

Childhood Infections
In
Schools & Day Care Centres
-
to stay away or not?

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| Condition | Stay away from school/day care centre or not | Comment |
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| Chickenpox (Varicella) | Stay away until all blisters have dried. This is usually at least 5 days after the spots first appeared in unimmunised children and less in immunised children. | Contacts with a weak immune system or who are pregnant should receive preventative treatment. |
| Conjunctivitis | Stay away until the discharge from the eyes has stopped. | Transmission more likely in young children by direct contact. |
| Diarrhoea (No organism identified) | Stay away until there has not been a loose bowel motion for 24 hours. | Children who are unable to maintain good personal hygiene should stay away until stools are normal for 48 hours |
| Diphtheria | Stay away until your doctor signs a medical certificate of recovery. Your child must have at least 2 negative throat swabs after antibiotic treatment is finished to ensure they are fully recovered. | |
| Hand, foot and mouth disease | Stay away until all blisters have dried. | Stool excretion continues for some weeks. Avoid infection in pregnant woman. Needs good toilet or nappy changing hygiene. |
| Head lice | Stay away while harbouring lice - can go to school after treatment started. | Treatment needed for cases and contacts shown to have live head lice. |
| Hepatitis A | Stay away until your doctor signs a medical certificate of recovery. | Good hygiene needs emphasising. |
| Herpes simplex (Cold sores, fever blisters) | If your young child isn't able to follow hygiene practices while the cold sore is weeping, then he should stay away until it is dry. Cover cold sores with dressing if possible and start anti-viral cream. | |
| Impetigo (school sores) | Stay away until topical antibiotic treatment has begun. Sores on exposed surfaces must be covered with a watertight dressing. | Antibiotics speed healing and shorten the infectious period. |
| Influenza and influenza-like illnesses | Stay away until well | |

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| Measles | Stay away until at least 4 days after the rash begins | Check immunisation. Risk of serious infection in people with a weak immune system (give preventative treatment) |
| Meningitis (bacterial) | Stay away until well and has received antibiotics | |
| Meningitis (viral) | Stay away until well | |
| Meningococcal infection | Stay away until antibiotic treatment has finished. | Close contacts (kissing contacts) may need prophylaxis. |
| Mumps | Stay away for 7 days after onset of swelling | Preventable by vaccination |
| Parvovirus (erythema infectiosum) - 'fifth disease', 'slapped face disease' | No | Pregnant women and people with a weak immune system should avoid contact with infectious cases. |
| Respiratory syncytial virus (RSV) | No | |
| Ringworm | Can return the day after treatment has begun. | Good hygiene helps. Treatment is required. |
| Roseola | No | |
| Rubella (German measles) | Stay away until fully recovered or go back 4 days after rash started | Preventable by immunisation. Check that all female contacts are immune/immunized. Unimmunized pregnant women should avoid contact with known cases. |
| Scabies | Stay away until day after treatment has been started. | Risk of transmission is low in schools but outbreaks do occur. Close contacts should be treated. |
| Streptococcal sore throat (including scarlet fever) | Stay away until your child has had antibiotics for at least 24 hours and feels well. | Moderate risk for spread of infection within families. Low risk elsewhere. |
| Tuberculosis (TB) | Children mostly have closed TB - no risk to infect others. | Adults: Stay away until one week of medication has been completed. |
| Viral gastroenteritis (viral diarrhoea) | Stay away until there has not been a loose bowel motion or vomiting for 24 hours | |
| Warts and verrucae (moles) | No | Care needed with verrucae (moles) in swimming pools, gymnasiums and changing rooms. |
| Whooping cough (pertussis)(kinkhoes) | Stay away until 5 days after antibiotic treatment has begun, or for 21 days from the start of coughing. | Preventable by vaccination. Check immunisation of contacts. Highly infectious in non-immune population. Close contacts (family members) may need antibiotics for prevention. |

