Emmaus Christian School

Medical Policy: DISEASES and Exclusion Periods

If a child is unwell, he/she is not to be sent to school. If a child becomes ill whilst at school, parents will be contacted to collect the child. For this purpose, parents should always ensure their contact details are kept up to date with the School Office.

The following guidelines have been drawn up on the premise that children who have been ill with an infectious disease will not return to school until they have fully recovered. The only exception to this rule is that children with certain skin diseases may return once appropriate treatment has commenced. These recommended periods are issued as a guide to teaching staff and medical practitioners, and may be modified in individual cases as circumstances warrant.

Variations to the recommendations may be warranted in cases of local epidemics. In cases of doubt, or for guidance about conditions not mentioned on the list, advice should be sought from the appropriate clinician or health authority medical officer.

IMMUNISATION: All children should be immunised against measles, mumps, rubella, poliomyelitis, diphtheria, pertussis and tetanus, according to the NHMRC recommended schedule before entry into a day care centre, preschool or school. Therefore the need to exclude cases should not arise. Upon accepting a place in the Preschool/School, families with non-immunised children should provide the school with a letter indicating such and accepting responsibility for any consequence thereof.

Non-immunised contact with a vaccine-preventable disease of childhood should be referred to a medical practitioner or an immunisation clinic. These guidelines include a brief description of the illness and associated symptoms. It is a guide only and is not intended to be comprehensive. Further advice and information can be sought from your local doctor.

Condition Chicken Pox (Varicella and Herpes zoster)
[Vaccinations against chicken pox are available from a GP]
General symptoms of fever and lethargy tend to be mild, followed by an itchy rash of small blisters which then become crusted and scabby. Herpes zoster (shingles) is the chicken pox virus reactivated, with a painful blistering rash limited to a small area on one side of the body only.
Cases Exclude until fully recovered or at least 5 days after the eruption first appears. Note – some remaining scabs are not an indication for continued exclusion.
Contacts Any child with an immune deficiency (eg Leukaemia or receiving chemotherapy) should be excluded for their own protection. Otherwise not excluded.

Condition Conjunctivitis (Acutely infectious)
Redness and purulent (containing pus) discharge from the eyes; usually both eyes are involved.
Cases Exclude until discharge from eyes has ceased.
Contacts Not excluded

Condition Diarrhoea (Rotavirus, Shigella, Giardia, Salmonella, Campylobacter)
Cases Exclude until diarrhoea has ceased.
Contacts Not excluded

Condition Diphtheria
Diphtheria is now very rare in Australia, but is potentially fatal. Immunisation against it is part of the routine childhood immunisation schedule. Symptoms may include fever, sore throat, obstruction to breathing, other organ systems may then be affected such as heart, kidneys and nervous system.
Cases Exclude until medical certificate of recovery following at least two negative throat swabs, the first not less than 24 hours after cessation of antibiotic treatment and the other 48 hours later.
Contacts Exclude family/household contacts until cleared to return by an appropriate health authority.

Condition Glandular Fever
A viral illness lasting at least several weeks, causing fever, loss of appetite, headache, sore throat and enlarged lymph glands amongst other symptoms. The illness may go unnoticed in children.
Cases Exclusion is not necessary
Contacts Not excluded
**Condition: Hepatitis A**

Hepatitis A is a viral illness affecting the liver. It is transmitted via the faecal-oral route. Symptoms may include loss of appetite, nausea and/or vomiting, upper abdominal discomfort, lethargy and mild fever, followed by dark urine and jaundice.

**Cases** Exclude until receipt of a medical certificate of recovery but not before 7 days after the onset of jaundice.

**Contacts** Not excluded.

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**Condition: Hepatitis B**

Transmission is through blood and other body fluids. The symptom profile is similar to Hepatitis A, but a carrier state may develop. Immunisation is available through your local doctor.

**Cases** Exclusion is not necessary.

**Contacts** Not excluded.

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**Condition: Hepatitis C**

Transmission is mainly blood borne and rarely through other body fluids. Infection may be subclinical or mild, or may have features of Hepatitis A or Hepatitis B. However, development of a carrier state is common.

**Cases** Exclusion is not necessary.

**Contacts** Not excluded.

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**Condition: Human Immunodeficiency Virus Infection (HIV)**

Manifestations of HIV are very variable and further information should be obtained from your local doctor if required.

**Cases** Exclusion is not necessary unless the person has secondary infection requiring exclusion in its own right.

**Contacts** Not excluded.

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**Condition: Impetigo (School sores)**

A contagious superficial skin infection, may look like crusted scabs or blisters.

**Cases** Exclude until appropriate treatment has commenced and sores on exposed surfaces are covered with a dressing.

**Contacts** Not excluded.

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**Condition: Measles**

Measles is a highly contagious viral infection, causing initially high fever, lethargy, cough, runny nose and conjunctivitis, followed a few days later by a bright red spotty rash. Immunisation is available through the routine childhood immunisation schedule.

**Cases** Excluded for at least 4 days from the appearance of rash.

**Contacts** Immunised contacts not excluded. Non-immunised contacts should be excluded until 14 days after the first day of rash in the last case. If non-immunised contacts are vaccinated within 72 hours of their first contact with the index case, they may return to school.

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**Condition: Meningitis (Bacterial)**

This is a very serious infection of the lining of the brain. Symptoms may include fever, headache, vomiting and neck stiffness.

**Cases** Exclude until well.

**Contacts** Not excluded.

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**Condition: Meningococcal Infection** [Vaccinations are available through your local GP]

A potentially devastating bacterial infection which may cause meningitis, septicaemia and failure of every organ system. Symptoms include high fever, vomiting, general prostration and rash. Urgent treatment is required.

**Cases** Exclude until well.

**Contacts** Not excluded.

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**Condition: Mumps**

Mumps is a viral illness, relatively mild, which causes high fever, headache, malaise (not feeling well) followed several days later by swelling of the salivary glands, especially the parotid glands (just in front of the ears). Immunisation is part of the routine childhood schedule.

**Cases** Exclude for at least 9 days after onset of symptoms.

**Contacts** Not excluded.

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**Condition: Poliomyelitis**

Polio is very rare in the Australian community since routine childhood immunisation was
introduced.
In serious cases of polio paralysis of muscles may occur as a result of damage to the nervous system.

**Cases** Exclude for at least 14 days from onset. Re-admit on a medical certificate of recovery.

**Contacts** Not excluded.

**Condition Ringworm**
This is caused by a fungal skin infection. The appearance is “ring-like” due to a red scaly rash peripherally, with the central part clearing.

**Cases** Exclude until the day after treatment has commenced.

**Contacts** Not excluded, but regularly inspected.

**Condition Scabies**
Is a skin infestation caused by the scabies mite burrowing into the skin. It causes a widespread itchy lumpy rash.

**Cases** Exclude until the day after treatment has commenced.

**Contacts** Not excluded, but regularly inspected.

**Condition Head lice**
The main symptom is an itchy scalp! The adult lice are difficult to find so look for the eggs (nits) which are oval greyish-white capsules clinging firmly to the hair shafts close to the scalp. It is preferable that students found with Head Lice are collected by their parents to be treated ASAP.

**Cases** Exclude until the day after treatment has commenced. Hair should be free of nits.

**Contacts** Not excluded, but regularly inspected.

**Condition Trachoma**
Rare in the Canberra community – a scarring form of conjunctivitis and corneal infection.

**Cases** Exclude until discharge from eyes has ceased.

**Contacts** Not excluded.

**Condition Rubella (German Measles)**
Rubella is a virus causing a mild illness in adults and children; however it can be devastating to the developing foetus if a pregnant woman gets it. Symptoms are generally mild and include a fine generalised rash, low grade fever, enlargement of the neck glands and possibly conjunctivitis and joint inflammation. It is included in the routine childhood immunisation schedule.

**Cases** Exclude until fully recovered or for at least 4 days after the onset of rash.

**Contacts** Not excluded. Note: Female staff of childbearing age should ensure that their immune status against rubella is adequate.

**Condition Streptococcal Infection (including Scarlet Fever)**
Streptococcal infection may be associated with tonsillitis, pharyngitis or skin infections. Scarlet fever is a streptococcal infection with fever, vomiting, sore throat and a generalised red rash. It requires treatment with antibiotics.

**Cases** Exclude until person has received antibiotic treatment for at least 24 hours and the person feels well.

**Contacts** Not excluded.

**Condition Tuberculosis**
Is uncommon in Australia. It usually presents with general symptoms of poor health, weight loss, night sweats, and cough. It commonly affects the lungs but may involve every organ system, therefore manifestations are very variable.

**Cases** Exclude until production of medical certificate from appropriate health authority.

**Contacts** Not excluded.

**Condition Typhoid and Paratyphoid Fever**
Not a risk to the general population; mainly seen in returned travellers who have visited countries with poor sanitation. Paratyphoid is uncommon but is an occasional result of food poisoning, causing fever, headache, abdominal pain and constipation or diarrhoea.

**Cases** Exclude until production of a medical certificate of recovery.

**Contacts** Not excluded.

**Condition Whooping Cough (Pertussis)**
This is a contagious respiratory disease. Initial symptoms are sneezing and mild cough, then
the cough becomes severe with paroxysms characterized by an aspiratory "whoop". the cough can last three months. In older children and adults it may be a milder illness. Pertussis is included in the routine childhood immunisation schedule.

**Cases** Exclude for five days after starting antibiotic treatment.

**Contacts** Exclude unimmunised household contacts, aged less than 7 years, for 14 days after the last exposure to infection or until they have received 5 days of a 14 day course of antibiotics.