



Jackson County Health Department Communicable Disease Reference Chart

The following chart contains information and public health recommendations for various communicable diseases in schools and other group activity settings. Exclude children and staff suspected of having a communicable disease until a qualified diagnosis has been made by a physician. Exclusion period given is a minimum amount of time and applies to uncomplicated cases of the diseases listed.

Note: Please notify the Jackson County Health Department Communicable Disease Program immediately at **517-768-1662** if you are aware of an unusual occurrence of a disease or an unusual number of cases of one type of disease on a given day. For more information, visit our website at www.mijackson.org

DISEASE	MODE OF TRANSMISSION AND INCUBATION PERIOD	PERIOD OF COMMUNICABILITY	ACTIONS TO BE TAKEN AND/OR EXCLUSION PERIOD
ADENOVIRUS	Droplet; contact with respiratory secretions, contaminated surfaces, or stool-Respiratory: 2-14 days Intestinal: 3-10 days	Most contagious during the first few days of symptoms; can be shed for weeks	Exclude until 24hr with no fever and symptoms improving
RABIES (ANIMAL BITES)	5 days to over 1 year (2-8 weeks commonly)	Dependent on species.	Immediate medical attention required. Report to local animal control center.
CHICKENPOX	Airborne 2-3 weeks	Up to 5 days prior to onset of rash and until lesions are crusted over. Typically 5 days after eruption.	Until lesions crusted and no new lesions for 24hr (for non-crusting lesions: until lesions are fading and no new lesions appear)
CONJUNCTIVITIS (Pink Eye)	Direct or indirect contact with discharge from the conjunctiva or upper respiratory tract. 1-3 days	Until treated and drainage from eyes has cleared.	Exclude only if herpes simplex conjunctivitis and eye is watering; exclusion also may be necessary if 2 or more children have watery, red eyes; contact LHD
FIFTH'S DISEASE (Hungarian Measles)	Contact with infected respiratory secretions. 4-20 days	Probably not communicable after rash onset.	No exclusion if rash is diagnosed as Fifth disease by a healthcare provider.
HAND, FOOT & MOUTH DISEASE	Direct contact or aerosol droplet 3-5 days	While sores are present, usually 7-10 days. Can shed in feces for several weeks.	If secretions from blisters can be contained, no exclusion required.
HEPATITIS A	Fecal-oral route 15-50 days (28 commonly)	2 weeks before onset of symptoms and 2 weeks after onset.	Exclude until at least 7 days after jaundice onset and medically cleared; exclude from food handling for 14 days after onset.
HEPATITIS B	Contact with blood or body fluids. 45-180 days (average 60-90 days)	Several weeks prior to onset of symptoms until laboratory tests prove no longer infective.	Upon recovery and recommendation from physician. No exclusion unless open wounds or biting behavior.
HEPATITIS C	Contact with blood and less commonly sexual. 14-180 days	Indefinite. Infections are usually chronic.	No exclusion necessary except for open wounds which cannot be well covered
HERPES SIMPLEX, TYPE I AND II	I-Saliva II- Sexual 2-12 days.	As long as lesions are present. Can remain in saliva for many weeks after lesions.	No exclusion necessary
IMPETIGO	Direct or indirect contact with the lesions and their discharge. 4-10 days commonly	While sores are draining.	Treatment may be delayed until end of the day; if treatment started before next day's return, no exclusion necessary; cover lesions
INFLUENZA	Airborne droplet or direct contact 1-4 days	Adults- 3-5 days Children- up to 10 days	Exclude until 24hrs with no fever (without fever-reducing medication) and cough has subsided



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LICE (Pediculosis)	Direct or indirect contact with an infected person. 1-2 weeks	Until lice and viable eggs are destroyed.	Students with live lice may stay in school until end of day; immediate treatment at home is advised.
MENINGITIS (Aseptic/Viral)	Person to person either by fecal-oral, oral-oral or airborne route. Dependant on infectious agent.	Depends on type of infectious agent.	Exclude until medically cleared
MENINGITIS (Bacterial / HIB)	Direct contact with respiratory droplets of infected person. 2-4 days	For 24-48 hours after initiation of therapy.	Medical clearance required; exclude until 24hrs after antimicrobial treatment
MONONUCLEOSIS	Person to person via saliva. 4-6 weeks	Prolonged, possibly greater than one year.	Exclude until able to tolerate activity; Exclude from contact sports until recovered.
MUMPS	Airborne 12-25 days (18 days commonly)	Up to 7 days prior to and 9 days after onset of swelling.	Exclude until 5 days after onset of salivary gland swelling.
PERTUSSIS (Whooping Cough)	Direct contact with respiratory droplets from an infected person. 1-2 weeks	Onset of cold like symptoms until 5 days after initiation of antibiotic treatment.	Exclude until 21 days after onset or until 5 days after appropriate antibiotic treatment.
PINWORMS (Enterobiasis)	Fecal-oral route 2-6 weeks	As long as eggs are present.	Exclude until first treatment completed.
RINGWORM	Direct or indirect contact 4-14 days	As long as lesions are present.	Treatment may be delayed until end of the day; if treatment started before next day's return, no exclusion necessary; exclude from contact sports, swimming until start of treatment
RSV (Respiratory Syncytial Virus)	Direct or close contact with respiratory secretions. Average 4-6 days (commonly 2-8 days)	Usually 3-8 days, beginning ~ 1 day before onset; infants and immunocompromised people can spread the virus for 3-4 weeks	Exclude until fever free for 24hrs or as recommended by physician. Note: cough often lasts as long as 3 weeks.
RUBELLA (German or 3-day Measles)	Airborne 14-23 days	From 7 days before to 4 days after onset of rash.	Exclude until 7 days after onset of rash
RUBEOLA (Hard or 10-days Measles)	Airborne 10-14 days	From 4 days before to 4 days after onset of rash.	Exclude until 4 days after rash onset
SALMONELLA	Fecal-oral route 6-72 hours (commonly 12-36 hours)	During course of infection and until organism is no longer in feces.	Exclude until diarrhea has ceased for at least 2 days; additional restrictions may apply.
SCABIES	Typically direct contact or to a limited extent, from undergarments or soiled bed linens. 3 days to 6 weeks	Until mites and eggs are destroyed.	Treatment may be delayed until end of the day; if treatment started before next day's return, no exclusion necessary.
SCARLET FEVER AND STREP THROAT	Respiratory droplet or direct contact with infected person. 1-3 days, rarely longer	From 2 to 4 days after onset of rash; 10 to 21 days if untreated.	Exclude until 12hrs after antimicrobial therapy (2+ doses)
SHIGELLA	Fecal-oral route 12-96 hours (usually 1-3 days)	During course of infection and until organism is no longer in feces, about 4 weeks after onset.	Exclude until diarrhea has ceased for at least 2 days; Medical clearance required.
SHINGLES (Herpes Zoster)	Reactivation of a dormant virus. Direct contact with shingles lesions may cause chickenpox, if susceptible.	From 5 days before to 7 days after onset of lesions.	Cover lesions. If lesions cannot be covered, use same exclusion period as chickenpox.