



















# Infectious Diseases:

## information & exclusion list

Condition	This disease is spread by	Early Symptoms	Time between exposure and sickness	Exclusion from school, early childhood centre, or work*
<b>Rashes and skin infections</b>				
<b>Chickenpox</b> 	Coughing, sneezing and contact with weeping blisters.	Fever and spots with a blister on top of each spot.	10–21 days after being exposed.	1 week from appearance of rash, or until all blisters have dried.
<b>Hand, foot and mouth disease</b>	Coughing, sneezing, and poor hand washing.	Fever, flu-like symptoms – rash on soles and palms and in the mouth.	3–5 days	Exclude until blisters have dried. If blisters are able to be covered, and child feeling well, they will not need to be excluded.
<b>Head lice (Nits)</b>	Direct contact with an infested person's hair, and less commonly by contact with contaminated surfaces and objects.	Itchy scalp, especially behind ears. Occasionally scalp infections that require treatment may develop.	N/A	None, but ECC/school should be informed. Treatment recommended to kill eggs and lice.
<b>Measles</b>  	Coughing and sneezing. Direct contact with an infected person. Highly infectious.	Runny nose and eyes, cough and fever, followed a few days later by a rash.	7–21 days	5 days after the appearance of rash. Non-immune contacts of a case may be excluded.
<b>Ringworm</b>	Contact with infected skin, bedding and clothing.	Flat, ring-shaped rash.	4–6 weeks	None, but skin contact should be avoided.
<b>Rubella (German Measles)</b>  	Coughing and sneezing. Also direct contact with an infected person.	Fever, swollen neck glands and a rash on the face, scalp and body.	14–23 days	Until well and for 7 days from appearance of rash.
<b>Scabies</b>	Contact with infected skin, bedding and clothing.	Itchy rash.	4–6 weeks (but if had scabies before it may develop within 1–4 days)	Exclude until the day after appropriate treatment.
<b>School sores (Impetigo)</b>	Direct contact with infected sores.	Blisters on the body which burst and turn into scabby sores.	Variable	Until sores have dried up or 24 hours after antibiotic treatment has started.
<b>Slapped cheek (Human parvovirus infection)</b> 	Coughing and sneezing. The virus may be passed from mother to child during pregnancy.	Red cheeks and lace-like rash on body.	4–20 days	Unnecessary unless unwell.
<b>Diarrhoea &amp; Vomiting illnesses</b>				
<b>Campylobacter</b> <b>Cryptosporidium</b> <b>Giardia</b> <b>Salmonella</b> 	Undercooked food, contaminated water. Direct spread from an infected person or animal.	Stomach pain, fever, nausea, diarrhoea and/or vomiting.	Campylobacter 1–10 days Cryptosporidium 1–12 days Giardia 3–25 days Salmonella 6–72 hours	Until well and for 48 hours after the last episode of diarrhoea or vomiting. <b>Cryptosporidium</b> – do not use public pool for 2 weeks after symptoms have stopped. <b>Salmonella</b> - Discuss exclusion of cases and contacts with public health service.
<b>Hepatitis A</b> 	Contaminated food or water, direct spread from an infected person.	Nausea, stomach pains, general sickness with jaundice (yellow skin) appearing a few days later.	15–50 days	7 days from the onset of jaundice.
<b>Norovirus</b>	Contact with secretions from infected people.	Nausea, diarrhoea/and or vomiting.	1–2 days	Until well and for 48 hours after the last episode of diarrhoea or vomiting.
<b>Rotavirus</b> 	Direct spread from infected person.	Nausea, diarrhoea/and or vomiting.	1–2 days	Until well and for 48 hours after the last episode of diarrhoea or vomiting.
<b>Shigella</b> 	Contaminated food or water, contact with an infected person.	Diarrhoea (may be bloody), fever, stomach pain.	12 hours–1 week	Discuss exclusion of cases and their contacts with public health service.
<b>VTEC/STEC (Verocytotoxin- or shiga toxin-producing E. coli)</b> 	Contaminated food or water, unpasteurised milk. Direct contact with animals or infected person.	High incidence of bloody diarrhoea, stomach pain. High rate of hospitalisation and complications.	2–10 days	Discuss exclusion of cases and their contacts with public health service.
<b>Respiratory Infections</b>				
<b>Influenza and Influenza-like illness (ILI)</b> 	Coughing and sneezing. Direct contact with infected person.	Sudden onset of fever with cough, sore throat, muscular aches and a headache.	1–4 days (average about 2 days)	Until well.
<b>Streptococcal sore throat</b>	Contact with secretions of a sore throat. (Coughing, sneezing etc.)	Headache, vomiting, sore throat. An untreated sore throat could lead to Rheumatic fever.	1–3 days	Exclude until well and/or has received antibiotic treatment for at least 24 hours.
<b>Whooping cough (Pertussis)</b>  	Coughing. Adults and older children can pass on the infection to babies.	Runny nose, persistent cough followed by “whoop”, vomiting or breathlessness.	5–21 days	Five days from commencing antibiotic treatment or, if no antibiotic treatment then 21 days from onset of illness or until no more coughing, whichever comes first.
<b>Other Infections</b>				
<b>Conjunctivitis (Pink eye)</b>	Direct contact with discharge from the eyes or with items contaminated by the discharge.	Irritation and redness of eye. Sometimes there is a discharge.	2–10 days (usually 3–4 days)	While there is discharge from the eyes.
<b>Meningococcal Meningitis</b>  	Close contact with oral secretions. (Coughing, sneezing, etc.)	Generally unwell, fever, headache, vomiting, sometimes a rash. <b>Urgent treatment is required.</b>	3–7 days	Until well enough to return.
<b>Meningitis – Viral</b>	Spread through different routes including coughing, sneezing, faecal-oral route.	Generally unwell, fever, headache, vomiting.	Variable	Until well.
<b>Mumps</b>  	Coughing, sneezing and infected saliva.	Pain in jaw, then swelling in front of ear and fever.	12–25 days	Exclude until 5 days after facial swelling develops, or until well.

For further information contact:

Your Public Health Nurse

Your Public Health Service



Vaccine-preventable and/or on National Immunisation Schedule



Notifiable disease (Doctors notify the Public Health Service)



Pregnant women should seek advice from their maternity provider or G.P

\* Seek further advice from a healthcare professional or public health service

New Zealand Government

hpo te hirainga hauora  
HEALTH PROMOTION AGENCY

MINISTRY OF HEALTH  
MANATŪ HAUORA

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