

HEAD START COMMUNITY PROGRAM OF MORRIS COUNTY, INC. POLICY ON THE MANAGEMENT OF ILLNESS AND COMMUNICABLE DISEASES

Children should not attend school if they are ill. Parents may be called to take their child home if the child shows any of the following symptoms:

- Pain or discomfort
- Diarrhea
- Vomiting
- Elevated oral temperature of 101° F degrees or higher
- Sore throat or severe coughing
- Yellow eyes or jaundiced skin
- Red eyes with discharge
- Infected skin patches if untreated
- Difficulty with or rapid breathing
- Skin rashes
- Swollen joints
- Visibly enlarged lymph nodes
- Stiff neck
- Blood in urine
- Weeping or bleeding skin lesions that have not been treated by a health care provider (If a child has chicken pox, the child may return to the center with a note from the parent stating either that at least six days has elapsed since the onset of the rash, or that all sores have dried and crusted.)

Once the child is symptom-free for 24 hours, or a health care provider indicates that the child poses no serious health risk to himself or herself or to other children, the child may return to the center unless contraindicated by the local, state, or federal Department of Health.

A child or staff member who contracts an excludable communicable disease may not return to the center without a health care provider's note stating that the child presents no risk to himself/herself or others. If a child is exposed to any excludable disease at the center, parents will be notified in writing.

Some excludable communicable diseases must be reported to the Health Department by Head Start. Please refer to attached list of the Department of Health's Reporting Requirements for Communicable Diseases and Work-Related Conditions Quick Reference Guide.

HEAD START COMMUNITY PROGRAM OF MORRIS COUNTY, INC. POLIZA SOBRE EL MANEJO DE LA ENFERMEDAD Y ENFERMADES CONTAGIOSAS

Su niño/a no debe asistir a la escuela si está enfermo/ Los padres podrán ser notificados para recoger el niño/a de la escuela, si muestran los siguientes síntomas.

- Dolores o molestias
- Diarrea
- Vómito
- Temperatura oral elevada a 101 ° grados
- Dolor de garganta y tos severa
- Ojos amarillentos o ictericia en la piel
- Irritación en los ojos con segregación
- Manchas infectadas en la piel sin tratamiento
- Dificultad o aceleramiento en la respiración
- Irritaciones o sarpullidos en la piel
- Inflamación en las articulaciones
- Inflamación visible de glándulas linfáticas
- Rigidez en el cuello
- Sangre en la orina
- Lesiones en la piel con supuración que no han sido tratadas por un proveedor de atención médica. (Si un niño tiene varicela, el niño puede regresar al centro con una nota del padre indicando que han transcurrido al menos seis días desde el inicio de la erupción, o que todas las llagas se secaron y tienen costra.)

Una vez el niño esté libre de síntomas por 24 horas o que un proveedor de atención médica indique que el niño no posee riesgos serios para él mismo (ella misma) o para otros niños, el niño podrá regresar al centro a menos que haya sido contraindicado por el Departamento de Salud local, del estado o federal.

Un niño o miembro de la facultad que contraiga una enfermedad contagiosa excluible no podrá regresar al centro sin nota de un médico indicando que el niño no presenta ningún riesgo a sí mismo o a otros. Si un niño es expuesto a cualquier enfermedad excluible en el centro, los padres serán notificados por escrito.

Algunas enfermedades excluibles deberán ser reportadas por Head Start al Departamento de Salud. Por favor, refiérase a la lista adjunta de Requisitos de Reporte del Departamento de Salud para Enfermedades Transmisibles y la Guía de Referencia Rápida de Condiciones Relacionadas con el Trabajo.

Quick Reference

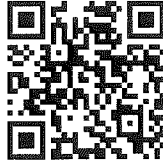


Reporting Requirements for Communicable Diseases and Work-Related Conditions



(see New Jersey Administrative Code Title 8, Chapters 57 and 58)

Communicable Disease Service
Disease Reporting Requirements and
Regulations can be viewed at:
<http://nj.gov/health/cd/reporting.shtml>



Health care providers required to report: physicians, advanced practice nurses, physician assistants, and certified nurse midwives.

Administrators required to report: persons having control or supervision over a health care facility, correctional facility, school, youth camp, child care center, preschool, or institution of higher education.

Laboratory directors: For specific reporting guidelines, see NJAC 8:57-1.7.

CONFIRMED or SUSPECT CASES TELEPHONE IMMEDIATELY to the LOCAL HEALTH DEPARTMENT

- Anthrax
- Botulism
- Brucellosis
- Diphtheria
- Foodborne intoxications (including, but not limited to, ciguatera, paralytic shellfish poisoning, scombroid, or mushroom poisoning)
- *Haemophilus influenzae*, invasive disease
- Hantavirus pulmonary syndrome
- Hepatitis A, acute
- Influenza, novel strains only
- Measles
- Meningococcal invasive disease
- Outbreak or suspected outbreak of illness, including, but not limited to, foodborne, waterborne or nosocomial disease or a suspected act of bioterrorism
- Pertussis
- Plague
- Poliomyelitis
- Rabies (human illness)
- Rubella
- SARS-CoV disease (SARS)
- Smallpox
- Tularemia
- Viral hemorrhagic fevers (including, but not limited to, Ebola, Lassa, and Marburg viruses)

Cases should be reported to the **local health department** where the patient resides. If patient residence is unknown, report to your **own** local health department. Contact information is available at: localhealth.nj.gov.

If the individual does not live in New Jersey, report the case to the New Jersey Department of Health at: 609-826-5964.

In cases of **immediately reportable diseases** and other **emergencies** - if the local health department cannot be reached - the New Jersey Department of Health maintains an emergency after hours phone number: 609-392-2020.

REPORTABLE WITHIN 24 HOURS OF DIAGNOSIS to the LOCAL HEALTH DEPARTMENT

- Amoebiasis
- Animal bites treated for rabies
- Arboviral diseases
- Babesiosis
- Campylobacteriosis
- Cholera
- Creutzfeldt-Jakob disease
- Cryptosporidiosis
- Cyclosporiasis
- Diarrheal disease (child in a day care center or a foodhandler)
- Ehrlichiosis
- *Escherichia coli*, shiga toxin producing strains (STEC) only
- Giardiasis
- Hansen's disease
- Hemolytic uremic syndrome, post-diarrheal
- Hepatitis B, including newly diagnosed acute, perinatal and chronic infections, and pregnant women who have tested positive for Hep B surface antigen
- Influenza-associated pediatric mortality
- Legionellosis
- Listeriosis
- Lyme disease
- Malaria
- Mumps
- Psittacosis
- Q fever
- Rocky Mountain spotted fever
- Rubella, congenital syndrome
- Salmonellosis
- Shigellosis
- *Staphylococcus aureus*, with intermediate-level resistance (VISA) or high-level-resistance (VRSA) to vancomycin only
- Streptococcal disease, invasive group A
- Streptococcal disease, invasive group B, neonatal
- Streptococcal toxic shock syndrome
- *Streptococcus pneumoniae*, invasive disease
- Tetanus
- Toxic shock syndrome (other than Streptococcal)
- Trichinellosis
- Typhoid fever
- Varicella (chickenpox)
- Vibriosis
- Viral encephalitis
- Yellow fever
- Yersiniosis

REPORTABLE DIRECTLY to the NEW JERSEY DEPARTMENT OF HEALTH

Hepatitis C, acute and chronic, newly diagnosed cases only
Written report within 24 hours

HIV/AIDS

609-984-5940 or 973-648-7500
Written report within 24 hours

- AIDS
- HIV infection
- Child exposed to HIV perinatally

Sexually Transmitted Diseases

609-826-4869

Report within 24 hours

- Chancroid
- Chlamydia, including neonatal conjunctivitis
- Gonorrhea
- Granuloma inguinale
- Lymphogranuloma venereum
- Syphilis, all stages and congenital

Tuberculosis (confirmed or suspect cases)

609-826-4878

Written report within 24 hours

Occupational and Environmental Diseases, Injuries, and Poisonings

609-826-4920

**Report within 30 days after
diagnosis or treatment**

- Work-related asthma (possible, probable, and confirmed)
- Silicosis
- Asbestosis
- Pneumoconiosis, other and unspecified
- Extrinsic allergic alveolitis
- Lead, mercury, cadmium, arsenic toxicity in adults
- Work-related injury in children (< age 18)
- Work-related fatal injury
- Occupational dermatitis
- Poisoning caused by known or suspected occupational exposure
- Pesticide toxicity
- Work-related carpal tunnel syndrome
- Other occupational disease

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www.nj.gov/health/cd