



Communicable Disease Chart for Alabama's Schools and Childcare Facilities

	COMMUNICABLE DISEASE	NOTIFIABLE DISEASE	SIGNS AND SYMPTOMS	EXCLUSION AND READMISSION CRITERIA
Gastrointestinal	Gastrointestinal, Bacterial <ul style="list-style-type: none"> Campylobacteriosis Salmonellosis Shigellosis <i>E.coli</i> (STEC) 	Yes	Person with mild to severe diarrhea may have additional symptoms such as abdominal cramps, vomiting, fever, bloody stools, or nausea.	Exclude until symptom free for 24 hours. <i>E. coli</i> (STEC) and Shigellosis - 2 stool cultures, collected \geq 24 hours apart, which do not detect the organism.
	Gastrointestinal, Parasitic <ul style="list-style-type: none"> Cryptosporidium Giardiasis 	Yes	Person with acute non-bloody diarrhea may have additional symptoms such as abdominal cramps, vomiting, fever, fatigue, or nausea.	Exclude until symptom free for 24 hours. No swimming for at least 2 weeks after symptoms resolve.
	Gastrointestinal, Viral <ul style="list-style-type: none"> Norovirus Rotavirus 	No, unless outbreak-associated	Acute onset of vomiting and/or diarrhea, possible nausea, abdominal cramps, low-grade fever, headache, fatigue, and myalgia	Norovirus: Exclude until symptom free for 48 hours. Rotavirus: Exclude until symptom free for 24 hours.
	Hepatitis A **	Yes	Loss of appetite, fever, abdominal discomfort, nausea, fatigue, headache, dark brown urine, or yellowing of skin or eyes. Young children may be symptom free.	Exclude for 7 days after onset of illness, until the post exposure prophylaxis program has been completed or as directed by the health department. Consult local health department for more information.
	<i>Clostridium difficile</i> Infection	No, unless outbreak-associated	Mild to moderate diarrhea, possible nausea, abdominal cramps, low-grade fever.	Exclude until symptom free for 48 hours.
Eye, Ear, Nose and Throat	Gingivostomatitis (Cold Sores / Coxsackie)	No, unless outbreak-associated	Fever, irritability, sores in mouth, gums, or lips.	Exclude children who do not have control of oral secretion and until sores have healed. Coxsackie – exclude until fever, diarrhea, and vomiting free for 24 hours.
	Common Cold (multiple viruses)	No, unless outbreak-associated	Sore throat, runny nose, sneezing, fever, chills, generalized discomfort.	Exclude until fever subsides and exercise droplet precautions.
	Mononucleosis (Mono, Epstein-Barr Virus)	No, unless outbreak-associated	Fever, sore throat, swollen lymph nodes, fatigue.	Exclude from contact sports and consult physician for clearance to participate in sports.
	Mumps **	Yes	Swelling of one or more of the salivary glands, headache, low grade fever, and myalgia, anorexia and fatigue.	Exclude for 5 days after onset of swelling. <i>*If two or more cases of mumps occur, public health will inform unvaccinated children and staff members how long they will need to stay home.</i>
	Pink Eye (Bacterial or viral conjunctivitis)	No, unless outbreak-associated	Red/pink itchy, swollen eyes; eye discharge; possible light sensitivity; and / or eye pain.	Exclude if child has a white or yellow drainage coming from the eye or eye pain and until evaluated by a physician.
	Strep Throat and Scarlet Fever (Streptococcal pharyngitis)	No, unless outbreak-associated	Strep throat: Fever, red sore throat, swollen glands, strawberry tongue (occurs following peeling of a white coating from tongue) Scarlet Fever: A very fine raised rash (feels like sandpaper) is present on the neck, chest, elbow and groin.	Exclude until 24 hours after beginning appropriate antimicrobial therapy and child feels well.
Respiratory	Influenza ** (Flu, seasonal)	No, unless outbreak-associated or pediatric death	Fever, chills, body aches, cough, runny or stuffy nose, sore throat, headache, and /or myalgia.	Exclude until fever free for 24 hours and child is well enough for routine activities.
	Pertussis ** (Whooping cough)	Yes	Runny nose, sneezing, low grade fever, and mild to occasional cough. A pause in breathing may be noted in infants with coughing spasms. Pertussis is known for uncontrollable, violent coughing which often makes it hard to breathe.	Exclude until 5 days of recommended antibiotics and 21 days from onset of cough for those who do not take antibiotics.
	Tuberculosis (Pulmonary)	Yes	Fatigue, significant weight loss, fever, night sweats, cough that may produce blood, and chest pain. Children may have no symptoms.	Exclude until public health evaluates the situation. Child will need to see a healthcare provider as soon as possible. No exclusion for latent TB infection.

Skin and Rash	Chickenpox ** (Varicella, varicella zoster virus)	Yes	Itchy fluid filled blisters that begin on face, chest, and back then spreads to the rest of the body.	May return when rash has crusted or, in immunized people without crusts, until no new lesions appear within a 24 hours period. For children with zoster whose lesions cannot be covered, can return after the lesions have crusted.
	Fifth Disease (Human Parvovirus, erythema infectiosum)	No, unless outbreak-associated	Facial rash that can be intensely red with a “slapped cheek” appearance, fever, fatigue, myalgia, headache, a systemic macular- lace like and often pruritic rash on trunk that moves peripherally to arms, buttocks, and thighs.	No exclusion is necessary if the child is healthy enough for routine activities because the period of contagion occurs before rash is evident.
	Hand, foot, and mouth disease (Coxsackie virus)	No, unless outbreak-associated	Fever, sore throat, poor appetite, vague feeling of illness, skin rash, flat or raised red spots usually on the palms of hands, soles of feet and may appear on knees elbows, bottom, or genital area.	Exclude until child is free of fever, diarrhea and vomiting for at least 24 hours.
	Head Lice (Pediculosis)	No, unless outbreak-associated	Itching of the head and neck. Visible crawling lice in the hair.	Exclude until first head lice treatment is completed.
	Impetigo (<i>Staphylococcus aureus</i>) or Group A <i>Streptococcus</i>	No, unless outbreak-associated	Rash anywhere on the skin but most often on the face, lips, arms, or legs; that spread to other areas. Itchy blisters filled with yellow or honey colored fluid that oozes then dries and crust over.	Exclude until 24 hours of treatment has been initiated. Lesions on exposed skin should be covered with watertight dressing.
	Measles ** (Rubeola)	Yes	High fever , red eyes, runny nose, and cough. A rash appears 3 to 5 days after initial symptoms.	Exclude until 4 days after rash appears.
	MRSA (Methicillin-resistant <i>staphylococcus aureus</i>)	No, unless outbreak-associated	Bump or infected area that is red, swollen, painful, warm to the touch with or without pus and drainage. Common sites are legs, buttocks, groin, back of the neck, sites of skin trauma, such as cuts or abrasions.	Exclude only if skin lesions are draining and cannot be completely covered with a watertight bandage.
	Ringworm (Fungal infection, tinea, dermatophytosis)	No, unless outbreak-associated	Fungus that may affect skin on almost any part of the body as well as finger and toe nails. Ring shaped, itchy, red, scaly, rash, may develop. There may also be cracked skin and hair loss if the infection develops on the scalp.	Exclude until after treatment begins. Cover lesions with waterproof dressing.
	Roseola (Human herpes virus 6)	No, unless outbreak-associated	High fever, red raised rash which appears once fever has resolved.	Exclude until fever is gone and other rash illnesses have been ruled out.
	Rubella ** (Rubella virus, German Measles)	Yes	Low grade fever (less than 101) and rash that starts on the face and spreads to the rest of the body.	Exclude until 7 days after the rash appears.
	Scabies (<i>Sarcoptes scabiei</i>)	No, unless outbreak-associated	Intense itching especially at night, pimple or tiny blister-like scaly rash which may affect much of the body. Common in between fingers, and around wrists, elbows, armpits, and knees.	Exclude until 24 hours after treatment has been completed.
	Shingles *** (Herpes zoster, varicella zoster virus)	No, unless outbreak-associated	Painful rash on one side of the face or body; Blisters form and typically scab over in 7-10 days; Fever, headache, chills, and upset stomach	Exclude only if sores cannot be completely covered by a bandage or clothing; if not exclude until sores have crusted and are dry
Meningitis or other invasive infections	<i>Haemophilus influenzae</i> (<i>Haemophilus influenzae</i>)	Yes	Fatigue, fever, stiff neck, lack of appetite, chill, headache, nausea, vomiting, and irritability.	Exclude until after 24 hours of initiation of physician treatment. Public health will advise regarding management.
	Meningococcal Disease (<i>Neisseria meningitidis</i>)	Yes	Fever, chills, confusion, stiff neck, lack of appetite, fatigue, myalgia, limb pain, and sometimes a rash.	Exclude until child has been on antibiotics for at least 24 hours. Public health will advise regarding management.
	Pneumococcal Disease (<i>Streptococcus pneumoniae</i>)	Yes	Ear infection, fever, ear pain, chills, behavior or appetite changes, ear redness or drainage.	Exclude until at least 24 hours after beginning antibiotic therapy. Close contact with other children should be avoided. Public health will advise regarding management.

Notifiable Disease Reporters

All physicians, dentists, nurses, medical examiners, hospital administrators, nursing home administrators, lab directors, school principals, and childcare directors are responsible for reporting Notifiable Diseases in Alabama. Notifiable Disease reporters must report "Outbreaks of any kind" to the Infectious Diseases & Outbreaks Division within 24 hours.

*An outbreak is defined as two or more similarly ill persons who live in different households and have a common exposure. Please visit www.adph.org/epi or call 1-800-338-8374 for more information.

**All unvaccinated persons should be excluded until vaccination received or risk of transmission is over.

*** Shingles is only vaccine preventable if over 60 years of age.

References:

Control of Communicable Diseases Manual, 20th Edition. 2015. American Public Health Association.

Managing Infectious Diseases in Childcare and Schools: A Quick Reference Guide, 3rd edition. 2013. American Academy of Pediatrics.

Red Book. 2015 Report of the Committee on Infectious Diseases, 30th edition. American Academy of Pediatrics.