

Childhood Communicable Diseases

Guidelines & Information



Algoma

PUBLIC HEALTH

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Introduction

The role of public health in [infectious disease](#) is to maintain a healthy community by the prevention and control of communicable diseases. This is achieved by surveillance and investigation of infectious diseases and public education.

The purpose of this document *Guidelines and Information on Childhood Communicable Diseases* is to provide a quick reference to those diseases commonly experienced by children. For each disease, we provide a description, signs and symptoms, how it is spread, when it is spread, tips for preventing spread, and guidance on when the child can return to school.

The Health Protection and Promotion Act (HPPA) outlines the communicable diseases that are [designated diseases of public health significance](#) in the province of Ontario.

For more information about infectious diseases, you can visit:

- [Algoma Public Health](#)
- [Public Health Ontario](#)
- [Public Health Agency of Canada](#)

Stop the Spread

Specific ways to prevent contact and spread of each disease can be found throughout this document. To help stop the spread of infectious disease, here are a few healthy habits that you can practice today:

- [Wash your hands.](#)
- Practice cough and sneeze etiquette.
- Practice [food safety](#).
- Do not share drinks, utensils, or personal items.
- Keep surfaces clean.
- Stay home when you are sick.
- Stay up to date on your [immunizations](#).
- Visit your health care provider to see if treatment is required (i.e., antibiotics, antifungals).

Key Definitions

Incubation Period: The incubation period refers to the period of time between infection and the onset of symptoms. (*National Collaborating Centre for Infectious Disease*)

Signs: evidence of disease perceptible to the examining practitioner (i.e., something they can see) (*National Library of Medicine*)

Symptoms: subjective evidence of a disease apparent to the patient (i.e., something you experience) (*National Library of Medicine*)

Exclusion: When a child is not allowed to attend school

Chicken Pox

(Varicella-zoster virus)

What is it?	<ul style="list-style-type: none"> • A very common infection in childhood caused by the varicella virus which is usually mild in illness. • Most adults have already had chicken pox and will not get it again.
What are the signs and symptoms?	<ul style="list-style-type: none"> • Begins with a slight fever followed by an itchy rash • Small red spots turn into fluid-filled blisters • Blisters break and form a crust which become scabs • Scabs fall away between the ninth and thirteenth day • Incubation period = 10-21 days
How is it spread?	<ul style="list-style-type: none"> • Easily from person to person through the air by coughing or sneezing. • Direct contact with fluid from the blisters or respiratory secretions
When is it contagious?	<ul style="list-style-type: none"> • A person is contagious 1-2 days before sores appear and up until 5 days after sores appear or until all sores are dry and crusted • Susceptible people can be contagious from 10 days following exposure until the incubation period has ended at 21 days
How can we prevent contact and spread?	<ul style="list-style-type: none"> • Chicken pox can be prevented by immunization • Determine presence of the immuno-compromised, newborns or pregnant women • Refer to family physician
Should I report it?	<ul style="list-style-type: none"> • Yes
Can the child come to school?	<ul style="list-style-type: none"> • No, the child should be excluded • A child with mild illness should be allowed to return to school or childcare as soon as they are well enough to participate normally in all activities (regardless of the state of the rash) • Mild chickenpox is defined as having a low fever for a short period of time and only a little rash (less than 30 spots). Children with chickenpox who have a fever and/or the ongoing development of many new rash spots are not well and should not be at school or at daycare
Other important notes	<ul style="list-style-type: none"> • Heat makes rash worse and increases itchiness • Wear light, loose-fitting clothing • Do not give aspirin for fever because of the possibility of Reye's Syndrome • Parents of other children in the school/childcare facility, particularly parents of immunosuppressed children (i.e. Cancer, HIV), should be notified that chickenpox is in the class/ school/ childcare, as directed by APH

For more information: [Algoma Public Health Chicken Pox Information Sheet](#)

Diarrhea/Vomiting <i>(Gastroenteritis)</i>	
What is it?	<ul style="list-style-type: none"> • Inflammation of the stomach and/or intestinal lining that causes symptoms like diarrhea and vomiting. • It is commonly caused by Noroviruses and Rotavirus in school and childcare settings but can also be caused by another virus, bacteria, or parasite
What are the signs and symptoms?	<ul style="list-style-type: none"> • Diarrhea • Abdominal cramping • Poor appetite • Vomiting • Fever • Nausea • The incubation period depends on the cause of the illness
How is it spread?	<ul style="list-style-type: none"> • Caused by viruses, bacteria and/or parasites • Spread by fecal-oral route from infected person • Contaminated food and/or water • Contaminated toys and equipment
When is it contagious?	<ul style="list-style-type: none"> • Throughout acute infection and so long as organisms are in stool
How can we prevent contact and spread?	<ul style="list-style-type: none"> • Good hand hygiene • Safe food handling practices to prevent illness • Disinfect all surfaces, toys, and furniture with high level disinfectant • Discontinue sensory play
Should I report it?	<ul style="list-style-type: none"> • It depends on the cause of the illness • Principals can call Algoma Public Health at 705-942-4646 ext. 3274.
Can the child come to school?	<ul style="list-style-type: none"> • Exclude the child until 48 hours after diarrhea/vomit stops. • Exclusion period may vary based on the cause of illness, number of cases and source of infection

For more information: [Algoma Public Health Diarrhea and Vomiting Information Sheet](#)

Food Poisoning (E. coli) <i>(Verotoxin-producing Escherichia coli (VTEC))</i>	
What is it?	<ul style="list-style-type: none"> • VTEC is a form of the bacteria <i>E. coli</i> that causes a wide range of gastrointestinal illness, from mild to severe

What are the signs and symptoms?	<ul style="list-style-type: none"> • Diarrhea (often bloody) • Severe abdominal pain or cramping • May be accompanied by haemolytic uremic syndrome (HUS) • Incubation period = 2-10 days
How is it spread?	<ul style="list-style-type: none"> • Ingestion of contaminated foods such as under-cooked beef (especially ground beef) as well as drinking contaminated water or unpasteurized milk and apple juice • Contact with animals and their environments • Contact with feces of an infected person
When is it contagious?	<ul style="list-style-type: none"> • One week or less following resolution of symptoms • Up to 3 weeks in children
How can we prevent contact and spread?	<ul style="list-style-type: none"> • Hand washing • Cook meats to a safe internal cooking temperature especially ground beef which has a required cooking temperature of 71°C Drink potable water and pasteurized milk and juices • Swim in chlorinated pools, spas and wading pools
Should I report it?	<ul style="list-style-type: none"> • Yes – if confirmed by doctor
Can the child come to school?	<ul style="list-style-type: none"> • Exclude the child from school until 2 consecutive negative stool samples (or rectal swabs) have been collected at least 24 hours apart, and 48 hours after completion of antibiotics

Fifth Disease <i>(Erythema Infectiosum; slapped cheeks syndrome)</i>	
What is it?	<ul style="list-style-type: none"> • Fifth disease is an infection of the lungs and airways that is caused by parvovirus B19. • In children, it commonly results in a bright red rash on the face
What are the signs and symptoms?	<ul style="list-style-type: none"> • Coughing, sneezing, slight or no fever • Very red facial rash that resembles cheeks being slapped. Red, lace-like rash on trunk and extremities that spreads over rest of body • Exposure to sunlight or heat (e.g. bathing) brings out rash • Rash may last up to 3 weeks • Incubation period = 4-20 days
How is it spread?	<ul style="list-style-type: none"> • Direct contact with respiratory secretions • Indirect contact with contaminated toys, objects or surfaces

When is it contagious?	<ul style="list-style-type: none"> • Several days before the appearance of the rash • Not infectious once rash appears
How can we prevent contact and spread?	<ul style="list-style-type: none"> • Hand washing • Immunosuppressed and pregnant women should be referred to family physician
Should I report it?	<ul style="list-style-type: none"> • No
Can the child come to school?	<ul style="list-style-type: none"> • A child may return if they are well enough to take part in activities and have no fever
Other important notes	<ul style="list-style-type: none"> • It is most common in late winter to early spring • Not infectious by the time that the rash appears • Majority of adults have had Fifth Disease in childhood and will not get it again if exposed • Can cause complications in immuno-compromised or pregnant women

For more information: [Algoma Public Health Fifth Disease Information Sheet](#)

Hand, Foot & Mouth Disease <i>(Coxsackie virus)</i>	
What is it?	<ul style="list-style-type: none"> • Hand, foot and mouth disease is an illness that is common in children and most common in the summer and fall. • It causes sores in the mouth, hands, and feet. It is caused by a type of enterovirus called coxsackie virus
What are the signs and symptoms?	<ul style="list-style-type: none"> • Fever, headache, sore throat, loss of appetite, lack of energy • Small painful blisters in the mouth • Blisters on the palms of hands, on fingers, and on soles of feet and occasionally on buttocks • Blisters may last for 7-10 days and are not itchy • Incubation period = 3-5 days
How is it spread?	<ul style="list-style-type: none"> • Direct contact with nasal and throat discharges, fluid from blisters, or feces (stool) of infected person • Indirect contact with contaminated toys, objects, or surfaces • From coughs and sneezes of an infected person
When is it contagious?	<ul style="list-style-type: none"> • During acute stage of illness (when symptoms are present) • Virus persists in stool for several weeks

How can we prevent contact and spread?	<ul style="list-style-type: none"> • Hand washing after wiping child's nose, changing diaper, using toilet and before preparing food • Disinfect or discard articles soiled with secretions of infected person • Disinfect all surfaces, toys, and furniture with high level disinfectant • Discontinue sensory play
Should I report it?	<ul style="list-style-type: none"> • No
Can the child come to school?	<ul style="list-style-type: none"> • Exclusion from school is not required unless the child is not feeling well enough to participate, has a fever, or there are open mouth sores or oozing blisters.
Other important notes	<ul style="list-style-type: none"> • Encourage medical diagnosis to rule out more serious viral infection with rash

For more information: [Algoma Public Health Hand Foot and Mouth Disease Information Sheet](#)

Hepatitis A	
What is it?	<ul style="list-style-type: none"> • Hepatitis A virus causes an infection of the liver which usually results in mild illness in children but can be more serious in adults.
What are the signs and symptoms?	<ul style="list-style-type: none"> • Fever • Fatigue • Loss of appetite • Nausea • Jaundice (a yellowing of the skin and whites of the eyes) • Dark urine • In children symptoms may be mild or may not appear at all (i.e. asymptomatic infection) • Incubation period = 15-50 days (average 28-30 days)
How is it spread?	<ul style="list-style-type: none"> • Person to person by food or water contaminated with infected feces/stool.
When is it contagious?	<ul style="list-style-type: none"> • Two weeks before the onset (start) of symptoms until one week after the onset of jaundice
How can we prevent contact and spread?	<ul style="list-style-type: none"> • Hand washing after toileting and diaper changing, etc. • Avoid sharing of eating and drinking utensils/items • Disinfect diaper tables between changes • Proper disposal of diapers

Should I report it?	<ul style="list-style-type: none"> It will be reported by a medical professional when there is a positive lab test
Can the child come to school?	<ul style="list-style-type: none"> No, exclude the child for one week from the onset of jaundice or as determined by Algoma Public Health.
Other important notes	<ul style="list-style-type: none"> Vaccine preventable A viral disease that attacks the liver and can cause permanent liver damage.

For more information: [Algoma Public Health Hepatitis A Information Sheet](#)

Head Lice <i>(Pediculosis; Mite)</i>	
What is it?	<ul style="list-style-type: none"> Head lice are a tiny, flat insect have no wings, cannot jump or fly, but crawl very quickly. They live and breed on the scalp. They are only 1-2 mm long, grayish brown in colour, and hard to see. Adult female lice produce many nits which may be easier to find than the actual bug.
What are the signs and symptoms?	<ul style="list-style-type: none"> Head scratching/itchy scalp Nits (eggs) present on hair shaft – may be grey to white in colour and are attached firmly to hair and close to scalp Live lice move very quickly and may be difficult to see. They do not jump or fly
How is it spread?	<ul style="list-style-type: none"> Head-to-head contact and by sharing hats, helmets, combs, and other head gear Head lice can only survive one week off the head
When is it contagious?	<ul style="list-style-type: none"> Until it is treated, children should stay home until first treatment is complete
How can we prevent contact and spread?	<ul style="list-style-type: none"> Treat promptly with appropriate product Treatment details vary with product used Notify parents of other children in the school/centre that head lice is present in the facility
Should I report it?	<ul style="list-style-type: none"> No
Can the child come to school?	<ul style="list-style-type: none"> Exclude until initial treatment is completed

Other important notes	<ul style="list-style-type: none"> • Children with headlice should be treated and then attend school or childcare as usual. “No nit” policies are not necessary. • Check and treat all family members as needed • Follow product directions carefully • Head lice are a nuisance, but do not transmit disease, nor do they indicate poor hygiene or lack of cleanliness.
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For more information: [Algoma Public Health Head Lice Information Sheet](#)

Impetigo	
What is it?	<ul style="list-style-type: none"> • Impetigo is a skin infection caused by streptococcus (strep) and staphylococcus (staph) bacteria. These bacteria are often found in the nose of healthy persons. It is common in children.
What are the signs and symptoms?	<ul style="list-style-type: none"> • Blisters filled with pus that break open leaving thick golden yellow crusts • Usually on mouth and nose • Fever, pain, swelling & weakness if the infection becomes serious • Can be spread by scratching • Incubation period = 1-10 days
How is it spread?	<ul style="list-style-type: none"> • Person to person through contact with sores • Indirect contact with contaminated bed linens, towels or clothing • Infecting yourself by spreading bacteria from a runny nose to cracks around the mouth & nose
When is it contagious?	<ul style="list-style-type: none"> • As long as sores are draining or up to 24 hours after start of antibiotic treatment • The draining usually stops after 24 – 48 hours of treatment
How can we prevent contact and spread?	<ul style="list-style-type: none"> • Hand washing • Avoid contact with discharge • Wear gloves if any contact with lesions • No sharing of towels, face clothes or toys • Daily disinfection of toys and contaminated articles
Should I report it?	<ul style="list-style-type: none"> • No
Can the child come to school?	<ul style="list-style-type: none"> • No, exclude until appropriate antibiotic has been taken for at least 24 hours and drainage has stopped

Other important notes	<ul style="list-style-type: none"> Lesions should be adequately covered with dressings or clothing
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For more information: [Algoma Public Health Impetigo Information Sheet](#)

Measles <i>(Rubeola)</i>	
What is it?	<ul style="list-style-type: none"> Measles are a highly infectious communicable disease caused by the measles virus. Complications include diarrhea, pneumonia, blindness, and infections of the brain. Pregnant women, infants and individuals with weak immune systems are at higher risk of measles complications.
What are the signs and symptoms?	<ul style="list-style-type: none"> High fever Runny nose, cough, inflamed, sensitive eyes (conjunctivitis), drowsiness & irritability Small spots with white or bluish white centres on a reddish base inside the mouth (Koplik's spots) Blotchy red rash which begins on face and spreads down body appears on 3rd to 7th day (lasts 4-7 days) Incubation period = Usually 10 days but may vary from 7 to 21 days
How is it spread?	<ul style="list-style-type: none"> Spread easily from person to person through the air Direct contact with nose and throat secretions May be spread by articles freshly soiled with nose and throat secretions Very infectious
When is it contagious?	<ul style="list-style-type: none"> 4 days before onset of rash and continues for 4 days after rash appearance Usually, 10 days but may vary from 7 to 21 days
How can we prevent contact and spread?	<ul style="list-style-type: none"> Ensure all children are immunized Unimmunized and immunosuppressed will be excluded as directed by Medical Officer of Health Pregnant women or children under 1 year of age, not yet immunized should consult a physician within 72 hours of exposure
Should I report it?	<ul style="list-style-type: none"> Yes
Can the child come to school?	<ul style="list-style-type: none"> No, exclude for four days from when rash first appeared

Other important notes	<ul style="list-style-type: none"> • Vaccine preventable
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For more information: [Algoma Public Health Measles Information Sheet](#)

Meningitis <i>(Meningococcal Disease)</i>		
What is it?	<ul style="list-style-type: none"> • A bacterial infection of the tissue covering the brain and spinal cord (meningococcal meningitis). • It can also cause an infection in the blood (meningococemia). • It is rare and can cause serious disease. 	
What are the signs and symptoms?	<ul style="list-style-type: none"> • Sudden onset • Intense headache • Fever • Chills • Nausea • Vomiting • Rash 	<ul style="list-style-type: none"> • Malaise • Irritability • Neck stiffness • Confusion • Eyes sensitive to light • Incubation period = 1 – 10 days (usually less than 4 days)
How is it spread?	<ul style="list-style-type: none"> • Direct contact with oral secretions including respiratory droplets from the nose and throat of infected people, e.g. kissing, sharing beverages, vapes, cigarettes, straws, or food 	
When is it contagious?	<ul style="list-style-type: none"> • Up to 7 days before becoming ill and until 24 hours after the start of appropriate antibiotic. 	
How can we prevent contact and spread?	<ul style="list-style-type: none"> • Avoid sharing personal items • Cover coughs and sneezes • Hand washing • Contacts are immediately referred to family physician for prophylaxis • Vaccination is recommended 	
Should I report it?	<ul style="list-style-type: none"> • Yes, immediately 	
Can the child come to school?	<ul style="list-style-type: none"> • No, exclude for the period of time determined by a physician and APH. 	
Other important notes	<ul style="list-style-type: none"> • Vaccine preventable and treated with an antibiotic • Family members and close contacts may require treatment 	

For more information: [Algoma Public Health Meningitis Information Sheet](#)

Mononucleosis

(Epstein-Barr Virus)

What is it?	<ul style="list-style-type: none"> • A viral infection caused by the Epstein-Barr virus. • Commonly seen in older children and adults. • Difficult to recognize in young children.
What are the signs and symptoms?	<ul style="list-style-type: none"> • Sore throat • Fever • Enlarged lymph glands in the neck • Fatigue • Headache • Loss of appetite • Enlarged spleen • Jaundice (yellow skin/eyes) in 4% of young adults. • Incubation period = 4 to 6 weeks
How is it spread?	<ul style="list-style-type: none"> • Through direct contact with the mouth/nose secretions of an infected person, e.g., saliva on hands and kissing • Indirect contact with contaminated objects, e.g., toys, sharing water bottles, cigarettes
When is it contagious?	<ul style="list-style-type: none"> • Unknown • Prolonged 1 year or longer
How can we prevent contact and spread?	<ul style="list-style-type: none"> • Refrain from sharing beverages, utensils, and any contact with an infected person's saliva • Hand washing • Cover cough and sneezes • Discard tissues soiled with nose and throat discharges into the garbage • Avoid sharing water bottles or cups
Should I report it?	<ul style="list-style-type: none"> • No
Can the child come to school?	<ul style="list-style-type: none"> • Yes, if they have a recommendation from a health care provider to return
Other important notes	<ul style="list-style-type: none"> • Disease could be severe in immuno-suppressed host • Person should not participate in contact sports if spleen enlarged • No treatment other than rest is needed in most cases.

For more information: [Algoma Public Health Mononucleosis Information Sheet](#)

Mumps	
What is it?	<ul style="list-style-type: none"> • Mumps is an acute infectious disease caused by the mumps virus. • Characterized by swelling of one or more of the salivary glands, most commonly the parotid glands (parotitis)
What are the signs and symptoms?	<ul style="list-style-type: none"> • Fever • Painful swelling and tenderness of one or more salivary glands (along the jaw line) • Children often have respiratory symptoms such as coughing, sneezing and runny nose • Incubation period = Commonly 16 – 18 days (range 12 – 25 days)
How is it spread?	<ul style="list-style-type: none"> • Person to person through coughing, sneezing, or direct contact with the respiratory secretions of an infected person • Indirect contact with contaminated surfaces
When is it contagious?	<ul style="list-style-type: none"> • 7 days before to 5 days after symptoms develop
How can we prevent contact and spread?	<ul style="list-style-type: none"> • Ensure all children/staff are vaccinated (immune) • Exclude unimmunized contacts as advised by Medical Officer of Health • Good hand hygiene • Cover cough and sneezes
Should I report it?	<ul style="list-style-type: none"> • Yes
Can the child come to school?	<ul style="list-style-type: none"> • No, the child should be excluded for 5 days from onset of parotitis (swelling) or as advised by the Medical Officer of Health
Other important notes	<ul style="list-style-type: none"> • Vaccine preventable

For more information: [Algoma Public Health Mumps Information Sheet](#)

Noroviruses	
What is it?	<ul style="list-style-type: none"> • A very common virus that causes diarrhea and vomiting in humans. • Noroviruses are named after the original Norwalk virus and Norwalk-like viruses. • The viruses are very small and often difficult to detect.

	<ul style="list-style-type: none"> Noroviruses are commonly responsible for outbreaks in places where people are near each other. Such places include nursing homes, homes for the aged, banquets, cruise ships, swimming pools, childcare centers, schools and restaurants.
What are the signs and symptoms?	<ul style="list-style-type: none"> Diarrhea Abdominal cramping Vomiting Fever Poor appetite and dehydration Diarrhea more common in adults, vomiting more common in children
How is it spread?	<ul style="list-style-type: none"> Spread by fecal-oral route from infected person Contaminated hands Unsafe water and food Contaminated toys and equipment Aerosols of vomit Incubation period = 12 to 48 hours
When is it contagious?	<ul style="list-style-type: none"> Most contagious from symptom onset to three days after symptoms resolved. Up to 2 weeks after recovery.
How can we prevent contact and spread?	<ul style="list-style-type: none"> Good hand washing (children and staff) Disinfect change table after each diaper change and proper disposal of diapers Disinfect all surfaces, toys, and furniture with high level disinfectant Discontinue sensory play Staff wear a disposable mask and gloves when cleaning up vomit
Should I report it?	<ul style="list-style-type: none"> Yes, if there are high levels of absences due to the illness
Can the child come to school?	<ul style="list-style-type: none"> No, they should be excluded until 48 hours after diarrhea & vomiting stops

For more information: [Algoma Public Health Norovirus Information Sheet](#)

Pink Eye <i>(Conjunctivitis - Bacterial)</i>	
What is it?	<ul style="list-style-type: none"> Pink eye is a redness and swelling of the mucous membrane that covers the eyeball and eyelid and can be caused by bacteria, virus, physical irritation, allergies, or chemical irritation.

	<ul style="list-style-type: none"> • It is very common. • The primary concern for public health is bacterial pink eye.
What are the signs and symptoms?	<ul style="list-style-type: none"> • Itchy, irritated, scratchy feeling in the eye & increased tearing • White of the eyes are pink or red • Swelling of the eyelid • Pus or discharge from the eyes that can make the eyelids sticky at night • Mild sensitivity to light may occur
How is it spread?	<ul style="list-style-type: none"> • Direct contact with the discharge from the eye • Indirect contact through contaminated clothing, face cloths & towels. • By the coughs and sneezes of an infected person.
When is it contagious?	<ul style="list-style-type: none"> • From start of symptoms until 24 hours after started prescribed treatment (antibiotic eye drops or ointment). Incubation period is typically 1-3 days.
How can we prevent contact and spread?	<ul style="list-style-type: none"> • Hand washing • Disinfection of toys, tables, doorknobs, railings • No sharing of towels or washcloths
Should I report it?	<ul style="list-style-type: none"> • No
Can the child come to school?	<ul style="list-style-type: none"> • Exclude the child until 24 hours after prescribed antibiotic has been started and drainage has stopped.
Other important notes	<ul style="list-style-type: none"> • Wipe tears or discharge from child's eye from the inside out and in one direction, using a clean part of the cloth for each wipe

For more information: [Algoma Public Health Pink Eye Information Sheet](#)

Pinworms	
What is it?	<ul style="list-style-type: none"> • An infection caused by tiny, white thread-like worms that live in the intestines. • The worms crawl out of the anus at night and lay their eggs on nearby skin. • Very common in children
What are the signs and symptoms?	<ul style="list-style-type: none"> • Itching of anal area, disturbed sleep and irritability • Incubation period = 2 – 6 weeks

How is it spread?	<ul style="list-style-type: none"> Parasite eggs are transmitted by hand from anal area to mouth Direct contact from fingers contaminated from scratching Indirectly through clothing, bedding, food, toys, or other articles contaminated with pinworm eggs
When is it contagious?	<ul style="list-style-type: none"> Until 1 treatment is completed
How can we prevent contact and spread?	<ul style="list-style-type: none"> Frequent hand washing very important especially after diaper changing and handling any soiled linens Children should be discouraged from sucking fingers, biting nails and scratching anal area Keep fingernails short Treatment of whole family may be advisable if several members are infected Cleaning surfaces with soap and water very important to remove parasite Discontinue sensory play
Should I report it?	<ul style="list-style-type: none"> No
Can the child come to school?	<ul style="list-style-type: none"> Yes, but it is advised to have 1 treatment and it may need to be repeated in 2 weeks.
Other important notes	<ul style="list-style-type: none"> Clean/vacuum house daily for several days after treatment Wash and change bedding and underwear daily after treatment Bathing your child in the morning will help get rid of many of the eggs The eggs are sensitive to sunlight. Open blinds or curtains in bedrooms when your child is not sleeping

For more information: [Algoma Public Health Pinworms Information Sheet](#)

Respiratory Illnesses <i>(COVID-19, Rhinovirus, Influenza, Respiratory Syncytial Virus (RSV), Adenovirus, Enterovirus)</i>	
What is it?	<ul style="list-style-type: none"> Including COVID-19, Rhinovirus, Influenza, Respiratory Syncytial Virus (RSV), Adenovirus, Enterovirus
What are the signs and symptoms?	<ul style="list-style-type: none"> Fever or chills Cough Shortness of breath Runny nose/nasal congestion Sore throat Headache Extreme fatigue

	<ul style="list-style-type: none"> • Less common symptoms could be gastrointestinal symptoms (nausea, vomiting, diarrhea), pink eye and loss of taste/smell • If your child develops severe symptoms including shortness of breath, go to your nearest Emergency room for immediate assessment. • Incubation period = Varies based on specific illness but may be between 1-14 days.
How is it spread?	<ul style="list-style-type: none"> • Through droplets which are shed from an infected person when they sneeze, cough or talk. • Contact with contaminated surfaces without proper hand hygiene
When is it contagious?	<ul style="list-style-type: none"> • Respiratory viruses are typically contagious 24 hours prior to onset of symptoms and peaks during the first 3 – 7 days of illness. • This would vary depending on the virus
How can we prevent contact and spread?	<ul style="list-style-type: none"> • Good hand washing (children and staff) • Proper respiratory etiquette (i.e. covering nose and mouth when coughing/sneezing) • Regular cleaning and disinfection practices for surfaces, toys, and furniture • Remove sensory play • For 10 days after symptom onset (or positive test if this came first): wear a well fitted mask, avoid non-essential activities where you need to take off your mask, avoid visiting immunocompromised individuals and high-risk settings (i.e long-term care homes, hospitals)
Should I report it?	<ul style="list-style-type: none"> • Yes, if there are high levels of absences due to the illness
Can the child come to school?	<ul style="list-style-type: none"> • No, the child should be excluded until symptoms have been improving for 24 hours (or symptom free for 48 hours if vomiting and/or diarrhea were present) AND there is no fever AND no new symptoms have developed • Close contacts or individuals who test positive without symptoms are not required to self-isolate but should follow additional precautions in the 'prevention and control of contact' section
Other important notes	<ul style="list-style-type: none"> • Individuals who are immunocompromised should isolate for at least 10 days from symptom onset or positive test result (whichever came first) and until they no longer have a fever, and their symptoms have been improving for 24 hours (or 48 hours if symptoms were vomiting and/or diarrhea) • If symptoms worsen, if fever lasts more than 5 days or if symptoms do not improve after one week have your child assessed by a health care professional.

For more information: [Algoma Public Health Influenza Information Sheet](#) OR [Algoma Public Health COVID-19 Information Sheet](#)

<h2>Ringworm</h2> <p><i>Head (tinea capitis); Body (tinea corporis); Feet (tinea pedis or Athlete's Foot)</i></p>	
What is it?	<ul style="list-style-type: none"> A skin infection caused by a fungus. It can affect the scalp or the body.
What are the signs and symptoms?	<ul style="list-style-type: none"> Head – Small raised lesions on scalp, leaving scaly patches of temporary baldness; Incubation period = 10 – 14 days Body – Flat ring-shaped lesions with reddish periphery. May be blister-like or dry and crusty; Incubation period = 4 – 10 days Feet – Scaling or cracking of skin between toes or on the soles; Incubation period = Unknown
How is it spread?	<ul style="list-style-type: none"> Direct skin to skin contact Indirect contact with contaminated articles such as bathrooms, pools, showers, chairs, combs, clothing, hats and shower stalls
When is it contagious?	<ul style="list-style-type: none"> As long as lesions are present or until treatment is initiated
How can we prevent contact and spread?	<ul style="list-style-type: none"> Infections should be treated promptly with oral and/or topical antifungal Hand washing Discourage from sharing personal items (combs, hairbrushes and towels) Encourage children to wear footwear in public showers and pool areas Good hand washing
Should I report it?	<ul style="list-style-type: none"> No
Can the child come to school?	<ul style="list-style-type: none"> No, they should be excluded until treatment has started
Other important notes	<ul style="list-style-type: none"> While under treatment, infected person should be excluded from swimming pools and activities likely to lead to exposure of others

For more information: [Algoma Public Health Ringworm Information Sheet](#)

<h2>Rotavirus</h2>	
What is it?	<ul style="list-style-type: none"> Rotavirus is a common virus that causes a mild to severe diarrhea in humans. Infants and young children in childcare centres and children's hospitals are most often infected. The virus is also a common cause of diarrhea in the elderly living in long-term care facilities and homes for older adults.

	<ul style="list-style-type: none"> • Sometimes, the virus can cause traveller's diarrhea in healthy adults.
What are the signs and symptoms?	<ul style="list-style-type: none"> • Fever • Vomiting • Stomach pain • Diarrhea • Loss of appetite and dehydration • Incubation period = 1 – 3 days
How is it spread?	<ul style="list-style-type: none"> • Spread by fecal-oral route from infected person • Soiled hands • Unsafe water and food • Contaminated toys and equipment • From coughs and sneezes of an infected person
When is it contagious?	<ul style="list-style-type: none"> • Most contagious when symptomatic and during the first three days after symptoms resolved. • Can spread to others before symptoms start
How can we prevent contact and spread?	<ul style="list-style-type: none"> • Hand washing by staff and students • Disinfect tables after each diaper change • Proper disposal of diapers • Disinfect all surfaces, toys, and furniture with high level disinfectant • Discontinue sensory play • Rotavirus vaccination • Staff wear a disposable mask and gloves when cleaning up vomit
Should I report it?	<ul style="list-style-type: none"> • Yes, if there are high levels of absences due to the illness
Can the child come to school?	<ul style="list-style-type: none"> • No, they should be excluded until symptom free for 48 hours
Other important notes	<ul style="list-style-type: none"> • Vaccine Preventable

For more information: [Algoma Public Health Rotavirus Information Sheet](#)

Rubella <i>(German Measles)</i>	
What is it?	<ul style="list-style-type: none"> • Rubella, also known as German measles, is caused by the rubella virus and is very contagious. It is usually a mild illness but can be serious at times.

What are the signs and symptoms?	<ul style="list-style-type: none"> • Transient red rash on face and spreading over body • Mild fever, malaise, tiredness, headache and mild runny nose • Sore, red eyes (conjunctivitis) • Enlarged lymph nodes • Note: children may have few or no symptoms
How is it spread?	<ul style="list-style-type: none"> • Direct contact with respiratory secretions of an infected person • Droplet spread from coughs and sneezes • Infants with congenital rubella syndrome can also spread through urine
When is it contagious?	<ul style="list-style-type: none"> • 7 days before and at least 4 days after onset of rash • Infants with congenital rubella syndrome often shed the virus for months after birth
How can we prevent contact and spread?	<ul style="list-style-type: none"> • Ensure children and staff are immunized • Immunosuppressed contacts should be referred to a physician • Susceptible women in early pregnancy should avoid contact with case and consult physician concerning risk of infection • Exclude unimmunized contact for 21 days after exposure • Hand washing
Should I report it?	<ul style="list-style-type: none"> • Yes
Can the child come to school?	<ul style="list-style-type: none"> • No, they should be excluded for 7 days after the onset of the rash
Other important notes	<ul style="list-style-type: none"> • Vaccine preventable • Very infectious • All female staff of child-bearing age should be vaccinated or have a blood test to establish immunity

Scabies	
What is it?	<ul style="list-style-type: none"> • A parasitic disease of the skin caused by a mite that can only be seen with a microscope.
What are the signs and symptoms?	<ul style="list-style-type: none"> • Red, very itchy rash, which appears between fingers on palms, underarms, wrists, soles, elbows, belt line, groin area, buttocks and shoulder area • In babies and young children, the rash can appear on the head, face, neck, chest, abdomen, and back • Rash looks like curvy white threads, tiny red bumps or scratches • Itching is intense, especially at night

	<ul style="list-style-type: none"> Itching may persist for a few days or a few weeks Incubation period = 2 – 6 weeks for anyone not previously infected or 1 – 4 days after re-exposure for anyone who has had a prior infestation.
How is it spread?	<ul style="list-style-type: none"> Direct prolonged skin to skin contact Indirect contact with clothing or articles used by the infested person (e.g. bedding or towels)
When is it contagious?	<ul style="list-style-type: none"> Until mites and eggs are killed by treatment, usually after 1 or occasionally 2 treatments one week apart
How can we prevent contact and spread?	<ul style="list-style-type: none"> Treatment is with a prescribed lotion or cream All household members should receive treatment who have direct skin to skin contact After the treatment is washed off the individual should change into fresh clothes and change the bed linens
Should I report it?	<ul style="list-style-type: none"> No
Can the child come to school?	<ul style="list-style-type: none"> No, they should be excluded until one day after treatment
Other important notes	<ul style="list-style-type: none"> Itching may persist 1 -2 weeks after treatment Rash should be observed for week after treatment

For more information: [Algoma Public Health Scabies Information Sheet](#)

Strep Throat	
What is it?	<ul style="list-style-type: none"> Strep throat is a bacterial infection caused by streptococcal bacteria. It causes irritation, inflammation and pain in the throat and tonsils.
What are the signs and symptoms?	<ul style="list-style-type: none"> Incubation period = 1-3 days
How is it spread?	<ul style="list-style-type: none"> Direct contact with saliva From coughs and sneezes of an infected person Sharing food, drinks, or anything put in the mouth with an infected person
When is it contagious?	<ul style="list-style-type: none"> Until 24 hours of effective antibiotic treatment

How can we prevent contact and spread?	<ul style="list-style-type: none"> • No sharing of personal items (e.g. straws, drinking glasses) • Hand washing
Should I report it?	<ul style="list-style-type: none"> • No
Can the child come to school?	<ul style="list-style-type: none"> • No, exclude until 24 hours of antibiotic treatment has passed
Other important notes	<ul style="list-style-type: none"> • Scarlet fever and strep throat are both caused by streptococcal bacteria. • Rheumatic fever may occur as a result of untreated streptococcal infection.

Scarlet Fever	
What is it?	<ul style="list-style-type: none"> • A disease caused by the streptococcus bacteria. • More common in children than adults.
What are the signs and symptoms?	<ul style="list-style-type: none"> • Fever, swollen glands, sore throat and vomiting • Very red sore throat followed by red rash (sandpaper like feel) covering the entire body. Commonly seen on neck, chest, underarms, elbow, groin and inner surface of thighs • Rash may last for 2-7 days after which the skin may peel • Strawberry tongue (whitish coating on the surface) • Typically, rash does not involve face but there may be flushing of the cheeks • Incubation period = 1-4 days
How is it spread?	<ul style="list-style-type: none"> • Direct contact with saliva • From coughs and sneezes of an infected person
When is it contagious?	<ul style="list-style-type: none"> • Until 24 hours of effective antibiotic treatment
How can we prevent contact and spread?	<ul style="list-style-type: none"> • No sharing of personal items (e.g. straws, cups) • Hand washing • Concurrent daily disinfection of toys, tables, door knobs, contaminated articles etc.
Should I report it?	<ul style="list-style-type: none"> • No

Can the child come to school?	<ul style="list-style-type: none"> Exclude until 24 hours of effective antibiotic treatment and the child is well enough to participate in activities
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For more information: [Algoma Public Health Scarlet Fever Information Sheet](#)

Whooping Cough (Pertussis)	
What is it?	<ul style="list-style-type: none"> A very contagious (easy to catch) disease of the respiratory tract, caused by bacteria found in the nose and throat of a person who is infected Young infants are at highest risk and have the most serious complications
What are the signs and symptoms?	<ul style="list-style-type: none"> Begins with a low-grade fever, runny nose, mild cough and red watery eyes Repeated coughing episodes (paroxysmal cough) which begin abruptly, worsens resulting in a high-pitched whoop which may be heard before the next breath of air Difficulty breathing, choking, and vomiting after coughing episode may occur Could last 6 – 10 weeks Incubation period = 6 - 20 days (average 9 – 10 days)
How is it spread?	<ul style="list-style-type: none"> Direct contact with nose and throat secretions of infected person – such as coughing and sneezing
When is it contagious?	<ul style="list-style-type: none"> Very contagious in the early stages and for 3 weeks after coughing spells develop
How can we prevent contact and spread?	<ul style="list-style-type: none"> To protect against whooping cough, ensure that all are up to date with pertussis immunization Refer unimmunized contacts to their physician Exposed children under one year are at particular risk and should receive antibiotics regardless of immunization status Observe for signs of symptoms of disease (cough) for 3 weeks from last contact Exclude unimmunized contacts
Should I report it?	<ul style="list-style-type: none"> Yes
Can the child come to school?	<ul style="list-style-type: none"> No, they must be excluded until 5 days of treatment have been completed or 3 weeks from the onset of cough if untreated

Other important notes	<ul style="list-style-type: none"> • Vaccine preventable • Pregnant women who are exposed to a case should be referred to a physician • Family members and close contacts may require treatment
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For more information: [Algoma Public Health Pertussis Information Sheet](#)