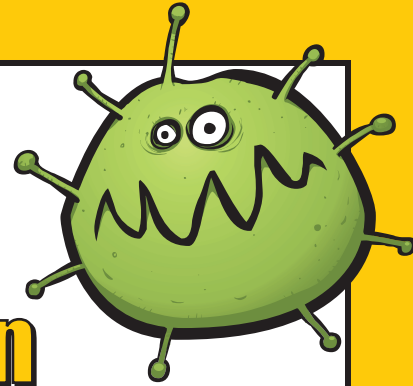


Guidelines for Infectious Diseases Reporting & Exclusion



**HEALTH
DEPARTMENT**

DURHAM REGION HEALTH DEPARTMENT

Fax: 905-666-6215

Phone: 905-668-7711 or 1-800-841-2729

Monthly Reporting.....ext. 2996

Immediate Reporting.....ext. 2996

Disease Outbreaks/Rabies Exposure.....905-723-3818 ext. 2188

Environmental Help Line.....905-723-3818 ext. 2188

Durham Health Connection Line.....905-666-6241

www.durham.ca

2011

Information available in accessible formats.



INFECTIOUS DISEASES REPORTING GUIDELINES

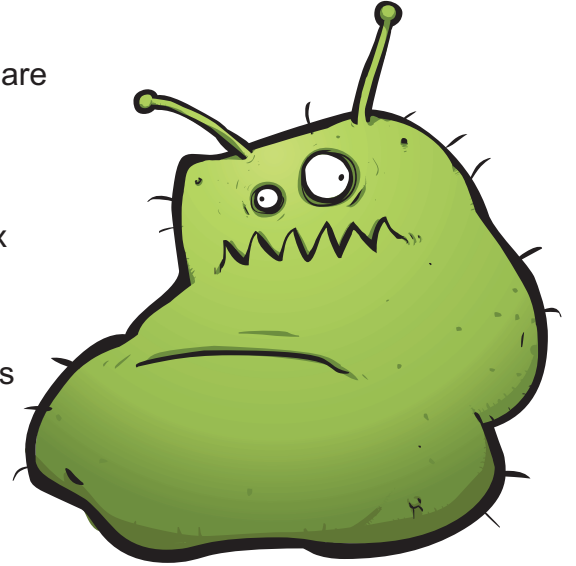
Ontario Regulation 559/91 under the Health Protection and Promotion Act requires that institutions promptly report known or suspected cases of reportable diseases (see chart of reportable diseases).

Use this flipchart to help you make your report. Diseases are categorized in colour-coded sections as follows:

- **GREEN** is for routine monthly reporting
- **PINK** require immediate reporting by telephone or fax
- **ORANGE** require next business day reporting
- **PURPLE** require prompt reporting of disease outbreaks
- **BLUE** contains diseases of interest
- **YELLOW** lists What Can You Do to Stay Healthy?

Reportable Diseases Chart on back

Specific guidelines are included in those sections where reporting is required.

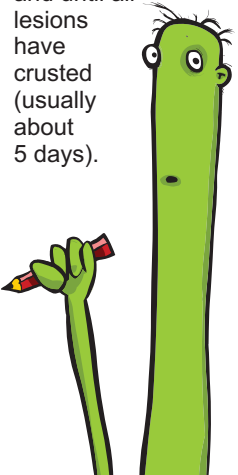


INTRODUCTION

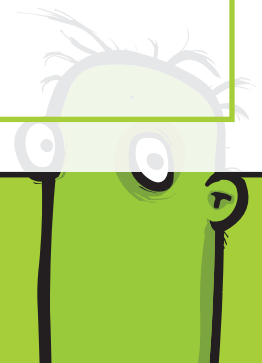


MONTHLY REPORTING

Report cases of chickenpox by completing the Monthly Notification of Chickenpox form and submitting it each month to the Durham Region Health Department.

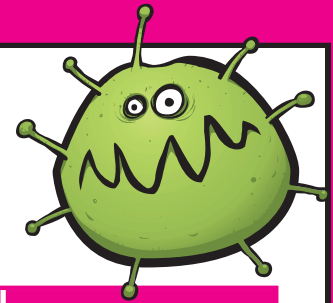
DISEASE	HOW IS IT SPREAD?	SYMPTOMS	WHEN IS IT CONTAGIOUS?	EXCLUSION REQUIREMENTS
<p>CHICKENPOX (Varicella-zoster)</p> <p><i>Virus</i>, very contagious.</p> <p>*Vaccine Preventable.</p>	<p>Person to person through saliva, sneezing/coughing, and direct contact with fluid from the blisters.</p>	<p>Fever, itchy rash. Rash first appears as tiny red dots, quickly filling with clear fluid (blisters), and then eventually crusting over and becomes itchy. Lesions appear on chest, back, stomach, and spread to other parts of the body.</p>	<p>1-2 days before onset of lesions and until all lesions have crusted (usually about 5 days).</p> 	<p><u>Exclusion:</u> Not usually recommended if children are well enough to attend and participate fully in activities.</p> <p><u>Report:</u> Monthly to the Health Department.</p>

MONTHLY REPORTING



IMMEDIATE REPORTING

Report by telephone to the Durham Region Health Department.
Your immediate response will ensure prompt follow-up and prevent the spread of disease.

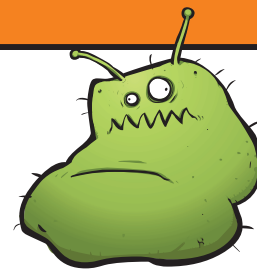


DISEASE	HOW IS IT SPREAD?	SYMPTOMS	WHEN IS IT CONTAGIOUS?	EXCLUSION REQUIREMENTS
<p>MEASLES</p> <p><i>Virus</i>, very infectious.</p> <p>*Vaccine preventable.</p>	<p>Person to person through particles in the air, sneezing/coughing, by direct contact with nose and throat secretions and less commonly by articles freshly soiled with nose and throat secretions.</p>	<p>Fever, cough, red watery eyes, runny nose, small spots with white or bluish-white centres on a red base inside the cheek (Koplik spots). The rash begins on the face as small red spots, which enlarge to clump together and then spread over the entire body. Appears on day 3-7, lasting 4-7 days.</p>	<p>4 days before and 4 days after onset of rash.</p>	<p>Exclusion: 4 days after onset of rash.</p> <p>Report: <i>Immediately</i> to the Health Department.</p>
<p>MENINGITIS</p> <p><i>Bacteria</i>, very serious infection.</p> <p>Some cases are vaccine preventable.</p>	<p>Person to person through sneezing/coughing and by direct contact with nose and throat secretions.</p>	<p>Sudden fever, intense headache, chills, nausea, vomiting, lethargy, neck stiffness, eyes are sensitive to light. May have a red blotchy, pinpoint or bruise-like rash. Infants may be irritable, feed poorly, vomit, and be less active.</p>	<p>Up to 7 days before* onset of symptoms and until 24 hours after prescribed treatment. *must be direct contact with nose/throat secretions.</p>	<p>Exclusion: 24 hours after prescribed treatment has been initiated, and a doctor has determined that they have recovered and are well enough to participate comfortably in all program activities.</p> <p>Report: <i>Immediately</i> to the Health Department.</p>
<p>RABIES EXPOSURE (suspected)</p> <p><i>Virus</i>, very serious infection.</p>	<p>Through the bite or scratch of a warm blooded mammal, including, dogs, cats, skunks, raccoons and bats. Found in the saliva of the rabies infected mammal.</p>	<p>Early symptoms in humans are non-specific-fever, headache, general malaise. As disease progresses neurological symptoms appear.</p>	<p>For dogs and cats: 3-7 days before the onset of symptoms and throughout the course of disease. Longer for other animal species.</p>	<p>Exclusion: None</p> <p>Report: <i>Immediately</i> to the Health Department all animal bites or other animal contact that could result in human rabies. Call 905-723-3818 ext. 2188.</p>

IMMEDIATE REPORTING

NEXT BUSINESS DAY REPORTING

Report by telephone to the Durham Region Health Department.
Your immediate response will ensure prompt follow-up and prevent the spread of disease.



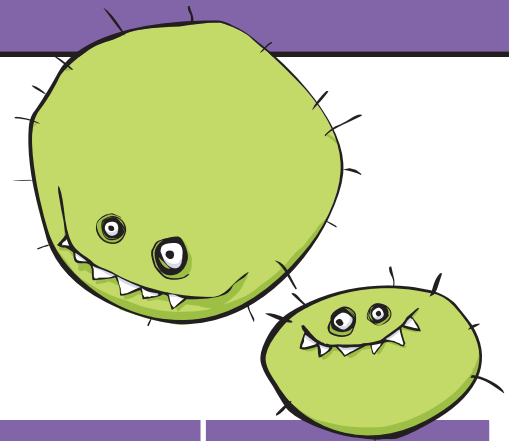
DISEASE	HOW IS IT SPREAD?	SYMPTOMS	WHEN IS IT CONTAGIOUS?	EXCLUSION REQUIREMENTS
<p>PERTUSSIS (Whooping Cough)</p> <p><i>Bacteria</i>, very infectious.</p> <p>*Vaccine Preventable.</p>	<p>Person to person through coughing and sneezing.</p>	<p>Begins with mild respiratory symptoms such as a runny nose and the cough progresses and gradually gets worse after 1-2 weeks, characterized by episodes of repeated coughing until vomiting, gagging, and/or a "whoop" sound is heard. It is a serious infection for infants under 1 year, who often do not have the typical whoop.</p>	<p>Up to 3 weeks after onset of cough if not treated with antibiotics, or until 5 days after initiating appropriate antibiotics.</p>	<p>Exclusion: 5 days after appropriate antibiotics have been initiated OR if no antibiotics initiated, 3 weeks after onset of the coughing spells.</p> <p>Report: Next business day to Health Department.</p>
<p>MUMPS</p> <p><i>Virus</i></p> <p>*Vaccine Preventable.</p>	<p>Person to person through coughing/sneezing, droplet spread. Direct contact with saliva of an infected person.</p>	<p>Fever, swelling and tenderness of salivary gland(s) (usually the parotid glands, located within the cheek, near the jaw line). Children often have respiratory symptoms.</p>	<p>Up to 7 days before swelling begins to 9 days after the onset. Most infectious 2 days before to 4 days after onset of swelling.</p>	<p>Exclusion: Follow up with Health Department for recommendations.</p> <p>Report: Next business Day to the Health Department.</p>
<p>RUBELLA (German Measles)</p> <p><i>Virus</i>, very infectious.</p> <p>*Vaccine Preventable.</p>	<p>Person to person through sneezing/coughing and by direct contact with nose and throat secretions.</p>	<p>Mild in children. Low fever, rash with small red spots, swollen glands in the neck and behind the ears. Muscle and joint discomfort occur more commonly in teens and adults, very rarely in children.</p>	<p>1 week before to 7 days after onset of the rash.</p>	<p>Exclusion: 7 days after onset of the rash.</p> <p>Report: Next business day to the Health Department.</p>

NEXT BUSINESS DAY REPORTING



SUSPECTED DISEASE OUTBREAKS

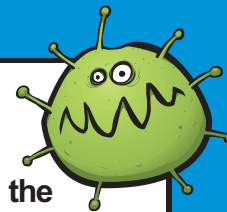
Report these suspected disease outbreaks immediately to the Durham Region Health Department at 905-723-3818 ext. 2188. When sudden abrupt increases in absenteeism are noted, extra surveillance is needed to identify an outbreak. Outbreaks usually exhibit the following patterns:



OUTBREAK	SYMPTOMS	REPORTING	EXCLUSION REQUIREMENTS
<p>Respiratory infections/ Influenza-like illness</p> <p>Usually caused by viruses.</p> <p>Some cases are vaccine preventable.</p>	<p>May include 2 or more of the following: runny nose, cough, sore throat, nasal congestion, fever >38°C/chills, muscle aches, tiredness, headache.</p>	<p>Report to the Health Department when there is an increase in the usual number of children or staff who have reported or are absent with similar signs and symptoms of illness in your facility.</p>	<p>Symptomatic persons should remain at home.</p>
<p>Gastroenteritis / Food borne illness</p> <p>Usually caused by viruses and bacteria.</p>	<p>May include nausea, vomiting, diarrhea, fever, chills, headaches, stomach cramps.</p>	<p>Report to the Health Department when there is an increase in the usual number of children or staff who have reported or are absent with similar signs and symptoms of illness in your facility.</p>	<p>Symptomatic persons should remain at home until a minimum of 24 hours symptom-free or as otherwise directed.</p>
<p>Environmental Hazards</p>	<p>May include unexplained eye irritation, breathing problems, dizziness, rash.</p>	<p>Report to the Health Department when there is an increase in the usual number of children or staff who have reported or are absent with similar signs and symptoms of illness in your facility.</p>	

SUSPECTED DISEASE OUTBREAKS

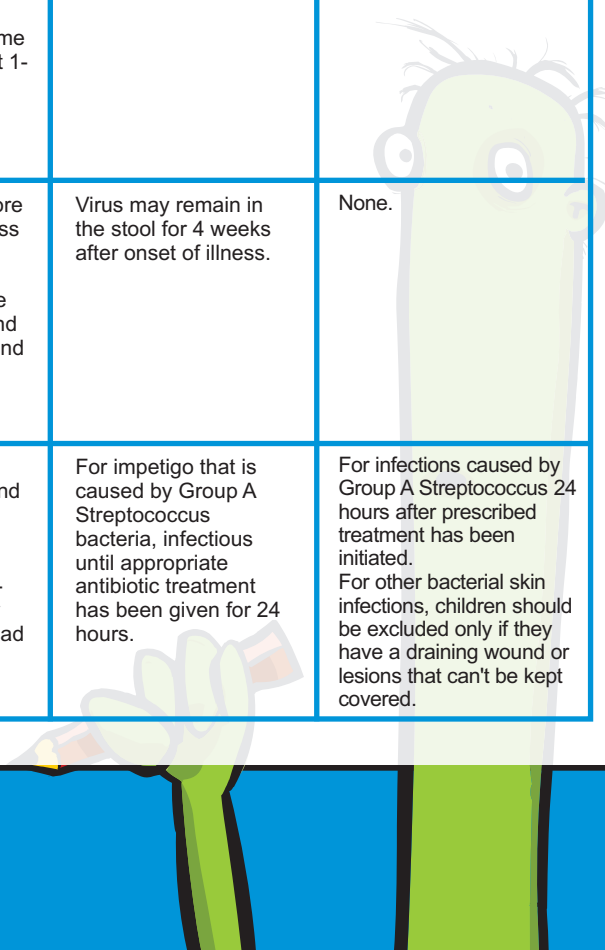




DISEASES OF INTEREST

These diseases are not reportable but may require medical intervention. If an increase in the number of cases of a disease is identified, please contact Durham Region Health Department.

DISEASE	HOW IS IT SPREAD?	SYMPTOMS	WHEN IS IT CONTAGIOUS?	EXCLUSION REQUIREMENTS
CONJUNCTIVITIS (Pink Eye) <i>Bacteria</i> or <i>Viral</i>	Person to person through sneezing/ coughing, direct contact with eye secretions or sharing articles contaminated with an infected person's eye secretions.	Eye(s) become watery, white part of eye turns pink/red, scratchy feeling, pus or discharge from the eye(s) makes eyelids sticky during sleep.	Bacterial: Until 24 hours of appropriate antibiotic treatment received. Viral: Infectious as long as there is eye discharge.	Until examined by a physician. If bacterial, child can return to the program after 24 hours of appropriate antibiotic treatment. If viral, child can return with doctor's approval.
FIFTH DISEASE <i>Virus</i>	Person to person through coughing/sneezing, saliva, sharing contaminated articles (eating/drinking utensils). Can also be transmitted from mother to child before birth.	Low grade fever, feeling generally unwell or mild cold symptoms Rash may appear on face that resembles cheeks being slapped, followed after 1-4 days by a lacy red rash on the trunk, arms then over the rest of the body. Rash may come and go over the next 1-3 weeks fluctuating with environmental changes such as temperature.	Several days before the rash appears. No treatment required. Most adults are immune to this virus.	None.
HAND, FOOT & MOUTH <i>Virus</i>	Person to person through direct or indirect contact with the virus present in an infected person's saliva or stool.	May cause fever, sore throat and mouth, loss of appetite, lack of energy and a rash. Sores develop inside cheeks, on gums, and on sides of tongue and spreads to palms of hands, fingers, and soles of feet.	Virus may remain in the stool for 4 weeks after onset of illness.	None.
IMPETIGO <i>Bacteria</i>	Person to person by touching the infected draining skin lesions or indirectly through soiled objects that have been in contact with infected skin.	Most commonly affecting areas around mouth, and nose. Blisters fill with fluid and break open, leaving thick golden-yellow crusts. It may itch and can be spread to other areas by scratching.	For impetigo that is caused by Group A Streptococcus bacteria, infectious until appropriate antibiotic treatment has been given for 24 hours.	For infections caused by Group A Streptococcus 24 hours after prescribed treatment has been initiated. For other bacterial skin infections, children should be excluded only if they have a draining wound or lesions that can't be kept covered.



DISEASE	HOW IS IT SPREAD?	SYMPTOMS	WHEN IS IT CONTAGIOUS?	EXCLUSION REQUIREMENTS
PINWORM INFECTION <i>Parasite</i>	Direct transfer of infective eggs by hand from anus to mouth or from an object that has eggs on its surface.	Itchiness or irritation of the anal area, disturbed sleep and irritability.	As long as worms or eggs are present. The eggs survive for up to 3 weeks indoors.	None.
SHINGLES (Zoster) <i>Virus</i>	Occurs only in people who have already had chickenpox. Person to person through direct contact with shingle lesions or articles freshly soiled by discharges from lesions.	Reactivation of dormant chicken pox infection. Fluid-filled blisters with a red base appear along nerve pathways and are generally only on one side of body. Very painful.	When lesions are exposed/not covered and up to one week after appearance of lesions.	Exclusion not necessary if lesions are covered.
SCARLET FEVER <i>Bacteria</i>	Person to person through coughing/sneezing and saliva.	Sore throat, fever, swollen tender neck glands, pink-red "sandpaper" rash, "strawberry tongue" (whitish coating on the tongue with bright red patch). Usually the rash does not involve the face and starts on upper body and may spread to the trunk and limbs.	Infectious from onset of illness or until 24 hours after appropriate antibiotic treatment has been given.	24 hours after appropriate antibiotic treatment has been given.
RINGWORM <i>Fungus</i>	Person to person through direct contact with rash/fungus or indirect contact with contaminated articles (e.g. shared combs, unwashed clothes, or shower or pool surfaces). Can also be acquired from pets, especially cats.	Flat, ring-shaped, or round rash with a raised edge around it. Spreads easily. May be dry and scaly or moist and crusted. Can spread to scalp, leaving a scaly, <u>temporary</u> bald spot.	As long as untreated and/or uncovered sores are present.	Until the first treatment has been applied.

DISEASES OF INTEREST (cont'd)

STOP THE SPREAD OF GERMS



Durham Region Health Department conducts surveillance in the community involving schools and day nurseries to monitor rates of absenteeism.

- ✓ **Prevent the spread of illnesses.** These “Staying Healthy” practices should be followed at all times, not just when someone is sick.
- ✓ **Keep Hands Clean**
 - Wash hands before eating, after using washroom, changing diapers, after animal contact or when hands are dirty
 - Use hand sanitizer often but not when hands are visibly dirty (if hands are dirty and no sinks are around, clean hands with wet wipe first, let dry and then use hand sanitizer)
 - Avoid touching your face
- ✓ **Cover your cough/sneeze**

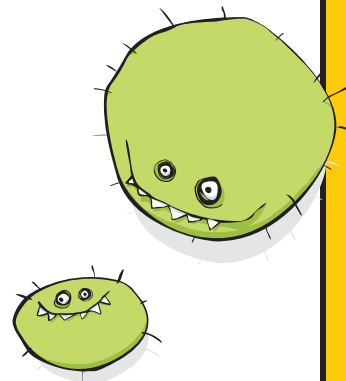
Cough or sneeze into your sleeve or tissue. Germs can travel 2 metres with coughing or sneezing.
- ✓ **Don't share personal objects**

Some things are not meant for sharing. Don't share items such as drinks, towels, toothbrushes, eating utensils, lipsticks, etc.
- ✓ **Clean & disinfect commonly touched surfaces often**

Do this more often when sick but regular cleaning and disinfecting will help to remove germs from the environment so that you can't pick them up when you touch it. Follow Routine Practices in Community Settings poster when there is a blood or diarrhea spill.
Some commonly touched objects include: taps, doorknobs, telephones, keyboards, etc.
- ✓ **Stay home when sick**

Until 24 hours symptom-free or as otherwise directed by the Health Department.
- ✓ **Be wise. Immunize.**

People need vaccinations to protect them from serious vaccine preventable diseases. Because of the wide availability of vaccines, many of these diseases are not seen very often in Canada. Don't forget to immunize your pets also!
- ✓ **Be food safe**
 - Wash hands before preparing foods
 - Wash fruits and veggies before eating
 - Cook meats and other hazardous foods thoroughly to proper temperatures
 - Separate raw from ready-to-eat foods
 - Clean and sanitize cutting boards
 - Use safe drinking water
- ✓ **Practice a healthy lifestyle**
 - Healthy eating
 - Stay active
 - Promote and support smoke-free living
 - Get enough sleep



WHAT CAN YOU DO TO STAY HEALTHY?



HEALTH
DEPARTMENT

REPORTABLE DISEASES LIST

The following diseases (Ontario Regs 559/91 under the Health Protection and Promotion Act) are reportable to the local Medical Officer of Health.

Bolded diseases must be reported **immediately**. All other diseases may be reported on the next working day.

Report diseases listed below to PHNN Division

Regional Head Office

605 Rossland Road East, 2nd Floor
P.O. Box 730

Whitby, ON L1N 0B2

Phone: 905-668-7711 ext. 2996 or 1-800-841-2729

Fax: 905-666-6215

After Hours: 905-576-9991 or 1-800-372-1104

Acquired Immunodeficiency Syndrome (AIDS)

Chancroid

Chickenpox (Varicella)

Chlamydia trachomatis infections

Cytomegalovirus infection, congenital

Diphtheria

Encephalitis, including:

1. **Primary, viral**
2. Post-infectious
3. Vaccine-related
4. Subacute sclerosing panencephalitis
5. Unspecified

Gonorrhea

Group A Streptococcal disease, invasive

Group B Streptococcal disease, neonatal

Haemophilus influenzae b disease, invasive

Hepatitis, viral

1. Hepatitis B
2. Hepatitis C
3. Hepatitis D (Delta hepatitis)

Herpes, neonatal

Measles

Meningitis, acute

1. **Bacterial**
2. Viral
3. Other

Meningococcal disease, invasive

Mumps

Ophthalmia neonatorum

Pertussis (Whooping Cough)

Pneumococcal disease, invasive

Poliomyelitis, acute

Rubella

Rubella, congenital syndrome

Severe Acute Respiratory Syndrome (SARS)

Smallpox

Syphilis

Tetanus

Tuberculosis

Yellow Fever

Report diseases listed below to Environmental Health Division

101 Consumers Drive, 2nd Floor

Whitby, ON L1N 1C4

Phone: 905-723-3818 or 1-888-777-9613

Fax: 905-666-1833

After Hours: 905-576-9991 or 1-800-372-1104

Amebiasis

Anthrax

Botulism

Brucellosis

Campylobacter enteritis

Cholera

Clostridium difficile Infection (CDI)

outbreaks in public hospitals

Cryptosporidiosis

Cyclosporiasis

Food poisoning, all causes

Gastroenteritis, institutional outbreaks

Giardiasis

Hantavirus pulmonary syndrome

Hemorrhagic fevers, including:

1. **Ebola virus disease**
2. **Marburg virus disease**
3. **Other viral causes**

Hepatitis A

Influenza

Lassa Fever

Legionellosis

Leprosy

Listeriosis

Lyme Disease

Malaria

Paratyphoid Fever

Plague

Psittacosis/Ornithosis

Q Fever

Rabies

Respiratory infection outbreaks in institutions

Salmonellosis

Shigellosis

Transmissible Spongiform Encephalopathy including:

1. Creutzfeldt-Jakob Disease, all types
2. Gastmann-Straüssler-Scheinker Syndrome
3. Fatal Familial Insomnia
4. Kuru

Trichinosis

Tularemia

Typhoid Fever

**Verotoxin-producing E. coli infection indicator conditions,
including Hemolytic Uremic Syndrome (HUS)**

West Nile Virus illness, including:

1. **West Nile fever**
2. **West Nile neurological manifestations**

Yersiniosis

Bolded diseases must be reported **immediately**. All other diseases may be reported on the next working day.

DUHEV-319 Jan/11