



October 18, 2022

Dear Early Childhood Education Center Families,

A child at the ECEC has or is suspected of having Respiratory Syncytial Virus, also known as RSV; a different student has been diagnosed with strep throat; and another student has a confirmed case of Hand-Foot-and-Mouth Disease. These are three separate cases. This message is to inform you about RSV, strep throat, and Hand-Foot-and-Mouth Disease, as well as provide you with the related exclusion and return-to-care practices at our facility. Without violating anyone's confidentiality, the facts you need to know about your child's possible exposure in this situation are:

RSV is a virus that causes the common cold and other respiratory signs or symptoms; RSV is most common in winter and early spring, but can occur year-round.

What are the symptoms of RSV?

- Cold-like signs or symptoms for most children.
- Very young infants may exhibit irritability, poor feeding, and/or lethargy (oversleepy, drowsy). An infant may also turn blue with cough or experience brief periods of no breathing (cyanosis).
- Respiratory problems may include a wheezing sound while breathing and/or pneumonia.
- Children with weakened immune systems, prematurity, or heart/lung problems have greater difficulty when ill with this infection

How does RSV spread?

- Direct or close contact with mouth or nose secretions.
- The virus can live on surfaces for many hours and 30 minutes or more on hands.
- Before signs or symptoms appear, the infected person starts to shed virus that may infect others.

How do you control it?

- Practice good handwashing at all times (before/after eating, after diapering/using bathroom, etc).
- Prevent contact with respiratory secretions. Teach children to cover their nose and mouth when sneezing or coughing with a disposable facial tissue, if possible.
- Dispose of used facial tissues and wash hands.

Is my child excluded from group settings? NO, unless:

- Child exhibits rapid or labored breathing or turns blue when coughing.
- Child is unable to participate and staff determine they cannot care for the child without compromising their ability to care for the health and safety of other children in the group.
- The child has a fever.

When can my child be readmitted to group settings?

When exclusion criteria are resolved, the child is able to participate, and staff determine they can care for the child without compromising their ability to care for the health and safety of other children in the group.



Regarding strep throat, please take these precautions:

- Watch your child for signs of sore throat and other signs of strep (headache, fever, stomachache, rash, and swollen and tender neck glands).
- If your child develops a sore throat and any of these signs, please see your healthcare provider, tell them that another student at ECEC has strep, and ask to have your child tested for strep throat.
- *Please inform ECEC if your child has been diagnosed with strep infection.*

What is strep throat? Strep throat is an infection in the throat and tonsils caused by group A Streptococcus bacteria. People with strep throat usually have a very red, painful throat, often with fever, and sometimes with headache, abdominal pain, and nausea and/or vomiting. Most sore throats, however, are caused by viruses and are not treated with antibiotics.

How do you get strep throat? Strep throat can affect persons of any age but is most common in children. The bacterium is spread through contact with droplets from an infected person's cough or sneeze. If you touch your mouth, nose, or eyes after touching something that has these droplets on it, you may become ill. People with strep throat are generally most infectious when they have symptoms present. They continue to be infectious until they have received treatment and complete 24 hours of the prescribed medication.

How is it diagnosed? A laboratory test, such as a throat culture or a rapid test, is needed to confirm strep infection.

How is it treated? Strep infections are usually treated with an oral antibiotic, starting either with characteristic symptoms or after a positive strep test. Sometimes an injection of antibiotic may also be used to treat strep.

Why is it important that your child receive treatment? There are two main reasons:

- Treatment reduces spread. If not treated or not treated long enough, your child may continue to spread the infection to other members of your family or to other children.
- Treatment with antibiotics can usually prevent rheumatic fever or other rare, but possible dangerous complications. Rarely, some children with strep throat can develop complications like blood infections or rheumatic fever, which can damage the heart or joints.

When can your child come back to school? Children with strep infections may return to school after taking medicine for at least 24 hours and their fever is gone.

How do you stop the spread of strep throat?

- Thoroughly wash hands (yours and child's) after wiping noses and before eating/preparing food.
- Wash dishes carefully in hot, soapy water or in a dishwasher
- Do not allow food sharing or the sharing of cups, spoons, or toys that are put in the mouth.
- Cover mouth with coughing or sneezing.

If you have any questions, please contact the ECEC Health Office at 480-362-2254/2210 or the Health and Nutrition Coordinator at 480-362-2206. More information can be found at <https://www.cdc.gov/dotw/strepthroat/index.html>.

More information about **Hand-Foot-and-Mouth Disease**:

What is Hand-Foot-and-Mouth Disease?

- A common viral infection that causes outbreak of the disease in the summer and fall.
- Despite its scary name, this illness generally is mild.

What are the signs or symptoms?

- Tiny blisters in the mouth and on the fingers, palms or hands, buttocks and the soles of the feet that last a little longer than a week (one, few or all of these may be present).
- May see common cold signs or symptoms with fever, sore throat, runny nose and cough. The most troublesome findings often are the blisters in the mouth, which can make it difficult for the child to eat or drink. Other signs or symptoms, such as vomiting and diarrhea, may occur, but are less frequently troublesome.

How is it spread?

- Respiratory route (i.e. coughing, sneezing, drooling)
- Direct contact
- Fecal-oral route

How do you control it?

- Teach children and caregivers/teachers to cover their mouths and noses when sneezing or coughing with a disposable facial tissue, if possible, or with a shoulder/elbow if no facial tissue is available.
- Teach everyone to wash hands right after using facial tissues or having contact with mucus and to change or cover contaminated clothing to prevent the spread of disease by contaminated hands.
- Dispose of facial tissues that contain nasal secretions after each use.
- Practice good hand washing, especially after diaper changing.

Should your child present any of these symptoms, we recommend you consult your family healthcare provider. Any student presenting these signs and symptoms will be excluded from school. Students must have a note from a healthcare provider stating they are under treatment and cleared to return to school.

Please provide a doctor's note of clearance to return to school.

If you have any questions, please contact the ECEC Health Office at 480-362-2254/2210 or the Health and Nutrition Coordinator at 480-362-2206.

Thank you,

Tami Brungard
ECE Leader

Adapted from *Managing Infectious Diseases in Child Care and Schools: A Quick Reference Guide*. American Academy of Pediatrics

