

## SPECIFIC DISEASE EXCLUSION GUIDELINES FOR CHILDCARE

See individual [fact sheets](#) for exclusion and other information on the diseases listed below.

<b>Acute Bronchitis (Chest Cold)/Bronchiolitis</b>	Until fever is gone and the child is well enough to participate in routine activities.
<b>Campylobacteriosis</b>	<p>Until diarrhea has stopped. Children who have <i>Campylobacter</i> in their stools but who do not have symptoms do not need to be excluded.</p> <p>Everyone with <i>Campylobacter</i> should NOT use swimming beaches, pools, spas, water parks, or hot tubs until 2 weeks after diarrhea has stopped.</p> <p>Staff with <i>Campylobacter</i> may be restricted from working in food service. Call your local health department to see if these restrictions apply.</p>
<b>Chickenpox</b>	<p>Until all the blisters have dried into scabs; usually by day 6 after the rash began.</p> <p>It takes 10 to 14 days after receiving vaccine to develop immunity. Vaccine failure occasionally occurs. The incubation period is 10 to 21 days. Therefore, exclude children who:</p> <ul style="list-style-type: none"><li>• appear to have chickenpox <u>regardless</u> of whether or not they have received varicella vaccine, or</li><li>• develop blisters within 10 to 21 days after vaccination.</li></ul> <p>Chickenpox can occur even if someone has had the varicella vaccine. These are referred to as “breakthrough infections” and are usually less severe and have an atypical presentation. The bumps rather than blisters may be present; therefore, scabs may not present. These cases should be excluded until all bumps/blisters/scabs (sores) have faded and no new sores have occurred within a 24-hour period, whichever is later. Sores do not need to be completely resolved.</p> <p>Although extremely rare, the vaccine virus has been transmitted to susceptible contacts by vaccine recipients who develop a rash following vaccination. Therefore, exclude vaccine recipients who develop a rash after receiving varicella vaccine, using the above criteria.</p>
<b>Conjunctivitis (Pinkeye)</b>	<p><b>Purulent Conjunctivitis</b> (redness of eyes and/or eyelids with thick white or yellow eye discharge and eye pain): Until examined by a healthcare provider and approved for readmission.</p> <p><b>Nonpurulent conjunctivitis</b> (redness of eyes with a clear, watery eye discharge but without fever, eye pain, or eyelid redness): None.</p>
<b>Croup</b>	Until fever is gone and the child is well enough to participate in routine activities.

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<b>Cryptosporidiosis</b>	<p>Until diarrhea has stopped.</p> <p>Everyone with <i>Cryptosporidium</i> should NOT use swimming beaches, pools, water parks, spas, or hot tubs for 2 weeks after diarrhea has stopped.</p> <p>Staff with <i>Cryptosporidium</i> may be restricted from working in food service. Call your local health department to see if these restrictions apply.</p>
<b>Cytomegalovirus (CMV) Infection</b>	<p>None.</p>
<b>Diarrhea (Infectious)</b>	<p>Until diarrhea has stopped. The length of time may vary depending on the germ. For some infections, the person must also be treated with antibiotics or have negative stool tests before returning to childcare. (See fact sheet for specific organism when known.)</p> <p>Everyone with diarrhea should NOT use swimming beaches, pools, water parks, spas, or hot tubs for at least 72 hours after diarrhea has stopped. (See specific disease information for additional times.)</p> <p>Staff with diarrhea may be restricted from working in food service. Call your local health department to see if these restrictions apply.</p>
<b><i>E. coli</i> O157:H7 Infection</b>	<p>Until two stool cultures obtained at least 24 hours apart have tested negative for <i>E. coli</i> O157:H7.</p> <p>Everyone with <i>E. coli</i> O157:H7 should NOT use swimming beaches, pools, water parks, spas, or hot tubs until 2 weeks after diarrhea has stopped.</p> <p>Staff with <i>E. coli</i> O157:H7 may be restricted from working in food service. Call your local health department to see if these restrictions apply.</p>
<b>Enteroviral Infection</b>	<p>Until diarrhea and/or vomiting has stopped.</p> <p>None, for mild, cold-like symptoms, as long as the child is well enough to participate in routine activities.</p>
<b>Fifth Disease (Parvovirus)</b>	<p>None, if other rash-causing illnesses are ruled out by a healthcare provider. Persons with fifth disease are no longer infectious once the rash begins.</p>
<b>Giardiasis</b>	<p>Children infected with <i>Giardia</i> who have symptoms should be excluded until 24 hours after treatment has been started and diarrhea has stopped. Children who have <i>Giardia</i> in their stools but who have no symptoms do not need to be excluded.</p> <p>Everyone with <i>Giardia</i> should NOT use swimming beaches, pools, spas, water parks, or hot tubs for 2 weeks after diarrhea has stopped.</p>

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<b>Giardiasis (Continued)</b>	Staff with <i>Giardia</i> may be restricted from working in food service. Call your local health department to see if these restrictions apply.
<b>Haemophilus influenzae type B (Hib) Disease</b>	Until the child has been treated and is well enough to participate in routine activities.
<b>Hand, Foot, and Mouth Disease</b>	Until fever is gone and child is well enough to participate in routine activities (sores or rash may still be present).
<b>Head Lice</b>	Until first treatment is completed and no live lice are seen. Nits are NOT considered live lice.
<b>Hepatitis A</b>	Consult with your local or state health department. Each situation must be looked at individually to decide if the person with hepatitis A can spread the virus to others.
<b>Hepatitis B</b>	None, unless the hepatitis B-infected child has unusually aggressive behavior (e.g., biting) that cannot be controlled, oozing sores that cannot be covered, or bleeding problems. A team of medical experts should assess on a case-by-case basis to determine whether exclusion from some activities is necessary.
<b>Hepatitis C</b>	None, unless the hepatitis C-infected child has oozing sores that cannot be covered or bleeding problems. A team of medical experts should assess on a case-by-case basis to determine whether exclusion from some activities is necessary.
<b>Herpes, Oral</b>	Primary infection: Until those children who do not have control of their oral secretions no longer have active sores inside the mouth. Recurrent infections (fever blisters and cold sores): None.
<b>HIV/AIDS</b>	If a child with HIV infection has unusually aggressive behavior (e.g., biting) that cannot be controlled, oozing sores that cannot be covered, or bleeding problems.
<b>Impetigo</b>	If impetigo is confirmed by a healthcare provider, until 24 hours after treatment and sores are drying or improving.
<b>Influenza</b>	Until fever is gone and the child is well enough to participate in routine activities.
<b>Measles</b>	Until 4 days after the rash appears. A child with measles should not attend <u>any activities</u> during this time period.  Exclude unvaccinated children and staff, who are not vaccinated within 72 hours of exposure, for at least 2 weeks after the onset of rash in the last person who developed measles.
<b>Meningococcal Disease</b>	Until the child has been on appropriate antibiotics for at least 24 hours and is well enough to participate in routine activities.

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<b>Methicillin-Resistant <i>Staphylococcus aureus</i> (MRSA)</b>	<p>If draining sores are present and cannot be completely covered and contained with a clean, dry bandage or if a person cannot maintain good personal hygiene.</p> <p>Children who are only colonized do not need to be excluded.</p> <p><u>Activities:</u> Children with draining sores should not participate in any activities where skin-to-skin contact is likely to occur until their sores are healed. This means no contact sports.</p>
<b>Molluscum Contagiosum</b>	<p>None. Encourage parents/guardians to cover bumps with clothing when there is a possibility that others will come in contact with the skin. If not covered by clothing, cover with a bandage.</p> <p><u>Activities:</u> Exclude any child with bumps that cannot be covered with a water tight bandage from participating in swimming or other contact sports.</p>
<b>Mononucleosis</b>	<p>None, as long as the child is well enough to participate in routine activities. Because students/adults can have the virus without any symptoms, and can be contagious for such a long time, exclusion will not prevent spread.</p>
<b>Mumps</b>	<p>Until 5 days after swelling begins.</p> <p>Exclude unvaccinated children and staff if two or more cases of mumps occur. Exclusion will last through at least 25 days after the onset of parotid gland swelling in the last person who developed mumps. Once vaccinated, students and staff can be readmitted.</p>
<b>Norovirus</b>	<p>Until diarrhea and vomiting have stopped.</p> <p>Everyone with vomiting and/or diarrhea should NOT use pools, swimming beaches, water parks, spas, or hot tubs for at least 72 hours after diarrhea and/or vomiting symptoms have stopped.</p> <p>Staff must avoid food preparation when diarrhea and vomiting are present and for at least 72 hours after diarrhea and/or vomiting have stopped. Call your local health department to see if these restrictions apply.</p>
<b>Parapertussis</b>	<p>None, if the child is well enough to participate in routine activities.</p>
<b>Pertussis (Whooping Cough)</b>	<p>Until 5 days after appropriate antibiotic treatment begins. During this time the person with pertussis should NOT participate in any childcare or community activities. If not treated with 5 days of antibiotics, exclusion should be for 21 days after cough onset.</p> <p>If there is a high index of suspicion that the person has pertussis, exclude until 5 days of antibiotics are completed or until the laboratory test comes back negative.</p>

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<b>Pinworms</b>	None.
<b>Pneumococcal Infection</b>	None, if the child is well enough to participate in routine activities.
<b>Pneumonia</b>	Until fever is gone and the child is well enough to participate in routine activities.
<b>Respiratory Infection (Viral)</b>	Until fever is gone and the child is well enough to participate in routine activities.
<b>Respiratory Syncytial Virus (RSV) Infection</b>	Until fever is gone and the child is well enough to participate in routine activities.
<b>Ringworm</b>	<p>Until treatment has been started or if the lesion cannot be covered. Or if on the scalp, until 24 hours after treatment has been started.</p> <p>Any child with ringworm should not participate in gym, swimming, and other close contact activities that are likely to expose others until 72 hours after treatment has begun or the lesions can be completely covered.</p>
<b>Roseola</b>	Until the fever is gone and other rash illnesses, especially measles, have been ruled out.
<b>Rotaviral Infection</b>	Until diarrhea has stopped.
<b>Rubella (German Measles)</b>	<p>Until 7 days after the rash appears.</p> <p>Exclude unvaccinated children and staff in which a case of rubella occurs for at least 3 weeks after the onset of rash in the last reported person who developed rubella.</p>
<b>Salmonellosis</b>	<p>Until diarrhea has stopped. Children who have <i>Salmonella</i> in their stools but who do not have symptoms do not need to be excluded.</p> <p>Everyone with <i>Salmonella</i> should NOT use swimming beaches, pools, water parks, spas, or hot tubs until 2 weeks after diarrhea has stopped.</p> <p>Staff with <i>Salmonella</i> may be restricted from working in food service. Call your local health department to see if these restrictions apply.</p>
<b>Scabies</b>	Until 24 hours after treatment begins.
<b>Shigellosis</b>	<p>Until 24 hours after treatment with antibiotics has been started and diarrhea has stopped. Children who have <i>Shigella</i> in their stools but who do not have symptoms may need to be treated, but do not need to be excluded.</p> <p>Everyone with <i>Shigella</i> should NOT use swimming beaches, pools, water parks, spas, or hot tubs until 2 weeks after diarrhea has stopped.</p> <p>Staff with <i>Shigella</i> may be restricted from working in food service. Call your local health department to see if these restrictions apply.</p>

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**Shingles (Zoster)** None, if blisters can be completely covered by clothing or a bandage. If blisters **cannot** be covered, exclude until the blisters have crusted. Persons with severe, disseminated shingles should be excluded regardless of whether the sores can be covered.

**Staph Skin Infection** If draining sores are present and cannot be completely covered and contained with a clean, dry bandage or if the person cannot maintain good personal hygiene.

Children who are only colonized do not need to be excluded.

Activities: Children with draining sores should not participate in activities where skin-to-skin contact is likely to occur until their sores are healed. This means no contact sports.

**Streptococcal Infection (Strep Throat/Scarlet Fever)** Until 24 hours after antibiotic treatment begins and until the child is without fever.

Children without symptoms, regardless of a positive throat culture, do not need to be excluded from childcare. Persons who have strep bacteria in their throats and do not have any symptoms (carriers) appear to be at little risk of spreading infection to those who live, attend childcare, or work around them.

**Tuberculosis (TB)** Consult with your local or state health department. Each situation must be evaluated individually to determine whether the person is contagious and poses a risk to others. A person with a positive tuberculin skin test (TST) but without symptoms should not be excluded, but should see a healthcare provider as soon as possible after the positive test is detected for further evaluation and possible treatment for latent TB infection.

**Viral Meningitis** Until the fever is gone or diarrhea has stopped and the child is well enough to participate in routine activities.

**Warts** None.

**Yeast Infection (Candidiasis)** None.

### **Other communicable diseases**

Consult your local or state health department or the child's healthcare provider regarding exclusion guidelines for other infections not described in this manual. Special exclusion guidelines may be recommended in the event of an outbreak of an infectious disease in a childcare setting. **Consult your local or state health department when there is more than one case of a communicable disease.**

For more information, call Hennepin County HSPHD-Epidemiology at (612) 543-5230 or call your local health department.