

Policy on the Management of Communicable Diseases

If a child exhibits any of the following symptoms, the child should not attend the center. If such symptoms occur at the center, the child will be removed from the group, and parents will be called to take the child home.

- Severe pain or discomfort
- Diarrhea
- Nausea or vomiting
- Elevated temperate of 100.4 degrees Fahrenheit or higher
- Lethargy
- Severe coughing
- Runny nose
- Muscle pain
- Sore throat
- Headache
- Chills
- Shortness of breath
- Yellow eyes or jaundiced skin
- Red eyes with discharge
- Infected, untreated skin patches
- Difficult or rapid breathing
- Skin rashes in conjunction with fever or behavior changes
- Skin lesions that are weeping or bleeding
- Mouth sores with drooling
- Stiff neck

Once the child is symptom-free, or has a health care provider's note stating that the child no longer poses a serious health risk to himself/herself or others, the child may return to the center unless contraindicated by local health department or Department of Health.

EXCLUDABLE COMMUNICABLE DISEASES

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.

Note: If a child has chicken pox, a note from the parent stating that all sores have dried and crusted is required. If a child is exposed to any excludable disease at the center, parents will be notified in writing.

COMMUNICABLE DISEASE REPORTING GUIDELINES

Some excludable communicable diseases must be reported to the health department by the center. The Department of Health's Reporting Requirements for Communicable Diseases and Work-Related Conditions Quick Reference Guide, a complete list of reportable excludable communicable diseases, can be found at: http://www.nj.gov/health/cd/documents/reportable_disease_magnet.pdf.

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

July 2013

www.nj.gov/health/cd

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 intermediatelevel resistance (VISA) or high-levelresistance (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 inquinale
- · 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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