

Communicable Disease Chart for Alabama's Schools and Childcare Facilities

Exclusions contained in this chart pertain to children and students only.



Notifiable Disease Reporters

All physicians, dentists, nurses, medical examiners, hospital administrators, nursing home administrators, lab directors, school principals, and childcare directors are responsible for reporting Notifiable Diseases in Alabama. Notifiable Disease reporters must report "Outbreaks of any kind" to the Infectious Diseases & Outbreaks Division within 24 hours.

Communicable diseases noted in red are reportable. Communicable diseases noted in black are not reportable unless associated with an outbreak.

¹An outbreak is defined as two or more similarly ill persons who live in different households and have a common exposure. All outbreaks must be reported and public health will be involved in investigating and providing control measures.

Please visit: alabamapublichealth.gov/infectiousdiseases or call 1-800-338-8374 for more information.

²All unvaccinated persons should be excluded until vaccination received or risk of transmission is over.

Please visit: alabamapublichealth.gov/immunization or call 1-800-469-4599 for more information.

*The individual must be symptom free for the timeframe specified without the aid of any medication that may suppress symptoms.

	Communicable Disease or Condition	Signs and Symptoms	Exclusion and Readmission Recommended Criteria
Gastrointestinal	Diarrhea	Frequent loose or watery stools compared with normal pattern, abdominal cramps, fever, generally not feeling well	Exclude until no diarrhea for 24 hours. Exclude until stools are contained in the diaper or the child is continent, stool frequency is no more than 2 stools above child's normal frequency.
	Jaundice	Yellowish discoloration of the whites of the eyes, skin, and mucous membranes	Exclude for 7 days after onset of illness.
	Vomiting	Nausea, vomiting, or cramping	Exclude until no vomiting for 24 hours or until the individual provides medical documentation that the cause is not infectious.
	Campylobacteriosis (<i>Campylobacter</i>)	Mild to severe diarrhea; may have additional symptoms such as abdominal cramps, vomiting, fever, bloody stools, or nausea	Exclude until symptom free* for 24 hours.
	Clostridium difficile Infection	Mild to moderate diarrhea, possible nausea, abdominal cramps, low-grade fever	Exclude until symptom free* for 48 hours.
	Cryptosporidiosis (<i>Cryptosporidium</i>)	Acute non-bloody diarrhea; may have additional symptoms such as abdominal cramps, vomiting, fever, fatigue, or nausea	Exclude until symptom free* for 24 hours. Restrict recreational water activities (e.g., swimming, splash pad, water slide, etc.) for 2 weeks after symptom resolution.
	Cyclosporiasis (<i>Cyclospora</i>)	Mild to severe diarrhea; may have additional symptoms such as abdominal cramps, vomiting, fever, bloody stools, or nausea	Exclude until symptom free* for 24 hours.
	Giardiasis (<i>Giardia</i>)	Mild to severe diarrhea; may have additional symptoms such as abdominal cramps, foul-smelling stools associated with anorexia, flatulence, malaise, weakness, nausea, vomiting, low grade fever, and abdominal distention	Exclude until symptom free* for 24 hours. Restrict recreational water activities (e.g., swimming, splash pad, water slide, etc.) for 1 week after symptom resolution.
	Hepatitis A² Infection	Loss of appetite, fever, abdominal discomfort, nausea, fatigue, headache, dark brown urine, or yellowing of skin or eyes; young children less than 6 years of age may be symptom free	Exclude for 7 days after onset of illness. Individuals with known infection, but no symptoms should be excluded for 7 days after collection date of positive test.
	Hepatitis E	Jaundice, fatigue, loss of appetite, nausea, fever, abdominal pain, and/or dark (tea-colored) urine	Exclude until symptom free* for 2 weeks after illness onset. Contact precautions recommended for diapered child for duration of illness.
	Listeriosis (<i>Listeria</i>)	Mild to severe diarrhea; may have additional symptoms such as abdominal cramps, vomiting, fever, bloody stools, or nausea	Exclude until symptom free* for 24 hours.
	Norovirus Infection	Acute onset of vomiting and/or diarrhea, possible nausea, abdominal cramps, low-grade fever, headache, fatigue, and myalgia	Exclude until symptom free* for 48 hours.
	Rotavirus Infection	Acute onset of vomiting and/or watery diarrhea, possible vomiting, fever, abdominal pain, loss of appetite, dehydration	Exclude until symptom free* for 24 hours.
	Salmonellosis (<i>Salmonella non-Typhi</i>)	Mild to severe diarrhea; may have additional symptoms such as abdominal cramps, vomiting, fever, bloody stools, or nausea	Exclude until symptom free* for 24 hours.
	Sapovirus Infection	Acute onset of vomiting and/or diarrhea, possible nausea, abdominal cramps, low-grade fever, headache, fatigue, and myalgia	Exclude until symptom free* for 48 hours.
	Shiga toxin producing E. coli Infection (STEC or E. coli, shiga toxin-producing)	Acute diarrhea (often bloody); may have additional symptoms such as abdominal cramps, vomiting, fever, fatigue, or nausea	Exclude until symptom free* for 24 hours. Children <5 years of age – Follow-up testing may be recommended. Contact ADPH Infectious Diseases & Outbreaks Division for guidance at 1-800-338-8374.
Shigellosis (<i>Shigella</i>)	Loose, watery stools with blood or mucus, may have additional symptoms such as fever, headache, convulsions, or abdominal pain	Exclude until symptom free* for 24 hours. Children <5 years of age – Follow-up testing may be recommended. Contact ADPH Infectious Diseases & Outbreaks Division for guidance at 1-800-338-8374.	
Typhoid/Paratyphoid Fever (<i>Salmonella Typhi/Paratyphi</i>)	Sustained fever, may have additional symptoms such as weakness, stomach pain, headache, diarrhea or constipation, cough and loss of appetite	Exclude until symptom free* for 24 hours. Children <5 years of age – Follow-up testing may be recommended. Contact ADPH Infectious Diseases & Outbreaks Division for guidance at 1-800-338-8374.	
Ears, Nose, and Throat	Cold Sores (Gingivostomatitis)	Fever, irritability, sores in mouth, gums, or lips	Exclude children/student who do not have control of oral secretions and until sores have healed.
	Common Cold (Multiple viruses)	Sore throat, runny nose, coughing, sneezing, headaches, and body aches	Exclude until symptoms subside and exercise droplet precautions.
	Mononucleosis (Mono, Epstein-Barr Virus)	Fever, sore throat, swollen lymph nodes, fatigue	Exclude from contact sports and consult physician for clearance to participate in sports.
	Mumps²	Swelling of one or more of the salivary glands, headache, low grade fever, and myalgia, anorexia and fatigue	Exclude for 5 days after onset of swelling. Without vaccine history, one should be excluded for 21 days after onset of swelling of most recent case.
	Pink Eye (Bacterial or viral conjunctivitis)	Red/pink itchy, swollen eyes; eye discharge; possible light sensitivity; and/or eye pain	Exclude if child/student has a white or yellow drainage coming from the eye or eye pain and until evaluated by a physician.
	Strep throat and Scarlet fever (Streptococcal pharyngitis)	Strep throat: Fever, red sore throat, swollen glands, strawberry tongue (occurs following peeling of a white coating from tongue) Scarlet Fever: A very fine raised rash (feels like sandpaper) is present on the neck, chest, elbow and groin	Exclude until 24 hours after beginning appropriate antimicrobial therapy and no longer have a fever.
Respiratory	Influenza² (Flu, seasonal)	Fever, chills, body aches, cough, runny or stuffy nose, sore throat, headache, and/or myalgia	Exclude until fever free for 24 hours and child is well enough for routine activities.
	Pertussis² (Whooping cough)	Runny nose, sneezing, low grade fever, and mild to occasional cough; a pause in breathing may be noted in infants with coughing spasms; Pertussis is known for uncontrollable, violent coughing which often makes it hard to breathe	Exclude until 5 days of recommended antibiotics, or 21 days from onset of cough for those who do not take antibiotics.
	Tuberculosis (Pulmonary)	Fatigue, significant weight loss, fever, night sweats, cough that may produce blood, and chest pain; children may have no symptoms	Exclude until public health evaluates and provides notification that child/student is released to return to school or childcare facility. No exclusion for latent TB infection.
Skin and Rash	Chickenpox² (Varicella, varicella zoster virus)	Itchy fluid filled blisters that begin on face, chest, and back then spreads to the rest of the body.	May return when rash has crusted or, in immunized people without crusts, until no new lesions appear within a 24-hour period. Without vaccine history, one should be excluded for 21 days after rash appears ¹ for most recent case.
	Fifth disease (Human Parvivirus, erythema infectiosum)	Facial rash that can be intensely red with a "slapped cheek" appearance, fever, fatigue, myalgia, headache, a systemic macular- lace like and often pruritic rash on trunk that moves peripherally to arms, buttocks, and thighs	No exclusion is necessary if the child/student is healthy enough for routine activities because the period of contagion occurs before rash is evident.
	Hand, foot, and mouth disease (Coxsackie virus)	Fever, sore throat, poor appetite, vague feeling of illness, skin rash, flat or raised red spots usually on the palms of hands, soles of feet and may appear on knees elbows, bottom, or genital area; may experience diarrhea and vomiting	Exclude until child/student is free of fever for at least 24 hours.
	Head Lice (Pediculosis)	Itching of the head and neck; visible crawling lice in the hair	Exclude until first head lice treatment is completed.
	Impetigo (<i>Staphylococcus aureus</i> or Group A <i>Streptococcus</i>)	Rash anywhere on the skin but most often on the face, lips, arms, or legs; that spread to other areas; itchy blisters filled with yellow or honey colored fluid that oozes then dries and crust over.	Exclude until 24 hours of treatment has been initiated. Lesions on exposed skin should be covered with watertight dressing.
	Measles² (Rubeola)	High fever, red eyes, runny nose, and cough; a rash appears 3 to 5 days after initial symptoms	Exclude until 4 days after rash appears. Without vaccine history, one should be excluded for 21 days, after rash appears ¹ of most recent case.
	MRSA (Methicillin-resistant <i>staphylococcus aureus</i>)	Bump or infected area that is red, swollen, painful, warm to the touch with or without pus and drainage; common sites are legs, buttocks, groin, back of the neck, sites of skin trauma, such as cuts or abrasions	Exclude only if skin lesions are draining and cannot be completely covered with a watertight bandage.
	Ringworm (Fungal infection, tinea dermatophytosis)	Fungus that may affect skin on almost any part of the body as well as finger and toe nails; ring shaped, itchy, red, scaly, rash, may develop; there may also be cracked skin and hair loss if the infection develops on the scalp	Exclude until after treatment begins. Cover lesions with waterproof dressing.
	Roseola (Human herpes virus 6)	High fever, red raised rash which appears once fever has resolved	Exclude until fever is gone and other rash illnesses have been ruled out.
	Rubella² (Rubella virus, German Measles)	Low grade fever (less than 101) and rash that starts on the face and spreads to the rest of the body	Exclude until 7 days after the rash appears. Without vaccine history, one should be excluded for 21 days after rash appears ¹ of the last case in the outbreak.
	Scabies (<i>Sarcoptes scabiei</i>)	Intense itching especially at night, pimple or tiny blister-like scaly rash which may affect much of the body, common in between fingers, and around wrists, elbows, armpits, and knees	Exclude until 24 hours after prescribed treatment has been completed.
	Shingles (Herpes zoster, varicella zoster virus)	Painful rash on one side of the face or body; blisters form and typically scab over in 7-10 days; fever, headache, chills, and upset stomach	Exclude only if sores cannot be completely covered by a bandage or clothing; if not, exclude until sores have crusted and are dry.
	Invasive	Haemophilus influenza	Fatigue, fever, stiff neck, lack of appetite, chill, headache, nausea, vomiting, and irritability
Meningococcal Disease (<i>Neisseria meningitidis</i>)		Fever, chills, confusion, stiff neck, lack of appetite, fatigue, myalgia, limb pain, and sometimes a rash.	Exclude until child has been on antibiotics for at least 24 hours.
Pneumococcal Disease (<i>Streptococcus pneumoniae</i>)		Ear infection, fever, ear pain, chills, behavior or appetite changes, ear redness or drainage	Exclude until at least 24 hours after beginning antibiotic therapy. Close contact with other children should be avoided.

References:
 Control of Communicable Diseases Manual, 20th Edition. 2015. American Public Health Association.
 Managing Infectious Diseases in Childcare and Schools: A Quick Reference Guide, 4th edition. 2017. American Academy of Pediatrics.
 Red Book. 2018 Report of the Committee on Infectious Diseases, 31st edition. American Academy of Pediatrics.