Review of 2018-2019 School Year Communicable Disease Data

Publications of Kent County Health Department

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School Year 2018-2019
Materials are integral components within the public health system. Schools collect valuable data that help the Kent County Health Department establish communicable disease trends and monitor the health landscape.

Throughout the school year, schools submit weekly reports detailing the number of students absent due to the following communicable diseases:

**“Flu-like” Illnesses:** Respiratory flu, Stomach flu, and Unknown flu.

**Respiratory Infections:** Common cold, Mononucleosis, Strep throat, Bronchitis, and Asthma.

**Skin/Tissue Related Infections:** Head lice, Scarlet fever, Fifth disease, Impetigo, Scabies, Hand, Foot, and Mouth and Pink eye.

Additionally, schools are required to report any child who is absent from school after being diagnosed with diseases such as chickenpox, pertussis, and meningitis. Information for submitting surveillance reports and a full list of reportable diseases can be found in the conclusion.

After completion of the 2018-2019 school year, the surveillance data was cleaned and analyzed by Kent County epidemiologists.

This report provides a basic case definition of each illness, dissects the 2018-2019 surveillance data, and provides both preventative and exclusion measures for combatting disease occurrence and transmission.

### ILLNESS DISTRIBUTION

<table>
<thead>
<tr>
<th>Illness</th>
<th>Total Cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>Other</td>
<td>29,566</td>
</tr>
<tr>
<td>Stomach Flu</td>
<td>27,659</td>
</tr>
<tr>
<td>Cold</td>
<td>22,394</td>
</tr>
<tr>
<td>Respiratory Flu</td>
<td>20,189</td>
</tr>
<tr>
<td>Unknown Flu</td>
<td>17,704</td>
</tr>
<tr>
<td>Strep</td>
<td>3,311</td>
</tr>
<tr>
<td>Asthma</td>
<td>1,562</td>
</tr>
<tr>
<td>Head Lice</td>
<td>1,405</td>
</tr>
<tr>
<td>Pink Eye</td>
<td>1,254</td>
</tr>
<tr>
<td>Mononucleosis</td>
<td>1,122</td>
</tr>
<tr>
<td>Bronchitis</td>
<td>313</td>
</tr>
<tr>
<td>Hand, Foot, and Mouth</td>
<td>197</td>
</tr>
<tr>
<td>Impetigo</td>
<td>104</td>
</tr>
<tr>
<td>Scabies</td>
<td>57</td>
</tr>
<tr>
<td>Scarlet Fever</td>
<td>47</td>
</tr>
<tr>
<td>Fifth Disease</td>
<td>31</td>
</tr>
</tbody>
</table>

Illnesses that were not diagnosed, or required more information, were listed under the "Other" category.

**Note:** Due severe weather in January and February there were more documented days off school. This has had an impact on the overall data reported during these months.
Respiratory Flu

What is Respiratory Flu?
Respiratory flu, commonly known as influenza or seasonal flu, is a contagious respiratory infection caused by the *Influenza* viruses A, B, and C.

Signs & Symptoms?
The signs and symptoms of respiratory flu include the abrupt onset of fever, muscle pain, sore throat, nonproductive cough, and headache. Report cases of respiratory flu if the child has pneumonia or fever and any of the following symptoms: sore throat, cough, or generalized aching in the back or limb muscles. *Vomiting and diarrhea alone are NOT respiratory flu.*

How do you get Respiratory Flu?
This infection is spread person-to-person via aerosol droplets dispersed through coughing, sneezing, or talking. Respiratory flu is also spread by touching a surface contaminated with the flu virus and then touching one’s mouth or nose.

How can Respiratory Flu be prevented?
Flu vaccines are the most effective approach to reducing the chances of getting the flu. In addition, preventative methods include covering your mouth when coughing or sneezing, washing your hands, the routine disinfection of frequently touched surfaces, avoiding touching your nose, eyes, and mouth and keeping children home from school when sick with a fever.

2018-2019 School Year Data:
Respiratory flu was the third most prevalent illness reported during the 2018-2019 school year, accounting for about 16% of all reported cases. Respiratory flu was most prevalent in the late winter months with the peak month being March with 4,123 cases reported. The data contradicts the notion that flu activity in the United States is typically highest between December and February.

Should I keep my child from school?
Students and staff should stay home until they are fever-free for 24 hours without the use of fever-reducing medications.
Stomach Flu

What is Stomach Flu?
Stomach flu is not influenza; it is viral gastroenteritis, an infection of the stomach and intestines. While there are several causes of gastroenteritis, *Rotavirus* and *Noroviruses* are the most common causes of stomach flu in children.

Signs & Symptoms?
The signs and symptoms of the stomach flu include stomach pain, cramping, fever, nausea and headaches. For the purpose of school reporting, report stomach flu cases if the child has vomiting and/or diarrhea.

How do you get Stomach Flu?
Gastrointestinal viruses are present in the feces and vomit of an infected individual. The virus can be spread via contaminated surfaces, food or water. Viruses like *Rotavirus* and *Norovirus* can survive for long periods on hard surfaces, in contaminated water, and on the hands.

How can Stomach Flu be prevented?
Frequent hand washing with soap and water is the most effective way to prevent stomach flu. Rotavirus and several other viruses are very stable and can remain in the environment for weeks. Therefore, it is important to properly clean and disinfect contaminated surfaces. As gastrointestinal viruses are present in the vomit of an infected individual, it is essential to properly clean after a vomiting incident has occurred in your school. Refer to *The Guidelines For Environmental Cleaning and Disinfection of Norovirus* manual for additional information.

2018-2019 School Year Data:
Stomach Flu ranked second on the list of most frequently reported illnesses during the 2018-2019 school year. Stomach flu accounted for about 22% of total reported cases. Stomach Flu was most prevalent from December to April and was at its peak in March at 5,041 cases. According to the CDC, gastroenteritis outbreaks occur throughout the year, but over 80% of outbreaks occur from November to April.

Should I keep my child home from school? Exclude until diarrhea has ceased for at least 2 days; exclude staff from food handling for 3 days after recovery.
Unknown Flu and Difference between Respiratory Flu and Stomach Flu

The Kent County Health Department requires schools to report cases of respiratory and stomach flu. If parents report that, “my child has the flu”—but do not provide info on symptoms, schools categorize the case as “Unknown flu.” There were 17,704 cases, comprising 14% of all reported cases and 27.0% of all flu cases. “Unknown flu” was the most prevalent in March with 3,727 cases.

With an adequate definition and knowledge of each reportable flu-like illness, the surveillance system should become more effective. The most noticeable distinction between stomach flu and respiratory flu is the dissimilar symptoms. Stomach flu is a gastrointestinal infection, producing diarrhea, stomach pain, vomiting, cramping, and a fever while respiratory flu causes sore throats, headaches, coughs, fevers, and body aches. While these different infections produce some similar symptoms, there are common outliers. The presence of gastrointestinal symptoms such as diarrhea and vomiting are essential to stomach flu, while respiratory symptoms such as the fever, cough and sore throat point towards respiratory flu.

<table>
<thead>
<tr>
<th>Symptoms</th>
<th>Respiratory Flu</th>
<th>Common Cold</th>
<th>Stomach Flu</th>
</tr>
</thead>
<tbody>
<tr>
<td>Body Aches</td>
<td>Yes</td>
<td>Slight</td>
<td>Stomach and abdominal pain</td>
</tr>
<tr>
<td>Chills</td>
<td>Yes</td>
<td>Rare</td>
<td>Sometimes</td>
</tr>
<tr>
<td>Cough</td>
<td>Yes, can be severe</td>
<td>Mild to moderate</td>
<td>Rare</td>
</tr>
<tr>
<td>Dehydration</td>
<td>Sometimes</td>
<td>Rare</td>
<td>Yes</td>
</tr>
<tr>
<td>Diarrhea</td>
<td>Rare</td>
<td>Rare</td>
<td>Yes</td>
</tr>
<tr>
<td>Fatigue</td>
<td>Yes</td>
<td>Somatices</td>
<td>Yes</td>
</tr>
<tr>
<td>Fever</td>
<td>Yes</td>
<td>Rare</td>
<td>Sometimes</td>
</tr>
<tr>
<td>Headache</td>
<td>Yes</td>
<td>Rare</td>
<td>Sometimes</td>
</tr>
<tr>
<td>Sneezing</td>
<td>Sometimes</td>
<td>Yes</td>
<td>Rare</td>
</tr>
<tr>
<td>Sore Throat</td>
<td>Sometimes</td>
<td>Common</td>
<td>Rare</td>
</tr>
<tr>
<td>Stuffy/Runny Nose</td>
<td>Sometimes</td>
<td>Common</td>
<td>Rare</td>
</tr>
<tr>
<td>Vomiting</td>
<td>Rare</td>
<td>Rare</td>
<td>Yes</td>
</tr>
</tbody>
</table>

Both respiratory and stomach flu occur seasonally. Most stomach flu outbreaks occur from November to April. The CDC also states that respiratory flu activity will peak between December and February. In the 2018-2019 school year, the respiratory flu was at its highest during October through March. The stomach flu was at its highest from December to March.
Common Cold

What is Common Cold?
The common cold is a viral infection of the upper respiratory tract, which primarily affects the nose and throat. Over 100 viruses are known to cause the common cold. The most common causes include *Rhinovirus*, *Coronavirus*, and *Respiratory Syncytial virus*.

Signs & Symptoms?
The signs and symptoms of the common cold include coughing, sore throat, runny nose, sneezing, congestion, watery eyes, and mild fatigue.

How do you get the Common Cold?
The common cold is spread person-to-person through aerosol droplets, through direct contact with infected nasal secretions, or indirectly via contaminated objects such as doorknobs, toys, and tables.

How can the Common Cold be prevented? To prevent the common cold, schools must stress the importance of basic respiratory preventative methods. Frequent hand washing can decrease the spread of both respiratory and fecally spread illnesses. As the common cold can be transmitted through contaminated surfaces, it is important to disinfect commonly touched environments. Routinely disinfecting surfaces kills harmful germs that can lower the risk of spreading infection. The spread of aerosol droplets can be reduced by the covering of coughs and sneezes with one’s elbow or tissue.

2018-2019 School Year Data:
The common cold accounted for 22,394 cases during this school year, 18% of all reported illnesses. The common cold is present throughout the entire school year but was most prevalent from February to April. The peak month of common colds this school year was March with 4,185 reported cases.

Should I keep my child from school? Children with fevers should be excluded until fever-free for 24 hours.
Other Respiratory Illnesses

All respiratory infections, with the exception of respiratory flu, “unknown” flu and the common cold, are included in this category. The illnesses in this category include mononucleosis, strep throat, bronchitis, and asthma. In this category, there were 6,308 reported cases, accounting for 4.97% of all cases.

Mononucleosis

What is Mononucleosis?
Mononucleosis, commonly shortened to mono, is an acute respiratory viral infection. Mononucleosis is caused by Epstein-Barr virus (EBV). Mononucleosis is most prevalent among young adults and adolescents.

Signs & Symptoms?
The signs and symptoms of mononucleosis include fatigue, malaise (general discomfort or uneasiness), sore throat, fever, swollen lymph nodes, swollen tonsils, skin rashes, and a soft swollen spleen.

How do you get Mononucleosis?
EBV is transmitted person-to-person via aerosol droplets dispersed through coughing, sneezing, or talking. This virus is also transmitted by kissing and sharing eating or drinking utensils with someone who is infected.

How can Mononucleosis be prevented?
Schools should stress the basic respiratory infection preventative measures. Avoid kissing and sharing eating and drinking utensils with someone who has mononucleosis.

2018-2019 School Year: There were 1,122 mononucleosis cases reported during the 2018-2019 school year, accounting for 17.8% of the “Other Respiratory Illness” category. Reports of mononucleosis peaked three times in November, February, and May.

Should I keep my child from school?
Exclude until able to tolerate activity; exclude from contact sports until full recovery.
**Strep Throat**

**What is Strep Throat?**
Strep throat is an infection caused by the *Streptococcus* group of bacteria.

**Signs & Symptoms?**
Strep throat causes the throat to become inflamed and irritated. Other signs and symptoms of strep throat include fever, headache, fatigue, difficulty swallowing, and swollen lymph nodes.

**How do you get Strep Throat?** Strep throat is spread person-to-person by aerosol droplets and via direct contact with mucus from the nose or throat of an infected person.

**How can Strep Throat be prevented?** Schools should stress the importance of basic respiratory infection preventative measures. As *Streptococcal* bacteria are spread via aerosol droplets, students should be encouraged to cover coughs and sneezes with their elbow or a tissue. Students should be advised against the sharing of eating and drinking utensils, as these bacteria can be spread via the mucus of an infected individual.

**2018-2019 School Year Data:** Strep throat accounted for 3,311 cases this school year and was the most common infection in this category. As seen in our data, the majority of cases occurred during the late winter months. The peak month for strep throat was March with 605 cases reported.

**Should I keep my child home from school?**
Exclude until 12 hours after the start of antibiotic treatment. The student should receive at least two doses before returning.
What is Bronchitis?
Bronchitis is a respiratory infection that causes the bronchial passages to become inflamed. Bronchitis can be either chronic or acute. Chronic bronchitis is the constant irritation and inflammation of the bronchial passages, usually caused by smoking, while acute bronchitis is the temporary inflammation of the bronchial passages, where the cough may last between two and three weeks.

Signs & Symptoms?
The signs and symptoms of bronchitis include wheezing, shortness of breath, chest discomfort, fever, and coughing up mucus.

How do you get Bronchitis?
Infectious agents that cause acute bronchitis can be spread person-to-person via aerosol droplets and through direct contact with infected nasal secretions.

How can Bronchitis be prevented?
The promotion of basic sanitary methods and removal of respiratory irritants, such as pollen, dust, and smoke can reduce the incidence of bronchitis.

2018-2019 School Year Data:
There were 313 cases of bronchitis this school year, accounting for 4.96% of cases of the “Other Respiratory Infection” category. Bronchitis cases were common throughout the year and spiked to a count of 47 in October.

Should I keep my child from school?
Exclude until fever free for 24 hours without fever-reducing medicine.
Asthma

What is Asthma?
Asthma is a chronic lung disease that inflames and narrows the airways. Physical activity and environmental triggers are known to cause symptoms in individuals with asthma.

Signs & Symptoms?
Asthma attacks are characterized by periods of wheezing, chest tightness, shortness of breath, and coughing.

How do you have Asthma Attacks?
Asthmatic attacks are caused by triggers such as respiratory infections, exercise, allergens, emotional stress, changes in weather, air pollution, and smoke.

Preventative Measures?
Schools are recommended to have an Asthma Management Plan. This plan, according to the U.S. Department of Health and Human Services, should contain a confidential list of students with asthma, school policies and procedures for administering medications, specific actions for staff members to perform in the asthma program, a written plan for every student with asthma, and educational resources for staff and students about asthma. To prevent asthma attacks and discomfort, identify sources of asthmatic triggers within your school (allergens, respiratory infections, irritants, and exercise). Students can control asthma by taking medicine as directed by a prescribing physician. Refer to Managing Asthma, a Guide for Schools for further instruction.

2018-2019 School Year Data:
Asthma accounted for 1,562 reported cases this school year, 24.8% of the reported respiratory infections in this category. Asthma was common throughout the year with a peak in March with 213 reported cases. According to the CDC, 8.3% of children have asthma.

Should I keep my child from school?
No exclusion necessary.

Asthma Airways

- Inflamed Airways
- Mucus fills airway
- Muscle layer tightens around airway
Skin/Tissue Infections

This section includes reported cases of absences due to skin or tissue conditions. The infections in this category include head lice, scarlet fever, fifth disease, hand, foot, and mouth, impetigo, scabies, and pink eye. There were 3,095 reported cases, accounting for 2.44% of all cases.

Head Lice

What is Head Lice?
Head lice is an infestation by the parasitic insect Pediculus humanuscapitis. Head lice inhabit the scalp and are found particularly around and behind the ears and near the neckline at the back of the head. Head lice lay eggs, called nits, on hair shafts close to the scalp. Nits may appear like dandruff, yet they can’t be removed by brushing.

Signs & Symptoms?
The signs and symptoms of head lice infestation include the tickling feeling of movement in the hair, allergic reaction to the bites, irritability and difficulty sleeping, and sores on the head caused from scratching.

How do you get Head Lice?
Head lice infestation occurs through direct contact and is commonly transmitted between family members or among children who have close contact. Indirect transmission may occur via inanimate objects.

How can Head Lice be prevented?
Avoid head-to-head contact with infected individuals during play and other activities. As head lice can be transferred via inanimate objects, prohibit the sharing of clothing such as head coverings and hats, combs, brushes, bedding and other items with which an infected person may be in contact. Refer to the Michigan Head Lice Manual for additional information.

2018-2019 School Year Data Analysis:
There were 1,405 reported cases this school year, accounting for 45.4% of skin/tissue infections. October was the peak month, with 282 cases. As temperatures dropped, head lice were less active.

Should I keep my child from school?
Students with live lice may stay in school until end of day; immediate treatment at home is advised.
Scarlet Fever

What is Scarlet Fever?
Scarlet fever is a rash illness caused by group A *Streptococcus* infections.

Signs & Symptoms?
Scarlet fever begins with a fever and sore throat. The tongue may have either a whitish coating and appear swollen, and/or have a strawberry-like appearance. The characteristic red rash appears one or two days after the illness begins. The rash may first appear on the neck, underarm or groin, and then spread over the body. Other symptoms may include chills, vomiting, and abdominal pain.

How do you get Scarlet Fever?
Group A *Streptococcus* lives in the mouth and nasal cavity. This bacterium can be spread by coughing, sneezing, touching the mouth, nose, or eyes, or even by sharing cups and eating utensils.

How can Scarlet Fever be prevented?
The most important preventative method is washing hands. Schools should educate students about the consequences of touching the eyes, nose, and mouth as our hands are covered with germs. Students should be advised against the sharing of eating and drinking utensils, as these bacteria can be spread via the mucus of an infected individual.

2018-2019 School Year Data Analysis:
There were 47 cases of Scarlet fever this school year, accounting for 1.52% of skin/tissue infections. The peak month of scarlet fever reports was February, with 9 cases.

Should I keep my child from school?
Exclude until 12 hours after the start of antibiotic treatment. The student should receive at least two doses before returning.
Fifth Disease

What is Fifth Disease?
Fifth disease is a mild to moderate contagious infection caused by Parvovirus B19.

Signs & Symptoms?
Fifth disease usually begins with the sudden appearance of bright red cheeks that look as though the child was slapped. The first symptoms are usually mild and nonspecific, including fevers, runny nose, and headaches.

How do you get Fifth Disease?
Parvovirus B19 is spread via aerosol droplets dispersed when an infected person coughs or sneezes.

How can Fifth Disease be prevented? As Parvovirus B19 is spread via aerosol transmission, basic hygienic methods apply. Covering your mouth and nose when sneezing or coughing, washing your hands with soap and water, and avoiding touching the eyes, nose and mouth are recommended preventative methods.

2018-2019 School Year Data Analysis:
Fifth disease was the lowest reported disease and had a 31 total cases during this school year, accounting for 1.0% of reported skin/tissue related cases. The peak month was September with 7 cases.

Should I keep my child from School?
No exclusion if rash is diagnosed as fifth disease by a healthcare provider. By the time the rash appears, children are no longer contagious and may attend school.
**Impetigo**

**What is Impetigo?**
Impetigo is a common skin infection that produces blisters or sores on the face, neck, hands, and the diaper area. Impetigo is caused by group A *Streptococcus*.

**Signs & Symptoms?**
Blisters or sores appear on the face, neck, hands, and diaper area. These sores quickly rupture, ooze for a few days then form a brown-yellowish crust. The sores usually occur around the nose and mouth.

**How do you get Impetigo?**
Impetigo can be transmitted through direct contact with the skin of someone who has impetigo. Indirect transmission can occur with an object that is contaminated by group A *Streptococcus*.

**How can Impetigo be prevented?**
Impetigo is highly contagious. Keeping children home from school or daycare until they are no longer contagious is highly recommended (until under treatment for 24 hours and lesions are healing). Efforts should be made to cover lesions upon the child’s return to school. Parents should take their children to see their doctor when sores develop. Without antibiotics, impetigo is contagious until the sores go away.

**2018-2019 School Year Data:**
Impetigo accounted for 104 reported cases, 3.36% of Skin/Tissue Related Illnesses. This skin infection is rare and doesn’t follow a predictable seasonal pattern. The peak months were April and May with 16 reported cases and October with 14 reported cases.

**Should I keep my child from School?**
Exclude until under treatment for 24hrs and lesions are healing; cover lesions.
Scabies

What is Scabies?
Scabies is a skin disease caused by infestation of tiny mites called Sarcoptes scabiei.

Signs & Symptoms?
When infested, the most common symptoms are intense itching, pimple-like rashes, scales or blisters, and sores caused by scratching. Rashes are most commonly seen around the elbows, in-between fingers and toes and on the wrists. Crusty sores may develop if the rash is scratched.

How do you get Scabies?
Scabies is spread by direct person-to-person skin contact. Scabies can be transmitted through indirect transmission via objects such as the clothing, bedding, and towels of an infected person.

How can Scabies be prevented?
The appropriate treatment of scabies patients and their household contacts is the most important prevention method. Direct skin contacts with infected persons should be avoided. Environmental cleaning is recommended as scabies can survive 2-5 days away from human hosts. All washable personal items and clothing worn in the prior week by the case must be laundered. Vacuum the carpeted floors and upholstered furniture in any common area that the infested individual has visited. Refer to the MDHHS Scabies Prevention and Control Manual for more information.

2018-2019 School Year Data Analysis:
During this school year, Scabies was the third lowest reported illness with 57 reported cases. The peak month of scabies was November with 12 cases reported.

Should I keep my child from School?
Until treatment is completed.
Pink Eye

What is Pink Eye?
Pink eye, also known as conjunctivitis, is the redness and swelling of the mucous membrane that lines the eyelid and eye surface.

Signs & Symptoms?
The signs and symptoms of pink eye include the redness in the white of the eye, swelling of the eyelids, itching or burning feeling of the eyelids, swollen and tender areas in front of the ears and a lot of tearing. Viral conjunctivitis typically produces a watery drainage whereas bacterial conjunctivitis produces a thicker, yellow-green drainage.

How can I get Pink Eye?
Pink eye can be transmitted by direct contact with eye drainage of someone who has pink eye. Pink eye is also indirectly transmitted via surfaces or objects contaminated with drainage of an infected individual.

How can Pink Eye be prevented?
Poor hand washing is the main cause of the transmission of pink eye. Washing hands and eyes thoroughly can prevent the spread of eye drainage. Avoiding itching, scratching, and other general touching of the eye will effectively prevent the spread of pink eye. The sharing of objects is also known to spread the infection. Routine cleaning and disinfecting will help limit the spread of pink eye.

2018-2019 School Year Data Analysis:
Pink eye accounted for 1,254 reported cases during this school year, 40.5% of reported skin/tissue cases. Reports of pink eye were most common in November, March and May. The peak month this school year was March with 192 reported cases.

Should I keep my child from School?
Bacterial Conjunctivitis: No exclusion unless the child has a fever. Viral Conjunctivitis: Only exclude if diagnosed with Herpes Simplex Virus conjunctivitis and eye is watering.
Hand, Foot, and Mouth Disease

What is Hand, Foot, and Mouth?
Hand, foot, and mouth disease is a viral illness that most commonly effects infants and children under the age of 5 years old. This disease can also occur in older children and adults. This disease is caused by viruses that belong to the Enterovirus group.

Signs & Symptoms?
Hand, foot, and mouth usually consists of fever, painful sores in the mouth. A skin rash develops on the palms of the hands and soles of the feet and may turn into blisters. Rash and blisters may also appear on the knees and buttock or genital areas.

How can I get Hand, Foot, and Mouth?
This disease is transmitted through close personal contact, water droplets from infected persons, contact with feces of infected persons, and contact with contaminated objects.

How can Hand, Foot, and Mouth be prevented?
There is currently no vaccine for this disease. Frequently washing hands with soap and water, especially after changing diapers and using the restroom. Clean and disinfect frequently touched surfaces and avoiding close contact such as kissing, hugging or sharing utensils. There is currently no specific treatment for this disease, however, over-the-counter medications can be taken to relieve pain and fever. The use of mouthwashes and sprays may also be used to numb mouth pain.

2018-2019 School Year Data:
During this school year there were 197 reported cases of hand, foot, and mouth disease, accounting for 6.4% of Skin/Tissue Infections category. This disease was most common during the fall months, peaking in October with 83 reported cases. Hand, foot, and mouth disease accounted for less than 1% of all illnesses reported for the 2018-2019 school year.

Should I keep my child home from school?
If secretions from blisters can be contained, no exclusion is required.
Simple Steps to Improve Your School’s Reporting

1. Effective Data Collection:
   It is important to try to gather as much detail about the student’s illness as possible. Establishing a probable diagnosis helps the school prevent future outbreaks, control disease transmission, and provide the health department with accurate surveillance data.

2. Communicate with Parents:
   Utilize school newsletters and other communication mediums to educate parents on the current health trends and the importance of providing detailed symptom information when reporting a child’s illness.

3. Provide Accurate Information:
   When schools report information multiple times for the same week, via the online reporting system, both data entries are collected and entered into our dataset. This creates multiple data entries and requires careful dissection of the entries to determine which data entry is accurate. If you need to alter your weekly reports, please call the Health Department at 616.632.7228.

4. Proper Categorization
   Our analysis revealed many instances of “diarrhea” or “vomiting” being entered into the “Other” category of the reporting forms. All illness reports that meet the criteria for the flu-like illness categories should be entered in that section in order to provide more accurate surveillance data to the health department.
Conclusion

The Kent County Health Department appreciates your continued participation in our school surveillance system. The surveillance data provided by schools provides a valuable overview of the communicable disease in the school/day care settings of Kent County and offers insight into what is occurring in the greater community.

Several resources for schools and daycares are available on the Kent County Health Department website:

https://www.accesskent.com/Health/CommDisease/school_daycare.htm

For the 2019-2020 school year, schools can send surveillance data through this website:
https://www.accesskent.com/SchoolReporting/

If you haven’t signed up for the Online Reporting, this PDF outlines the registration process.
https://www.accesskent.com/Health/CommDisease/pdfs/Online_Registration_Form.pdf

If your school will fax reports, complete this form and fax to 616.632.7085 before 4 PM on Friday.

Our website includes a comprehensive resource guide for schools and daycares at:

Schools should review this resource guide in preparation to the following school year.

The continued reporting of surveillance data is crucial for implementation of effective preventative measures of the Kent County Health Department.
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Resources

Respiratory Flu:
- CDC Influenza Resources for Schools & Childcare Providers
- Take 3 Actions to Fight the Flu
- Seasonal Flu Vaccine Information

Stomach Flu:
- Guidelines for Environmental Cleaning and Disinfection of Norovirus
- Mayo Clinic Gastroenteritis Information
- Influenza vs. Stomach Flu
- CDC Prevention of Norovirus/Stomach Flu

Mononucleosis:
- WEBMD Mononucleosis Topic Introduction
- Epstein-Barr Virus and Mononucleosis CDC Information

Strep Throat:
- Is it Strep Throat?
- WEBMD Prevention of Strep Throat

Bronchitis:
- Mayo Clinic Bronchitis Topic Introduction
- Understanding Bronchitis Basics

Common Cold:
- Common Cold Introduction
- Preventing Cold and Illness in School

Asthma:
- What is Asthma?
- Managing Asthma: A Guide for Schools

Head Lice:
- KidsHealth Head Lice
- CDC Head Lice Information
- Michigan Head Lice Manual
Scarlet Fever:
- Scarlet Fever CDC Feature
- Scarlet Fever Prevention

Fifth Disease:
- Understanding Fifth Disease Basics
- CDC Fifth Disease Information

Impetigo:
- Mayo Clinic Impetigo Information
- Impetigo Prevention

Scabies:
- CDC Scabies Information
- Scabies Prevention
- Michigan Department of Community Health Scabies Prevention and Control Manual

Pink Eye:
- Pink Eye
- Pink Eye Prevention

Hand, foot, and mouth:
- CDC Hand, Foot, and Mouth Disease (HFMD)
- Hand, Foot & Mouth Disease: Parent FAQs