Board Policy

Code No. 507.3E1

COMMUNICABLE DISEASE CHART

The following list of communicable diseases is offered as a guideline in establishing a communicable disease control program in the Bettendorf Schools. This list is used by the District nurses and other staff members responsible for exclusions and readmissions of affected students. The diseases listed are not meant to be all inclusive; but are some of the most frequently encountered diseases affecting school age children.

CONCISE DESCRIPTIONS AND RECOMMENDATIONS FOR EXCLUSION OF CASES FROM SCHOOL

		SCHOOL	1
DISEASE *Immunization is	Usual Interval Between Exposure and	MAIN SYMPTOMS	Minimum Exclusion From School
available	First Symptoms of Disease		
CHICKENPOX	13 to 17 days	Mild symptoms and fever. Pocks are "blistery." Develop scabs, most on covered parts of body.	7 days from onset of pocks or until pocks become dry
CONJUNCTIVITIS (PINK EYE)	24 to 72 hours	Tearing, redness and puffy lids, eye discharge.	Until treatment begins or physician approves readmission.
ERYTHEMIA INFECTIOSUM (5 TH DISEASE)	4 to 20 days	Usual age 5 to 14 years – unusual in adults. Brief prodrome of low-grade fever followed by Erythemia (slapped cheek) appearance on cheeks, lace-like rash on extremities lasting a few days to 3 weeks. Rash seems to recur.	After diagnosis no exclusion from school.
GERMAN MEASLES* (RUBELLA)	14 to 23 days	Usually mild. Enlarged glands in neck and behind ears. Brief red rash.	7 days from onset of rash. Keep away from pregnant women.
HAEMOPHILUS MENINGITIS	2 to 4 days	Fever, vomiting, lethargy, stiff neck and back.	Until physician permits return.
HEPATITIS A	Variable – 15 to 50 (average 28 to 30 days)	Abdominal pain, nausea, usually fever. Skin and eyes may or may not turn yellow.	14 days from onset of clinical disease and at least 7 days from onset of jaundice.
IMPETIGO	1 to 3 days	Inflamed sores, with puss.	48 hours after antibiotic therapy started or until physician permits retune.
MEASLES*	10 days to fever, 14 days to rash	Begins with fever, conjunctivitis, runny nose, cough, then blotchy red rash.	4 days from onset of rash.
MENINGOCOCCAL MENINGITIS	2 to 10 days (commonly 3 to 4 days	Headache, nausea, stiff neck, fever.	Until physician permits return.
MUMPS*	12 to 25 (commonly 18) days	Fever, swelling and tenderness of glands at angle of jaw.	9 days after onset of swollen glands or until swelling disappears.
PEDICULOSIS (HEAD/BODY LICE)	7 days for eggs to hatch	Lice and nits (eggs) in hair.	24 hours after adequate treatment to kill lice and nits.
RINGWORM OF SCALP	10 to 14 days	Scaly patch, usually ring shaped, on scalp.	No exclusion from school. Exclude from gymnasium, swimming pools, contact sports.
SCABIES	2 to 6 weeks initial exposure; 1 to 4 days reexposure	Tinny burrows in skin caused by mites.	Until 24 hours after treatment.
SCARLET FEVER SCARLATINA STREP THROAT	1 to 3 days	Sudden onset, vomiting, sore throat, fever, later fine rash (not on face). Rash usually with first infection.	24 hours after antibiotics started and no fever.
WHOOPING COUGH* (PERTUSSIS)	7 to 10 days	Head cold, slight fever, cough, characteristic whoop after 2 weeks.	5 days after start of antibiotic treatment.

Readmission to School – It is advisable that school authorities require written permission from the health officer, school physician or attending physician before any pupil is readmitted to class following any disease which requires exclusion, not mere absence, from school.

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Approved: August 6, 2012 Reapproved: Revised: