. A single case of a highly infectious disease exists or is suspected to exist.





# GI Illnesses and Exclusions

Infection or Condition	Common Signs and Symptoms	Exclusion for School/Daycare Children	Exclusion for Childcare Provider and/or Food Handler	Notes	Individual Cases Reportable to Health Department
<b>E. coli – Shiga toxin producing <i>E. coli</i> (STEC)</b>	Nausea, vomiting, bloody diarrhea, abdominal cramps.	Daycare: Symptom free and two negative stools <sup>3,4</sup> . School: Symptom free.	Exclude from cooking, preparing, and touching food until symptom free and have two negative stool tests. <sup>3,4</sup>	Stools of all childcare staff, attendees, and household contacts with diarrhea, should be tested in outbreak situations.	Yes <sup>5</sup>
<b><i>Salmonella typhi</i> (typhoid fever)</b>	Fever, anorexia, lethargy, malaise, headache.	Fever free for 24 hours without fever reducing medication AND  Daycare: Symptom free and three negative stool tests <sup>3</sup> School: Symptom free.	Exclude from cooking, preparing, and touching food until symptom free and three negative stool tests. <sup>3</sup>	Stools of all childcare staff, attendees, and household contacts with diarrhea, should be tested in outbreak situations.	Yes <sup>5</sup>
<b><i>Salmonella non- typhoid</i></b>	Fever, nausea, vomiting, non-bloody diarrhea, abdominal cramps.	Symptom free <sup>4</sup>  Fever free for 24 hours without fever reducing medication.	Exclude from cooking, preparing, and touching food until symptom free and have two negative stool tests. <sup>3</sup>		Yes <sup>5</sup>
<b><i>Shigella</i></b>	Nausea, vomiting, diarrhea (may be bloody, and abdominal cramps.	Daycare: Symptom free and 2 negative stools <sup>3</sup> School: Symptom free.	Exclude from cooking, preparing, and touching food until symptom free and have two negative stool tests. <sup>3</sup>	Stools of all childcare staff, attendees, and household contacts with diarrhea, should be tested in outbreak situations.	Yes <sup>5</sup>
<b><i>Yersiniosis</i></b>	Fever, abdominal pain, diarrhea (sometimes bloody).	Until diarrhea has resolved.	Exclude from cooking, preparing, and touching food until diarrhea has resolved and they have one negative stool test. <sup>3</sup>		Yes <sup>5</sup>

<sup>1</sup> An outbreak may be occurring if: several children who exhibit similar symptoms are in the same classroom, same wing or attended a common event. There is an increase in school absences with report of similar symptoms. Two or more students diagnosed with the same reportable disease. A single case of a highly infectious disease exists or is suspected to exist.

<sup>3</sup> Negative stool specimens taken at least 24 apart and at least 48 hours after cessation of antibiotic treatment.

<sup>4</sup> During an outbreak negative stool specimens may be required before return to school and/or food handling.

<sup>5</sup> For specific reporting requirements refer to NJDOH Reporting Requirements <http://nj.gov/health/cd/reporting>



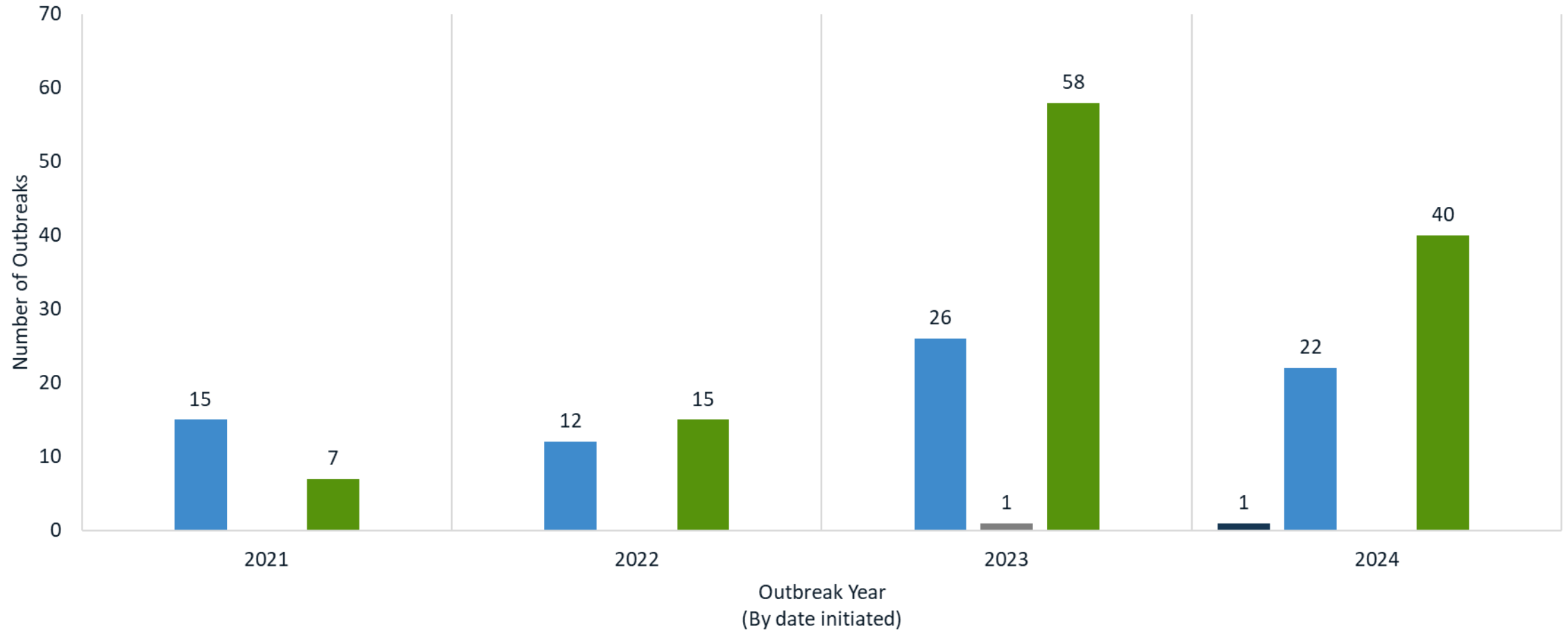
# GI Symptom Exclusions

Infection or Condition	Common Signs and Symptoms	Exclusion for School/Daycare Children	Exclusion for Childcare Provider and/or Food Handler	Notes	Individual Cases Reportable to Health Department
<b>Diarrhea Unspecified (organism/cause not identified or not yet determined)</b>	Defined by stool that is occurring more frequent or is less formed in consistency than usual in the child and not associated with changes of diet.	<p>Exclude children whose stool frequency exceeds 2 above normal per 24 hours for that child.</p> <p>Exclude diapered children whose stool is not contained in the diaper and toilet-trained children if diarrhea is causing "accidents."</p> <p>Until diarrhea has ceased for 24 hours (e.g., last episode Monday at noon, child may return on Wednesday).</p>	Exclude from cooking, preparing, and touching food until 24 hrs. after symptoms resolve.	<p>See norovirus.</p> <p>Medical evaluation for stools with blood or mucus.</p>	
<b>Fever (only)</b>	<p>Elevation of normal body temperature.</p> <p>Body temperature <math>\geq 100.4^{\circ}\text{F}</math> (<math>38^{\circ}\text{C}</math>) from any site</p>	Until fever free for 24 hours without fever reducing medication.			
<b>Vomiting</b>	Children with vomiting from an infection often have diarrhea and sometimes fever.	If vomiting more than 2 times in the previous 24 hours and is not from a known non-communicable condition (e.g., gastroesophageal reflux).	Exclude from cooking, preparing, and touching food until 24 hrs. after symptoms resolve.	See norovirus.	

<sup>1</sup> An outbreak may be occurring if: several children who exhibit similar symptoms are in the same classroom, same wing or attended a common event. There is an increase in school absences with report of similar symptoms. Two or more students diagnosed with the same reportable disease. A single case of a highly infectious disease exists or is suspected to exist.



## Gastroenteritis (norovirus) outbreaks in NJ educational settings March 2021 - October 2024



N=197

Current to 11/01/2024\*

■ Camp ■ Daycare Facility ■ Institutes of Higher Education ■ School or University ■ Sports Team

\*Data is preliminary and is subject to change.

What is the best way to prevent the spread of norovirus?

 POLL

1

Alcohol-based hand sanitizer

2

Baby wipes

3

Soap & water

4

All of the above

5

None of the above



# Prevention of Norovirus Outbreaks in Schools and Childcare Settings

## *Control Measures*

### Exclusion

- Children and staff who are experiencing symptoms of norovirus should stay home from school or daycare until **24-48 hours**<sup>1</sup> after symptoms are resolved (e.g., 24-hour exclusion, last episode Monday at noon, child may return on Wednesday).
- Staff involved in food preparation should be restricted from preparing food for **48-72 hours**<sup>1</sup> after symptoms have resolved. The staff may perform other duties not associated with food preparation 24 hours after symptoms have stopped.
- Ill persons should be excluded from swimming until at least **48 hours** after their symptoms have ended.

### Hand Hygiene

- Hands should be washed with warm water and soap for at least 20 seconds.
- Hand sanitizer alone does not work well against norovirus.
- Children should be taught good hygiene practices and should wash their hands after using the bathroom (or diaper change), before eating, and after coughing or sneezing.
- Staff, especially those caring for diapered children, should wash their hands after using the restroom, changing diapers, sneezing or coughing, cleaning up vomit or diarrhea, handling soiled items, or helping students in the restroom. They should also wash hands before eating, preparing or serving food, or feeding children.

### Cohorting

- To limit the spread of infection, try to keep all staff who worked with sick students, in the same classroom or area if possible. For example, if there is an outbreak in the toddler room, keep the same staff working in the toddler room until the outbreak is over, rather than allowing them to work in another room or area.
- Ill students should be held in an isolated area until they are picked up. Sick persons should not be sitting in common areas such as hallways.
- In settings such as boarding schools or college dormitories, sick students should use separate toilets and be housed separately from well students if possible.



# Norovirus Prevention

## Housekeeping:

Norovirus is highly contagious. The virus can live on surfaces for up to 12 days and has a very low infective dose (<100 viral particles). Proper environmental control measures are essential to preventing infection.



# General Guidelines For The Prevention And Control Of Outbreaks In Educational Settings

## **Guidance for Clean-up of Vomit or Feces**

Ideally, schools should maintain separate supplies (such as buckets) for cleaning these types of accidents, and refrain from using supplies that are used for routine cleaning.

Disposable masks, aprons/gown, shoe covers, and eye shields should be worn if they are available. At a minimum, the person cleaning should wear disposable single-use gloves.

The following procedure should be used to clean vomit or feces.

- Cordon off a 10-foot range in the area where the incident occurred until it is cleaned. If the incident occurred in the kitchen, cordon off a 25-foot range.
- Clean areas soiled with vomit or feces promptly after the incident occurs.
  - Vomit and diarrhea should be removed carefully to minimize airborne particles. Using disposable absorbent material (e.g., cloth, paper towels, kitty litter, baking soda) soak up vomit and diarrhea. Do not vacuum material; using gloves, pick it up using paper towels. Dispose of all waste in a plastic trash bag or biohazard bag, immediately close, and dispose of the bag.
  - Then, use soap and water to wash and rinse the area or object. Wipe dry with paper towels. Dispose of all waste in a plastic trash bag or biohazard bag, immediately close, and dispose of the bag.

# Keeping Your Facility Clean



Information about listed products is current as indicated by the dates on the lists.

- [EPA's Registered Antimicrobial Products Effective as Sterilizers \[List A\]](#)
- [EPA's Registered Antimicrobial Products Effective Against \*Mycobacterium tuberculosis\* \(TB\) \[List B\]](#)
- [EPA's Registered Antimicrobial Products Effective Against Norovirus \(Feline calicivirus\) \[List G\]](#)
- [EPA's Registered Antimicrobial Products Effective Against Methicillin-resistant \*Staphylococcus aureus\* \(MRSA\) and/or Vancomycin Resistant \*Enterococcus faecalis\* or \*faecium\* \(VRE\) \[List H\]](#)
- [EPA's Registered Antimicrobial Products for Medical Waste Treatment \[List J\]](#)
- [EPA's Registered Antimicrobial Products Effective Against \*Clostridium difficile\* Spores \[List K\]](#)
- [EPA's Registered Antimicrobial Products Effective Against Ebola Virus \[List L\]](#)
- [EPA's Registered Antimicrobial Products Effective Against Avian Influenza \[List M\]](#)
- [Disinfectants for Use Against SARS-CoV-2 \[List N\]](#)
- [Disinfectants for Use Against Rabbit Hemorrhagic Disease Virus \(RHDV2\) \[List O\]](#)
- [EPA's Registered Antimicrobial Products Effective Against \*Candida auris\* \[List P\]](#)
- [Disinfectants for Emerging Viral Pathogens \(EVPs\) \[List Q\]](#)
- [EPA's Registered Antimicrobial Products Effective Against Bloodborne Pathogens \(HIV, Hepatitis B and Hepatitis C\) \[List S\]](#)





# Norovirus Prevention During an Outbreak

## *Food Service*

Norovirus is often spread through contaminated food or water. Facilities serving or sharing food should take these extra precautions:

- Exclude ill food handling staff from work until at least 48 hours after symptoms have ended.
- Require food handling staff to wear personal protective equipment (such as disposable gloves) while handling, serving, or preparing food.
- Ensure that clean water, soap, and paper towels are available in dining areas, and other areas where eating may occur.
- Restrict sharing of foods brought from private homes.
- Restrict students' sharing of any communal food items in classrooms. Instead, the teacher should hand out items to be shared after washing his/her hands.
- Stop using self-service food bars. Do not let children serve themselves in any manner which might promote direct hand contact with shared foods.
- Limit the use of shared dining items, such as serving utensils, water pitchers, salt and pepper shakers, and cups.



# NOROVIRUS

## Information for Childcare Centers & Schools

### What is norovirus?

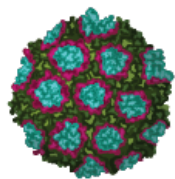
Also known as “the stomach bug,” norovirus is a very contagious virus that spreads quickly and easily.



### Peak Season

Norovirus can spread at any time, but most people get sick from November to April.

### Common symptoms:



- Diarrhea
- Vomiting
- Stomach pain
- Nausea

### How It Spreads

- Direct contact with someone with the virus
- Contaminated food, water, or surfaces



### PRECAUTIONS



#### Wash Your Hands

Wash your hands with warm water and soap. Hand sanitizers don't work well against norovirus.



#### Stay Home

If you get norovirus, stay home from school/work for 24-48 hours after symptoms are gone.\*\*



#### Keep It Clean

Regularly clean and disinfect commonly used areas/surfaces.\*



#### Preparing Food

Do not prepare food for others until 48-72 hours after symptoms have resolved.\*\*

### Report suspected or confirmed outbreaks of norovirus to your local health department.

New Jersey Department of Health information about:



Norovirus



School Health

\*Environmental Protection Agency's list of products effective against norovirus (List G):



\*\*Exclusion times may vary during outbreaks; contact your local health department.



# NOROVIRUS

## Consejos y datos importantes para las guarderías y escuelas

### ¿Qué es el norovirus?

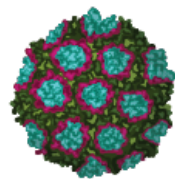
También conocido como “el virus estomacal,” el norovirus es un virus muy contagioso que se propaga fácil y rápidamente.



### Temporada

El norovirus puede propagarse en cualquier época del año, pero es más común enfermarse entre noviembre y abril.

### Síntomas más comunes:



- Diarrea
- Vómito
- Stomach pain
- Nausea

### Propagación

- Por contacto directo
- Por medio del consumo de agua o comida contaminada
- Tocando superficies contaminadas



### Prevención



#### Lávese las manos

Lávese las manos con agua tibia y jabón. El alcohol en gel no es tan efectivo contra el norovirus como el agua y el jabón.



#### Quédese en casa

Si está enfermo con el norovirus, no vaya a la escuela o al trabajo. Quédese en casa 24 a 48 horas hasta que sus síntomas desaparezcan.\*\*



#### Limpiar y desinfectar

Limpe y desinfecte las áreas comunes con frecuencia.\*



#### Preparación de Alimentos

Espere 48 a 72 horas después de que desaparezcan los síntomas, antes de preparar alimentos.\*\*

### Reporte los brotes de norovirus, ya sean presuntos o confirmados, a su departamento de salud local.

Información del Departamento de Salud de Nueva Jersey sobre:



El norovirus



La salud escolar

\*Lista de productos efectivos contra el norovirus de la Agencia de Protección Ambiental (“List G”):



\*\*El tiempo de exclusión puede variar durante los brotes del virus. Contacte a su departamento de salud local.

# Additional Norovirus Resources



- [Have You Ever Heard of Norovirus? – YouTube](#)
- [Clean Up After Someone with Norovirus Vomits or has Diarrhea – YouTube](#)
- [Communications References](#)

# POLL

Staff can return to work after norovirus symptoms resolve after \_\_\_\_\_ hours, but should be restricted from preparing or serving food for \_\_\_\_\_ hours.



*Hint!*

- 1 48 | 72
- 2 24 | 48-72
- 3 12 | 72
- 4 0 | 0
- 5 None of the above



# POLL

Have you seen any of these illnesses in your educational setting this year?

*(choose all that apply)*

- ☐ Hand, Foot, & Mouth Disease
- ☐ Conjunctivitis
- ☐ Fifth Disease
- ☐ Gastrointestinal illness

## Recipe for a Safe and Festive Holiday

- Stay home if you are sick
- Wash or sanitize hands frequently
- Cover coughs & sneezes
- Get the most up-to-date vaccines
- Visit CDC for more information



## DON'T BRING A BUG TO THE PARTY



Stay home if you are sick



Wash or sanitize hands frequently



Stay up to date on vaccines



Cover coughs and sneezes



# Thank you!



[nj.gov/health](https://nj.gov/health)