

Communicable Disease Chart for Child Care Providers in New York City

Bureau of Child Care

Notify NYC DOHMH of any one case of a reportable condition as indicated below or in the event of 3 or more cases of a disease or condition. Click on the disease name in the left-hand column for more information or to browse full list visit nyc.gov/health and select "Health Topics A-Z."

Disease	Incubation	Signs/Symptoms	How Transmitted	When Communicable	Restriction	Notify DOHMH	Facility's Obligation
Allergies	N/A	Many of the symptoms seen in other illnesses: rashes, swelling, congested or running nose, wheezing, vomiting and diarrhea.	It is not transmitted for it is an abnormal sensitivity to certain substances.	Never	Follow physician's instructions.	Symptoms may be caused by other disease. See specific disease for additional info.	Obtain information from parent about child's allergies prior to admission. Request physician's recommendation.
Amebiasis	2 -4 weeks	Mild form of amebiasis includes nausea, loose stools, and stomach pain and cramping.	When a person ingests the cyst (or egg-like) stage of the parasite in contaminated food or water. Person-to-person fecal/oral transmission	If untreated with antibiotics	Exclude child until diarrhea is gone or until stool culture is normal. Child Care staff (i.e., cook) must receive approval from DOHMH prior to returning to child care	Yes	Implement proper hand washing techniques, especially wash hands between diaper changes. Notify parents.
Campylobacteriosis	1 to 7 days, but can be longer	Bloody diarrhea, fever, vomiting, abdominal cramping and malaise	Contact with infected birds, farm animals or pets, contaminated water, unpasteurized milk, contaminated food. Also person-to-person via fecal-oral transmission	If untreated, it can be communicable for 2 to 3 weeks.	Exclude child until diarrhea ceases	Yes	Readmit child once diarrhea has resolved or reverted to new stool pattern. Implement proper hand washing and food sanitization procedures. Notify parents.
Chickenpox (Varicella)* <i>Caused by Varicella-Zoster virus</i>	10-21 days	Mild fever, itching small red fluid filled bumps start on stomach or back and spread to face.	Spread through the air by sneezing and coughing on others, contact with mucus or saliva-contaminated articles. Direct contact with rash.	Two days before rash begins until last of rash is crusted and healing.	Exclude child until pox are scabbed over.	Yes, for 3 or more cases.	Notify parents. Sanitize all articles. Required immunization for children.

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Colds (Upper Respiratory Infections)	24-72 hrs.	Sore throat, stuffy nose, runny nose, sneezing.	Sneezing and coughing on others, contact with mucus contaminated articles.	Usually 24 hours before symptoms until 3 days after start of symptoms.		Symptoms may be caused by other disease. See specific disease for additional info.	Have children and staff wash hands often. Observe child for unusual complications. Use tissues when coughing or sneezing, discard and wash hands afterwards.
Coxsackie (Hand, Foot and Mouth Disease) Caused by coxsackie A16 virus	3-5 days	Fever, runny nose, sore throat. Blister-like rash may be on mouth, gums, tongue, feet and hands.	Direct contact with nose and throat discharges, blisters and feces.	From the start of first symptom until blister-like skin lesions are healed.	Exclude child with blisters in mouth who drool, or have weeping lesions, or until fever is gone.	Yes, for 3 or more cases.	Staff and children must use good hand-washing procedures and be careful of respiratory secretions. Wash and disinfect play surfaces and mouthed toys. Notify parents.
Cyclosporiasis		Diarrhea, vomiting, nausea, malaise, abdominal pain, loss of appetite and weight loss.	Person who ingests food or water contaminated with the parasite.		Exclude child until diarrhea is gone or until stool culture is normal.	Yes	Notify parents.
Diarrheal Diseases	24 hours	Abnormally loose stool.	Fecal-oral route, through contaminated articles and hands.	Varies depending on cause.	Exclude child until diarrhea is gone or until stool culture is normal.	Symptoms may be caused by other disease. See specific disease for additional info.	Wash hands between care of children, after toileting, and before handling food. Prepare food or formula aseptically and clean and sanitize all toys.
Diphtheria*	2-5 days	Sore throat, fever, croup, hoarseness, nasal discharge.	Sneezing and coughing on others, contaminated articles.	As long as bacteria are in the mouth or nose.	Exclude child from center until physician gives permission to return.	Yes	Notify parents. Sanitize all articles used by child. Required immunization for children and staff.

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Escherichia coli o157:H7 and other Shigatoxin producing bacteria	3 to 5 days	loose stool (may be bloody), abdominal pain and fever	Direct contact with infected and symptomatic person. From food or water contaminated with human or animal feces	When symptoms are present.	Exclude child until asymptomatic and two negative stool tests.	Yes	Notify parents. Supervise hand-washing and implement infection control measures..
Fifth Disease (<i>Erythema Infectiosum</i>) <i>Caused by Parvovirus B19</i>	4-15 days	High fever, "slapped cheek" appearing rash spreading throughout the body. Rash disappears quickly.	Sneezing and coughing on others, and mucus or saliva contaminated articles.	Uncertain - children are probably non-contagious once rash appears.		Yes, if 3 or more cases.	Wash hands frequently. Sanitize all articles used by children. Pregnant teachers/staff should advise physician of their exposure.
Food Poisoning (Staphylococcal Enterotoxin B)	4-10 hours	Sudden onset of fever, chills, headache and muscle pain. Also vomiting, nausea and diarrhea	Ingesting food or water contaminated with the toxin. Can also be airborne (biological attack)	Unknown.	Follow physician's instructions.	Yes	Notify parents.
Giardiasis (Beaver Fever) <i>Caused by Giardia, an intestinal parasite</i>	1-4 weeks, usually 7-10 days	Diarrhea (persistent or recurring), gas, stomach cramps, bloating, nausea and weight loss. Some infected children may show no symptoms.	Person to person, transmission by exposure to feces during diapering or toileting, or contaminated recreational or	Until parasite no longer in stool.	Exclude child until asymptomatic and two negative stool tests (48 hours after completing treatment).	Yes	Notify parents. Supervise hand-washing and follow protocol.
Haemophilus Influenzae Type B*	2-4 days	Major cause of meningitis, otitis media, epiglottitis, pneumonia.	Direct contact, inhalation of droplets from sneezing and coughing.	May be as long as bacteria is in the mouth or nose.	Exclude child. Return with physician's permission.	Yes	Notify parents. Required immunization for children.
Hepatitis A (Infectious Hepatitis) <i>Caused by Hepatitis A virus</i>	15-50 days, usually 25-30 days	Upset stomach, tired, dark-colored urine, light-colored stool, yellowish skin and eyes.	Fecal-oral route, through contaminated articles and hands.	Last half of the incubation period until 1 week after jaundice (yellowness) appears.	Exclude child for 1 week after jaundice (or symptom onset). Return with DOHMH permission.	Yes	Notify parents. Hand washing before and after using the toilet, diaper changing and eating; sanitizing all toys.

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Impetigo <i>Caused by Staph or Strep virus</i>	7-10 days	Blisters, crusts, scabs on skin which are fluid and yellow (may be weeping).	Direct contact with infected area or with nasal discharges from infected child.	As long as lesions with discharges are present.	Exclude child for 24 hours after treatment has been initiated.	Yes, if 3 or more cases.	Child and staff should wash hands frequently throughout the day. Notify parents.
Measles (Rubeola) <i>Caused by Measles virus</i>	7-18 days	Fever, cough, red inflamed eyes, runny nose, red brown blotchy rash on face that spreads to body.	Spread through the air by sneezing and coughing on others, contaminated articles.	4 days before the rash appears to 4 days after.	Exclude child until 5 days after the rash appears.	Yes	Notify parents. Sanitize all articles used by child. Required immunization for children and staff.
Meningitis - Bacterial <i>May be caused by other disease. See specific disease for additional info.</i> Meningitis - Viral <i>May be caused by other disease. See specific disease for additional info.</i>	2-10 days	Fever, headache, vomiting, chills, neck pain or stiffness, muscle spasms.	Sneezing and coughing on others, contact with mucus or saliva contaminated articles, or fecal-oral route depending upon organism involved.	Varies.	Exclude child. Return with physician's permission.	Yes	Notify parents. May require antibiotic prophylaxis for all contacts. Clean and sanitize all articles used by child.
Meningococcal Disease, invasive	2-10 days	Some may develop fever, headache, vomiting, stiff neck and a rash. Sometimes the disease can be fatal.	Direct close contact with nose or throat discharges of an infected person.	An infected person may be contagious from the time he or she is first infected until the germ is no longer present in discharges from the nose and throat.	Follow physician's instructions.	Yes	Notify parents. Vaccination may be required
Molluscum Contagiosum	2-7 weeks, and longer	Small flesh-colored bumps on skin that may have tiny, hard indented center lesions. May last several months.	Direct contact with infected individuals.	Unknown.	No exclusion. Do not let child scratch open lesion.	Yes, if 3 or more cases.	Careful and frequent hand washing. Do not share towels. Notify parents.

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Mumps (Parotitis)* <i>Caused by Mumps virus</i>	12-25 days	Swelling in front of ear, cold-like symptoms.	Secretions of the mouth and nose, contaminated articles.	2 days before to 5 days after swelling.	Exclude child until 5 days after swelling begins.	Yes	Notify parents. Sanitize all articles used by child. Required immunization for both children and staff.
Pediculosis (Head Lice) <i>Caused by Pediculus Capitis (the head louse)</i>	24-72 hours to 2 weeks	Severe itching, small lice eggs (nits) on hair, lice crawling through hair.	Direct contact with infected individuals or their clothing; article to article contact (e.g. coats, blankets, hats).	As long as lice or eggs remain alive. (Lice cannot survive off a human for longer than 2 days.)	Exclude child until treatment results in removal of lice and eggs (nits).	Yes, if 3 or more cases.	Vacuum to get rid of lice in environment. Send all clothing and bedding home to be washed in hot water. Notify parents.
Pertussis (Whooping Cough)* <i>Caused by Bordetella Pertussis bacterium</i>	7-21 days	Cough for 2 or more weeks with vomiting after cough, or rapid bursts of cough or whoop.	Sneezing and coughing on others, contaminated material.	When cold begins until 21 days after coughing begins or 5 days after starting antibiotic treatment.	Exclude child from center until 5 days after antibiotics are started and physician permits return.	Yes	Notify parents. Sanitize all articles used by child. Required immunization for children.
Pinkeye <i>(Conjunctivitis)</i> <i>Caused by various viruses or bacteria</i>	24-72 hours	Tearing, swollen eyelids, redness, purulent discharge from eyes.	Contact with discharge from eyes, nose or mouth, contaminated fingers and shared articles.	During the period of active symptoms.	Exclude child until drainage/secretion of eyes is gone.	Yes, if 3 or more cases.	Notify parents. Wash all items used by child. Staff and children must practice good hand hygiene.
Pneumonia	2 days - 4 weeks	Chills, fever, vomiting, chest pain, cough, reddish sputum.	Sneezing and coughing on others, contact with mucus contaminated articles.	Usually not contagious.	Exclude child until has recovered or has physician's permission to return.	Symptoms may be caused by other disease. See specific disease for additional info.	Sanitize all articles used by children.
Polio*	6-20 days	Flu symptoms, malaise, muscle weakness, nausea, vomiting, diarrhea.	Stool from infected person on hands or objects and respiratory secretions.	7-10 days before and after onset of symptoms.	Exclude child from center until physician gives permission to return.	Yes	Sanitize all articles used by child. Required immunization. Notify parents.

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Ringworm <i>Caused by various skin fungi</i>	4-10 days	Red, scaling lesions and broken hairs from skin/head.	Direct or indirect contact.	As long as lesions are active.	Exclude child until treatment has begun. Cover if possible when attending child care.	Yes, if 3 or more cases.	Wash all items used by infected child. (Put away play clothes and clean.) Notify parents.
Rubella (German Measles)* <i>Caused by Rubella virus</i>	12-23 days	Rash, red eyes, sore throat, headache, fever, swollen glands, and in adults, joint pain.	Sneezing and coughing on others, contaminated articles.	7 days before rash until 7 days after rash appears.	Exclude child for 7 days after rash appears.	Yes	Notify parents. Sanitize all articles used by child. Required immunization for children and staff.
Salmonellosis	1-3 days	Mild or severe diarrhea, fever and sometimes vomiting.	Person to person, by exposure to feces during diapering or toileting, or eating contaminated food.	As long as salmonella are present in the stool; potentially a number of weeks.	Exclude child until asymptomatic. Follow up stool culture is not required.	Yes	Notify parents. Symptomatic child should be seen by a physician for stool testing. Supervised hand-washing must be followed.
Scabies <i>Caused by Scabies mite</i>	2-6 weeks, 1-4 days in persons previously infested	Scratching usually between fingers and skin folds.	Direct contact.	As long as mites are alive.	Exclude child until 24 hours after treatment has started.	Yes, if 3 or more cases.	Wash all bedding and clothing in hot water. Notify parents.
Scarlet Fever (Strep A) <i>Caused by Group A Beta Hemolytic Strep</i>	2-5 days	Sore throat, fever, headache, rough red rash on body and flushed face.	Sneezing and coughing on others; mucous or saliva contaminated articles.	1-3 days before symptoms until child has been on antibiotics for 24 hours.	Exclude child until has been on antibiotics for 24 hours.	Yes, if 3 or more cases.	Encourage hand washing, especially after coughing and sneezing, and before preparing foods or eating. Sanitize all articles used
Shigellosis <i>Caused by Shigella bacterium</i>	1-7 days, usually 2-3 days	Mild or severe diarrhea, fever, sometimes with traces of blood or mucus in stool.	Person-to- person by exposure to feces during toileting or diapering.	As long as shigella is present in stool.	Exclude until asymptomatic and two negative stool tests. May return with DOHMH permission.	Yes	Symptomatic child should be excluded. Supervised hand washing is important. Notify parents.

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Tetanus*	3-21 days	Spasms and even paralysis	Certain bacteria in soil enters body through cuts and wounds.	N/A	N/A	Yes	Clean all cuts, scrapes and puncture wounds with soap and water. Required immunization for children and staff. Notify parents.
Positive TB test (positive PPD skin test or positive blood test)	Bacteria can be carried in the body for many years without active disease	Chronic cough, weight loss, fever, growth delay, night sweats and chills	Infants and young children: not contagious. Adolescents/adults: spread by coughing and contaminating the environment as long as the disease is active	Close contact with adult who has TB, Through coughing, sneezing. When disease is active	Exclude child until effective therapy has started. Return with physician's permission or DOHMH.	Yes	Notify parents.
Typhoid	1 to 2 weeks	mild or severe may include fever, headache, diarrhea, constipation (stool that is hard and dry, or difficult to pass) rose-colored spots on the chest, back or stomach, and an enlarged spleen and liver	Typhoid germs are passed in the stool (feces) and sometimes in the urine of infected people. The germs are spread by eating or drinking water or foods contaminated by stool from an infected person.	Unknown.	Exclude child until asymptomatic and two documented negative stools	Yes	Notify parents.
Yersiniosis (<i>Yersinia Enterocolitica</i>/<i>Pseudotuberculosis</i>)	3-6 days	Diarrhea, fever, and abdominal discomfort. Symptoms may mimic appendicitis.	Yersiniosis is spread by eating or drinking contaminated food or water	Unknown.	Since <i>Yersinia</i> bacteria are in the stool (feces), only people with active diarrhea who are unable to control their bowel habits (e.g., infants, young children) should be excluded.	Yes	Symptomatic child should be excluded. Supervised hand washing is important. Infection control methods must be implemented.

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