## Infectious Diseases:

## information & exclusion list

Condition

This disease is spread by **Early** 

**Exclusion from** school, early childhood centre, or work\*

Rashes and skin infections





Hand, foot and mouth disease

**Head lice (Nits)** 

Measles



Ringworm

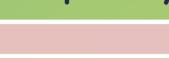
Rubella (German Measles)



**Scabies** 

School sores (Impetigo)

**Slapped cheek** (Human parvovirus infection)



symptoms

Fever and spots with a blister

on top of each spot.

Fever, flu-like symptoms – rash on soles

and palms and in the mouth.

Time between exposure and sickness

10-21 days after being exposed.

3-5 days

N/A

7-21 days

4-6 weeks

14-23 days

4-6 weeks (but if had scabies before

it may develop within 1-4 days)

Variable

4-20 days

contact with weeping blisters. Coughing, sneezing, and poor hand washing.

> Direct contact with an infested person's hair, and less commonly by contact with contaminated surfaces and objects.

Coughing, sneezing and

Coughing and sneezing. Direct contact with an infected person. Highly infectious.

Contact with infected skin. bedding and clothing.

Coughing and sneezing. Also direct contact with an infected person.

> Contact with infected skin, bedding and clothing.

Direct contact with infected sores.

Coughing and sneezing. The virus may be passed from mother to child during pregnancy.

Itchy scalp, especially behind ears. Occasionally scalp infections that require treatment may develop.

Runny nose and eyes, cough and fever, followed a few days later by a rash.

Flat, ring-shaped rash.

Itchy rash.

Fever, swollen neck glands and a rash

on the face, scalp and body.

Blisters on the body which burst and turn into scabby sores.

Red cheeks and lace-like rash on body.

or until all blisters have dried.

1 week from appearance of rash,

Exclude until blisters have dried. If blisters able to be covered, and child feeling well, they will not need to be excluded.

to kill eggs and lice. 5 days after the appearance of rash. Non-immune contacts of a case may

be excluded.

None, but ECC/school should be informed.

Treatment recommended

None, but skin contact should be avoided.

Until well and for 7 days

from appearance of rash.

Exclude until the day after

appropriate treatment.

Until sores have dried up or 24 hours after antibiotic treatment has started AND keep all sores on exposed skin covered.

Unnecessary unless unwell

## **Diarrhoea & Vomiting illnesses**

Campylobacter Cryptosporidium Giardia Salmonella

**Hepatitis A** 

**Norovirus** 

Rotavirus

Shigella

VTEC/STEC

(Verocytotoxin- or shiga

toxin-producing E. coli)



Undercooked food, contaminated water. Direct spread from an infected person or animal.

Contaminated food or water, direct

spread from an infected person.

Contact with secretions

from infected people.

Direct spread from infected person.

Contaminated food or water.

unpasteurised milk. Direct contact

with animals or infected person.

Stomach pain, fever, nausea, diarrhoea

and/or vomiting.

Nausea, stomach pains, general sickness with jaundice (yellow skin)

Nausea, diarrhoea/and or vomiting.

Nausea, diarrhoea/and or vomiting.

Diarrhoea (may be bloody), fever, stomach pain. High incidence of bloody diarrhoea,

Sudden onset of fever with cough,

sore throat, muscular aches

and a headache.

Runny nose, persistent cough followed

by "whoop", vomiting or breathlessness.

Campylobacter 1–10 days Cryptosporidium 1–12 days Giardia 3–25 days Salmonella 6-72 hours

15-50 days

1-2 days

1-2 days

Cryptosporidium – do not use public pool for 2 weeks after symptoms have stopped. **Salmonella** - Discuss exclusion of cases and contacts with public health service.

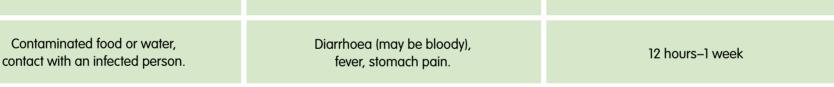
Until well and for 48 hours after the last

episode of diarrhoea or vomiting.

7 days from the onset of jaundice.

Until well and for 48 hours after the last episode of diarrhoea or vomiting.

Until well and for 48 hours after the last episode of diarrhoea or vomiting.



2-10 days stomach pain. High rate of hospitalisation and complications.

Discuss exclusion of cases and their contacts with public health service.

Discuss exclusion of cases and their

contacts with public health service.

**Respiratory Infections** 

Influenza and Influenza-like illness (ILI)

**Streptococcal sore throat** 



Coughing and sneezing. Direct contact with infected person.

Contact with secretions of a sore throat. (Coughing, sneezing etc.)

Coughing. Adults and older children

can pass on the infection to babies.

Headache, vomiting, sore throat. An untreated sore throat could lead to Rheumatic fever.

1–4 days (average about 2 days)

1-3 days

5-21 days

Exclude until well and/or has received antibiotic treatment for at least 24 hours.

Until well.

Five days from commencing antibiotic treatment or, if no antibiotic treatment then 21 days from onset of illness or until no more coughing, whichever comes first.

Other Infections

Whooping

(Pertussis)

cough

**Conjunctivitis** (Pink eye)



**Meningitis – Viral** 





Direct contact with discharge from the eyes or with items contaminated by the discharge.

(Coughing, sneezing, etc.) Spread through different routes including coughing, sneezing, faecal-oral route.

Close contact with oral secretions.

Coughing, sneezing and infected saliva.

Irritation and redness of eye. Sometimes there is a discharge.

Generally unwell, fever, headache, vomiting, sometimes a rash. Urgent treatment is required.

> Generally unwell, fever, headache, vomiting.

2-10 days (usually 3-4 days)

Variable

While there is discharge from the eyes.

Until well.

Until well enough to return. 3–7 days

Pain in jaw, then swelling 12-25 days in front of ear and fever.

Exclude until 5 days after facial swelling develops, or until well. \* Seek further advice from a healthcare professional

or public health service Te Kāwanatanga o Aotearoa New Zealand Government

**HAUORA** 







Your Public Health Nurse

Your Public Health Service

