

Chapter 6

Communicable Diseases and Information Sheets

Chapter 6

Communicable Diseases and Infectious Disease Control

CLAY COUNTY SCHOOL DISTRICT POLICY – INFECTIOUS/COMMUNICABLE DISEASE

Every child is entitled to a level of health that permits maximum utilization of educational opportunities. It is the policy of the Clay County School District to work cooperatively with the Department of Health to enforce and adhere to public health and welfare statutes and regulations. Procedures are established for prevention, control and containment of infectious diseases to ensure that both the rights of the individual and concerns of the community are addressed.

INFECTIOUS AND COMMUNICABLE DISEASE ADMINISTRATIVE PROCEDURES

- A. Florida Law-The authority for infectious disease control in Florida is Chapter 381.0031 F.S., 64D- 3.046 F.A.C.
- B. Reporting and controlling infectious disease suspected or detected within the school community will be accomplished as follows:

1. The Principal will **not** permit a student to enter the school who is out of compliance with the current required immunization schedule, unless exempt for medical reasons or religious beliefs.

2. Any student with symptoms of communicable illness should be excluded from school until symptoms are no longer present, or approval for return has been granted by the student's physician, the school nurse, the principal, the County Health Department, or the State Office of Epidemiology. Consult the Control of Communicable Diseases Manual for specific readmission procedures for certain health conditions.

a) Exclusion from school should be based on Control of Communicable Diseases Manual. This manual is the school district's guidelines for controlling infectious diseases. This reference also provides information on incubation periods, symptoms, transmissions and control methods.

b) For students readmitted with open wounds, the lesions must be completely bandaged or covered, so that any draining fluid is prevented from making contact with other persons or surfaces.

3. If a school administrator has any questions concerning infectious disease, the assigned Health Department Nurse and/or Clay County Health Department should be contacted.
4. The Florida Department of Health may have access to any establishment and records of any establishment in the discharge of its official duties in accordance with the law.
5. Diseases of public health significance **must** be reported by the nurse who attends to a student infected with these diseases or suspected diseases.
6. If a need occurs to send letters to parents about a serious, suspected or diagnosed infectious disease, the letter should be initiated by the County Health Department and then reviewed by the Principal and/or the Supervisor of Student Services and the School Nurse.
7. It is not necessary to inform all parents when a few cases of infectious disease occur if it is determined that the classroom or school is not at risk for an epidemic. Parents/guardians of the affected children will be notified. In certain cases, the School Nurse, in consultation with the Principal and/or Supervisor of Student Services, may decide to notify all parents of the disease outbreak.
8. If an infectious disease epidemic is present, the supervisor of Student Services will confer with the Health Department School Health Coordinator and/or Health Department Epidemiology supervisor. The supervisor of Student Services will also consult with the School Principal and School Nurse to determine necessary procedures to prevent further spread of disease. The decision to close schools due to infectious disease outbreaks is at the discretion of the school district's administration. Consultation on such decisions is available to the School District from the State Office of Epidemiology and the Department of Health.
9. School personnel and others involved in education and caring for a child with an infectious disease, will respect the child's right to privacy, including maintaining confidential records. The number of personnel who are aware of the child's condition should be kept to the minimum. (Family Education Rights and Privacy Act of 1974).

10. General Information:

The County Health Department Nurse will be viewed as the resource for communicable disease in the school. She/He can give general information and assist in decision-making when communicable diseases are suspected. The nurse/health designee must guard against being placed in the position of making a medical diagnosis. The school nurse may also be asked to gather information concerning the suspected communicable disease.

10. Reporting Procedure:

The procedure outlined below should be followed when verifying or reporting a suspected communicable disease case:

a) Contact the School Nurse. The nurse/ health designee should obtain as much information concerning the situation as is available at the school such as:

1. Name
2. Address
3. Phone
4. Birth date
5. Parent's names
6. Days of attendance at school
7. Immunization dates if pertinent
8. Hospital and physician name, if available
9. Diagnostic Tests performed
10. How information was obtained (source)

b) Phone the Public Health Department and relay the information obtained.

The following diseases of public health significance are required to be reported to the local Health Department when suspected or diagnosed.

Reportable Diseases/Conditions in Florida

Practitioner* List 11/24/08

Did you know that you are required by Florida statute** to report certain diseases to your local county health department?

*Reporting requirements for laboratories differ. For specific information on disease reporting, consult Rule 64D-3, Florida Administrative Code (FAC).

! = Report immediately 24/7 by phone upon initial suspicion or laboratory test order

☎ = Report immediately 24/7 by phone

• = Report next business day

+ = Other reporting timeframe

! Any disease outbreak
! Any case, cluster of cases, or outbreak of a disease or condition found in the general community or any defined setting such as a hospital, school or other institution, not listed below that is of urgent public health significance. This includes those indicative of person to person spread, zoonotic spread, the presence of an environmental, food or waterborne source of exposure and those that result from a deliberate act of terrorism.
Acquired Immune Deficiency Syndrome (AIDS)+
Amebic encephalitis*
Anaplasmosis*
! Anthrax
Arsenic poisoning*
! Botulism (foodborne, wound, unspecified, other)
Botulism (infant)*
! Brucellosis
California serogroup virus (neuroinvasive and non-neuroinvasive disease)*
Campylobacteriosis*
Cancer (except non-melanoma skin cancer, and including benign and borderline intracranial and CNS tumors)+
Carbon monoxide poisoning*
Chancroid*
Chlamydia*
! Cholera
Ciguatera fish poisoning (Ciguatera)*
Congenital anomalies*
Conjunctivitis (in neonates ≤ 14 days old)*
Creutzfeldt-Jakob disease (CJD)*
Cryptosporidiosis*
Cyclosporiasis*
Dengue*
! Diphtheria
Eastern equine encephalitis virus disease (neuroinvasive and non-neuroinvasive)*
Ehrlichiosis*
Encephalitis, other (non-arboviral)*
☎ Enteric disease due to: <i>Escherichia coli</i> , O157:H7 <i>Escherichia coli</i> , other pathogenic <i>E. coli</i> including entero-toxicogenic, invasive, pathogenic, hemorrhagic, aggregative strains and shiga toxin positive strains
Giardiasis*
! Glanders
Gonorrhea*

Granuloma inguinale*
! <i>Haemophilus influenzae</i> (meningitis and invasive disease)
Hansen's disease (Leprosy)*
☎ Hantavirus infection
☎ Hemolytic uremic syndrome
☎ Hepatitis A
Hepatitis B, C, D, E, and G*
Hepatitis B surface antigen (HBsAg) (positive in a pregnant woman or a child up to 24 months old)*
Herpes simplex virus (HSV) (in infants up to 60 days old with disseminated infection with involvement of liver, encephalitis and infections limited to skin, eyes and mouth; anogenital in children ≤ 12 yrs)*
Human Immunodeficiency Virus (HIV) infection (all, and including neonates born to an infected woman, exposed newborn)+
Human papillomavirus (HPV) (associated laryngeal papillomas or recurrent respiratory papillomatosis in children ≤ 6 years of age; anogenital in children ≤ 12 yrs)*
! Influenza due to novel or pandemic strains
☎ Influenza-associated pediatric mortality (in persons aged < 19 yrs)
Lead poisoning (blood lead level ≥ 10µg/dL); additional reporting requirements exist for hand held and/or on-site blood lead testing technology, see 64D-3 FAC*
Legionellosis*
Leptospirosis*
☎ Listeriosis
Lyme disease*
Lymphogranuloma venereum (LGV)*
Malaria*
! Measles (Rubeola)
! Melioidosis
Meningitis (bacterial, cryptococcal, mycotic)*
! Meningococcal disease (includes meningitis and meningococemia)
Mercury poisoning*
Mumps*
☎ Neurotoxic shellfish poisoning
☎ Pertussis
Pesticide-related illness and injury*
! Plague
! Poliomyelitis, paralytic and non-paralytic
Psittacosis (Ornithosis)*
Q Fever*
☎ Rabies (human, animal)

! Rabies (possible exposure)
! Ricin toxicity
Rocky Mountain spotted fever*
! Rubella (including congenital)
St. Louis encephalitis (SLE) virus disease (neuroinvasive and non-neuroinvasive)*
Salmonellosis*
Saxitoxin poisoning including paralytic shellfish poisoning (PSP)*
! Severe Acute Respiratory Syndrome-associated Coronavirus (SARS-CoV) disease
Shigellosis*
! Smallpox
<i>Staphylococcus aureus</i> , community associated mortality*
☎ <i>Staphylococcus aureus</i> (infection with intermediate or full resistance to vancomycin, VISA, VRSA)
☎ Staphylococcal enterotoxin B (disease due to)
Streptococcal disease (invasive, Group A)*
<i>Streptococcus pneumoniae</i> (invasive disease)*
Syphilis*
☎ Syphilis (in pregnant women and neonates)
Tetanus*
Toxoplasmosis (acute)*
Trichinellosis (Trichinosis)*
Tuberculosis (TB)*
! Tularemia
☎ Typhoid fever
! Typhus fever (disease due to <i>Rickettsia prowazekii</i> infection)
Typhus fever (disease due to <i>Rickettsia typhi</i> , <i>R. felis</i> infection)*
! Vaccinia disease
Varicella (Chickenpox)*
Varicella mortality*
! Venezuelan equine encephalitis virus disease (neuroinvasive and non-neuroinvasive)
Vibriosis (Vibrio infections)*
! Viral hemorrhagic fevers (Ebola, Marburg, Lassa, Machupo)
West Nile virus disease (neuroinvasive and non-neuroinvasive)*
Western equine encephalitis virus disease (neuroinvasive and non-neuroinvasive)*
! Yellow fever

You are an invaluable part of Florida's disease surveillance system. For more information, please call the epidemiology unit at your local county health department or the Bureau of Epidemiology, Florida Department of Health (FDOH): 850-245-4401 or visit http://www.doh.state.fl.us/disease_ctr/epi/topics/surctm



**Section 381.001(1), Florida Statutes provides that "Any practitioner, licensed in Florida to practice medicine, osteopathic medicine, chiropractic, naturopathy, or veterinary medicine, who diagnoses or suspects the existence of a disease of public health significance shall immediately report the fact to the Department of Health." The FDOH county health departments serve as the Department's representative in this reporting requirement. Furthermore, this Section provides that "Periodically the Department shall issue a list of diseases determined by it to be of public health significance... and shall furnish a copy of said list to the practitioners..."

CLAY COUNTY HEALTH DEPARTMENT
COMMUNICABLE DISEASES/EPIDEMIOLOGY

Section 381.0031(1,2), Florida Statutes provides that "Any practitioner, licensed in Florida to practice medicine, osteopathic medicine, chiropractic, naturopathy, or veterinary medicine, who diagnoses or suspects the existence of a disease of public health significance shall immediately report the fact to the Department of Health."

For all reportable diseases EXCEPT HIV/AIDS, STD, or TB** please mail or fax this form to:

Clay County Health Department
Communicable Diseases/Epidemiology
1305 Idlewild Avenue
P.O. Box 578
Green Cove Springs, Fl 32043

Phone: 904-529-2800 Ext. 2848 Fax: 904-529-2802, DO NOT E-MAIL

Disease Information

Name of Disease: _____

Onset of Symptoms: ____/____/____ (mm/dd/yr)

Symptoms: _____

Treated by physician: Yes ___ No ___ Unknown ___ If yes, physician name: _____

Hospitalized: Yes ___ No ___ Unknown ___ If yes, hospital name: _____

If reporting chicken pox (varicella), vaccine date(s): 1) ____/____/____ 2) ____/____/____
mm dd yr mm dd yr

Patient and/or Student Information

Name of Patient/Student: _____ Date of Birth ____/____/____
mm dd yr

Sex: Male ___ Female ___ Hispanic ___ NonHispanic ___

Race: White ___ Black ___ American Indian/Alaskan native ___ Asian/Pacific Islander ___ Other ___

Address: _____
Street Apt City State Zip

Parent/guardian: _____ Work phone: _____ ext. _____

Parent/guardian: _____ Work phone: _____ ext. _____

Name of School/Daycare: _____ Grade: _____

Reporter's Name: _____ Phone: _____

** For HIV/AIDS, STD, and TB reporting, contact those departments directly:
HIV/AIDS and STD 904-529-2800 ext 2871
TB 904-529-2800 ext 2871
Fax: 904-529-2802

GENERAL PRECAUTIONS FOR ALL PERSONNEL WHEN HANDLING BODY FLUIDS AND POTENTIALLY CONTAMINATED MATERIALS:

General Precautions: all personnel should use precautions when handling blood, vomitus, urine, feces, saliva, nasal discharge, draining boils, draining ears, impetigo, etc., and when handling contaminated items such as used bandages and dressings. It is important to keep in mind that some persons with no apparent symptoms may be unrecognized carriers and may be infectious.

1. Disposable vinyl or latex gloves should be worn when making contact with body fluids especially if you have an open sore or cut on hands.
2. Gloves should be discarded after each use.
3. Disposable items such as disposable gloves, paper towels and tissues, etc., should be used to handle body fluids.
4. Hands should be washed thoroughly with soap and running water after handling body fluids and contaminated articles, even after the removal of gloves.
5. Disposable items such as used bandages, dressings, and sanitary napkins should be discarded in plastic lined trash containers with lids. (Receptacles lined with a plastic bag for discarding sanitary napkins should be available in every restroom for women). Trash bags should be closed, tied, and discarded daily.
6. Plastic bags should not be reused.
7. The custodian should be contacted when assistance is needed in cleaning up spills of blood or other body fluids.
8. Clean and disinfect surfaces on which blood or other body fluids have been spilled. Use a 1:10 dilution of bleach to water/or approved germicidal cleaner.

Universal Precautions

“Universal Precautions” simply means treating all body fluids as potential sources of contamination/infection. According to OSHA guidelines all employees should have annual training regarding Universal Precautions, Bloodborne Pathogens and Biomedical waste disposal. Training in the school setting may be accomplished by showing the CCSD approved Bloodborne pathogen film. See principal for time/date to schedule.

The following Presentation may be used when presenting bloodborne pathogen information to staff at the request of the Administration.

BLOODBORNE PATHOGEN PRESENTATION

Introduce topic. Discuss that several incidents happened in Clay County School District to staff members in previous years and the importance of everyone understanding an exposure and what to do.

Show film (DVD available through the District Media Center)

Staff sign in sheet goes to principal/or designee.

Discuss exposure:

An exposure occurs when human blood or other potentially infectious materials enter your body by:

- a splash to the eye, mouth, or other mucous membrane
- contamination of non-intact (broken) skin
- a puncture or cut with a sharp instrument

Give examples: A student spitting on a teacher (no blood) would not be an exposure, but an exposure would occur if a teacher got blood on them from assisting a student with a playground injury.

Discuss Universal Precautions

The body fluids of all persons should be considered potentially infectious.

Body fluids include: blood, drainage from scrapes and cuts, feces, urine, and vomit.

Demonstrate how to use gloves.

Baggies with gloves and Band-Aids may be given to staff.

Policy and Procedure if exposure occurs:

- Wash area with soap and water. Use hand sanitizer or antiseptic wipes if no water available.
- Contact School Nurse.
- First aid as needed.
- Report incident to principal and depending on seriousness of situation, principal may notify superintendent office.
- *For staff exposure*, fill out accident report and workman's compensation paperwork. See your school workman's compensation representative. Employee will be sent to the workman's compensation doctor and will follow-up with them regarding treatment plan.
- *For student exposure*, fill out a student accident report and forward to the Risk Management office at the district office. A parent should be advised to follow-up with their child's physician for medical evaluation.

POLICIES & GUIDELINES FOR HANDLING BODY FLUIDS IN SCHOOL

Publicity about certain diseases such as Hepatitis B and AIDS causes concern about the risk of diseases being transmitted in school. There is no evidence that Hepatitis B and AIDS are spread by casual person-to-person contact. However, organisms which cause these, and other diseases, may be present in body fluids such as blood, urine, feces, vomitus, saliva, drainage from sores/cuts, semen, etc. There is only a theoretical potential for the transmission of diseases through casual contact with body fluids of an infected person. Any theoretical transmission would most likely involve exposure of open skin lesions or mucous membranes to blood or other body fluids of an infected person.

It is possible for individuals who have no symptoms of disease to have infectious organisms present in their body fluids. These individuals may be in various stages of infection or may be chronic carriers.

The theoretical risk of disease transmission should be considered when coming into close contact with any person's body fluids. Transmission of disease is more likely to occur from contact with unrecognized carriers than from a person known to be ill because simple precautions are not always taken with a seemingly well person.

Therefore, it is recommended that increased precautions be taken in handling body fluids of *any* student in *any* school setting. The following guidelines are intended to provide simple and effective precautions against disease transmission for all persons exposed to blood or body fluids of any student.

A. Hand washing:

1. Thorough and frequent hand washing is probably the most effective practice in preventing the spread of disease. Proper hand washing requires the use of soap from a dispenser (preferable with a germicidal soap), and warm running water.
 - a) Use enough soap to produce lots of lather.
 - b) Rub skin against skin to create friction for approximately 30 seconds.
 - c) Rinse under running water.
 - d) Dry with paper towels.
 - e) Keep fingernails short and clean.

2. Examples of when to wash hands:
 - a) Before eating and after using the rest room.
 - b) Before and after administering first aid or medication to a student.
 - c) After contact with another person's blood, saliva, nasal secretions, or other body fluids.
 - d) After disinfecting items or surfaces contaminated by body fluids.

e) Before and after physical contact with a student.

B. Use of disposable non-sterile gloves:

1. Direct hand contact with body fluids such as blood, feces, urine, and vomitus should be avoided by using disposable gloves. A supply of disposable gloves will be available in the health room and preferable in the classrooms.
2. Examples of when to use disposable gloves:
 - a) When cleaning up blood spills, vomitus, etc.
 - b) When handling cloth, diapers, paper, or surfaces soiled with blood, urine, feces, or vomitus.
 - c) When handling clothes soiled by incontinence.
 - d) When caring for bleeding, oozing wounds.
 - e) When you have cuts or abrasions on your hands.
3. Procedure:
 - a) Gloves are non-sterile and are intended to protect your hands.
 - b) Removal of gloves must be done carefully to avoid contaminating your hands with the outside of the soiled glove. Remove gloves last after discarding or disposing of contaminated materials. Follow these steps:
 - Grasp the top edge of one glove.
 - Unroll the glove, inside out, over the hand. Discard in a plastic waste bag.
 - With the bare hand, grasp the opposite glove cuff on the inside surface.
 - Remove the glove by inverting it over the hand. Discard in a plastic waste bag.
 - Wash hands.

C. Requirements for rooms where diapers are changed:

1. Rooms should have a utility sink with hot and cold running water.
2. Sinks should be located next to the changing table.
3. Changing tables should have plastic covers or other impervious surface for easy cleaning.
4. Changing tables should be covered with protective paper prior to changing soiled diapers.
5. Disposable wipes should be used when changing diapers.
6. Paper products and soiled diapers should be disposed of in a covered container lined with plastic liner.
7. Changing tables should be sanitized and protective paper replaced between each diaper change.
8. Potty chairs should be cleaned and sanitized after each use.

D. Disinfection/Disposal of contaminated materials and surfaces:

1. Floors, carpeting, tile, etc. contaminated with body fluids:
 - a) Apply dry absorbent cleaner (such as Vomoose Absorbent or similar item) to the area.
 - b) Leave on for a few minutes to absorb the fluid.
 - c) Vacuum or sweep up.
 - d) Using disposable gloves, discard vacuum bag and/or sweepings in a plastic waste bag. Double bag if necessary.
 - e) After removal of soil, apply disinfectant solution to the area (1:10 bleach solution).
 - f) Wash broom, mop, dustpan, bucket, etc. in soap and water. Rinse in disinfectant.
 - g) Place disposable cleaning items such as paper towels and cloths in plastic waste bag.
 - h) Remove gloves according to procedure and discard in plastic waste bag.
 - i) Remove plastic waste can liners at least once a day from the waste receptacle, tie properly, and dispose of in an appropriate dumpster.

2. Clothing, towels, and other non-disposable items contaminated with body fluid:
 - a) Using disposable gloves, rinse items and place in plastic bag, seal, and send home for laundering with appropriate instructions:
 - b) Wash with soap and water separately from other items.
 - c) Pre-soak if necessary.
 - d) If material is bleachable, add ½ cup household bleach to the wash cycle.
 - e) If material is not bleachable, add ½ cup non-chlorine bleach to the wash cycle.

3. Counter tops, cots, changing tables, sinks, etc:
 - a) If soiled with body fluid, thoroughly clean with soap and water, then disinfect with chlorine bleach solution (1/4 cup household bleach to 1 gallon of water, prepared fresh daily and stored in a covered container).

 - b) Health room countertop, cots, changing tables, etc. should be routinely cleaned (at least once a day) with bleach solution or approved germicidal cleaner.

4. Gauze pads, cotton balls, diapers, and other disposable items used for first aid or personal care:
 - a) Discard in plastic waste bags and seal.
 - b) Remove bag from waste receptacle daily.

- c) Dispose of in appropriate dumpster.
 - d) Pay particular attention to health room disposal.
5. Dishes:
- a) In the cafeteria, use electric dishwasher with a sani-cycle.
 - b) In the classroom, wash in hot soapy water followed by a thorough rinsing and sanitizing in chlorine bleach solution (1 oz. {1 capful} of bleach to 1 gallon of water).

BIOMEDICAL WASTE PLAN

CLAY COUNTY SCHOOLS

Purpose: To inform affected staff of the requirements for the proper management of biomedical waste generated in school health rooms.

(Biomedical Waste = BMW)

1. IDENTIFICATION/DEFINITION OF BMW:

Biomedical waste is any solid or liquid waste that may present a threat of infection to humans. Examples include, but are not limited to: discarded sharps, blood, blood products, and human body fluids. The following are also included:

- a) Used, absorbent materials saturated with blood, body fluids, excretions or secretions contaminated with blood. Absorbent material included items such as bandages, gauze, and sponges.
- b) Disposable devices such as nasogastric tubes, foley and/or suction catheters, etc., that have been contaminated with blood or other body fluids.
- c) Sharps or devices with physical characteristics capable of puncturing, lacerating or penetrating the skin.

2. HANDLING OF BMW:

- a) All BMW will be segregated from all other waste. This will be done by placing the sharps directly into a sharps container that meets the required specifications. (Administrative Code 10D-104).
- b) Biomedical waste **shall not** be mixed with other waste.
- c) Sharps containers shall be designated for the containment of sharps. Milk jugs, coffee cans, or other types of containers are not designed for the containment of sharps and are **not** approved.
- d) Sharps containers shall be leak resistant, rigid, and puncture resistant under normal conditions of handling and use.
- e) Sharps containers should be red, and must be clearly labeled with the international biological hazard symbol.



- f) All BMW should be labeled (prior to school removal) with the name of the school and date.
- g) Sharps containers must be transported within 30 days of locking (when full).
- h) BMW bags must be transported within 30 days of onset of use.

3. TRANSFER:

Packages of BMW shall remain intact until disposal. There shall be no recycling efforts nor intentional removal of waste from the sharps container prior to disposal. Packages of BMW shall be handled and transferred in a manner that does not risk breaking or puncturing the package.

4. TREATMENT AND DISPOSAL:

Sharps containers and BMW packages will be picked up by the district's designated BMW service.

5. SPILL CLEAN UP:

Surfaces contaminated with spilled or leaking biomedical waste shall be disinfected with the following:

- a) Hypochlorite solution (household bleach) diluted between 1:10 and 1:100 with water.
- b) Chemical germicides that are registered by the Environmental Protection Agency as hospital disinfectants when used at recommended dilutions and directions.
- c) Large spills will be treated first with an approved absorbent such as "Floor Dry" or kitty litter. The absorbent containing BMW shall be disposed of in a BMW container.

6. RECORDS:

All BMW records should be maintained for three years. Each generator of BMW shall prepare, maintain and implement a written plan to identify, handle and manage biomedical waste within their facility in accordance with the State of Florida, Department of Health, Chapter 64E-16 of the Florida Administrative Code. This plan will be revised annually. Among these records, documentation of each pick-up date of the BMW should be recorded on a log sheet.

7. TRAINING:

Both new and existing school health designees will receive training regarding BMW. This instruction will be given as close as possible to the employees starting their assigned duties. Update training is required annually. A record of all employees trained will be maintained for 3 years. Training will include pertinent components of "The Policies and Guidelines for Handling Body Fluids in School"; including information describing the flow of BMW in each school setting from the point of origin to the point of treatment and disposal.

BLOODBORNE PATHOGEN O.S.H.A. GUIDELINES

The following statements are actual O.S.H.A. Guidelines.

***Bandages may not be regulated waste**

29 CFR 1910.1030 (b)

The bloodborne pathogens standard defines regulated waste as liquid or semi-liquid blood or Other Potentially Infectious Materials (OPIM). Contaminated items that would release blood or OPIM in liquid or semi-liquid state if compressed, items that are caked with dried blood or OPIM and are capable of releasing these materials during handling, contaminated sharps, pathological and microbial wastes containing blood or OPIM. Bandages, which are not saturated to the point of releasing blood or OPIM if compressed, would not be considered as regulated waste.

***Feminine Hygiene Products, Bandages**

29 CFR 1910.1030(b)

Discarded feminine hygiene products (used to absorb menstrual flow) do not generally fall within the definition of regulated waste. Waste containers where these products are discarded are expected to be lined in such a way as to protect employees from physical contact with the contents.

*****It is the employer's responsibility to determine the existence of regulated waste. This determination is not to be based on actual volume of blood, but rather on the potential to release blood or OPIM (e.g., when compacted in the waste container). It is determined, on a case-by-case basis that sufficient evidence of regulated waste exists, e.g., through such visual factors as a pool of liquid in the bottom of a container or dried blood flaking off during handling, or based on employee interviews, notice of violation may be issued.

Regulated waste such as liquid or semi-liquid blood or other potentially infectious materials should be red bagged. Biomedical waste in a red bag should be disposed of within 30 days after the first item is placed in the bag. *****

***Quaternary Ammonia Products for Cleaning Non-Contaminated Areas Only**

29 CFR 1910.1030(d)(4)(I) and (ii)(A)

A tuberculocidal, virucidal, bactericidal disinfectant must be used to clean up blood or body fluids. The use of quaternary ammonium compounds is appropriate for housekeeping procedures that do **not** involve the clean up of contaminated (defined as the presence or reasonably anticipated presence of blood or OPIM) surfaces.

***Acceptable Disinfectant Products - 29 CFR 190.1030(d) (4) (ii) (A)**

As stated in OSHA Instruction CPL 2-2.44C, "Enforcement Procedures for the Occupational Exposure to Bloodborne Pathogens Standard", a product must be registered by the Environmental Protection Agency (EPA) as a tuberculocidal disinfectant in order for OSHA to consider it to be effective in the cleanup of a contaminated item or surface.

A solution of 5.25 percent sodium hypochlorite (household bleach) diluted between 1:10 and 1:100 with water is also acceptable for the cleanup of contaminated items or surfaces.

Quaternary (household) ammonia products are appropriate for use in general housekeeping procedures that do not involve the cleanup of contaminated items or surfaces. Please bear in mind that the term "contaminated" is defined as the presence, or reasonable anticipated presence, of blood or OPIM.

***Household Bleach Acceptable for Decontamination**

29 CFR 190.1030(d)(4)(ii)(A)

OSHA Instruction CPL 2-2.44C "Enforcement Procedures for the Occupational Exposure to Bloodborne Pathogens Standard", states that disinfectant products registered by the U.S. EPA as tuberculocidal are considered appropriate for the cleanup of contaminated items or surfaces. OSHA recognized that although generic sodium hypochlorite (household bleach) solutions are not registered as such, they are generally recommended by the U.S. Public Health Services Center for Disease Control (CDC) for the disinfection of environmental surfaces.

We confirm that in accordance with the recommendations of the CDC solutions of 5.25 percent sodium hypochlorite diluted between 1:10 and 1:100 with water are also acceptable for disinfection of environmental surfaces and for the decontamination of sites followed by initial cleanup (wiping up spill of blood or OPIM).

VARICELLA/ CHICKEN POX DISEASE REPORT

Clay County Health Department
P.O. Box 578 Green Cove Springs, FL 32043

Section 381.0031 (1,2), Florida Statutes provides that “Any practitioner, licensed in Florida to practice Medicine, osteopathic medicine, chiropractic, naturopathy, or veterinary medicine, who diagnoses or suspects the existence of a disease of public health significance shall immediately report the fact to the Department of Health.” The DOH county health departments serve as the Department’s representative in this reporting requirement.

Date: _____

Patient Name (Last, First, Middle) _____

Address _____

Telephone # _____ Parent’s Names _____

School _____ Grade _____

Gender _____ Race _____ Ethnicity (Hispanic or not Hispanic) _____

Date of Birth _____ Pregnant? _____ EDC? _____

Date of Onset _____ Symptoms _____

Date of Examination _____ Date of Vaccine _____

Person Reporting _____ Telephone # _____

Physician Confirmed- Yes No Physician/Provider _____

Address and Telephone Number of Physician (if known) _____

You may report by phone, fax, or mail to Epidemiology Department, Clay County Health Department, P.O. Box 578, Green Cove Springs, Florida 32043, or call (904)529-2852 or 529-2848.

24/7/365 904-755-2432.

Fax: (904) 529-1043 or (904)529-2802

Is It Catching?

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Clay County Health Department

CAMPYLOBACTER

What is **Campylobacter**?

- **Campylobacter** is a contagious diarrhea caused by a germ

What are the symptoms of **Campylobacter**?

- People usually get symptoms 2 to 5 days after being infected and they include diarrhea, abdominal pain, fever, nausea and vomiting. There is often blood or mucous in the stools.

How is **Campylobacter** spread?

- **Campylobacter** is often a result of eating undercooked pork and chicken, or contact with infected pets. **Campylobacter** germs are in the diarrheal stools of an infected person while they are sick and for several days or weeks afterwards.

Campylobacter infections pass from stools or soiled fingers of one person to the mouth of another person. This happens when people are careless about basic hygiene and hand washing. It is very likely to occur among toddlers who are not fully toilet trained. Food may become contaminated by infected food handlers who forgot to wash their hands with soap after using the bathroom.

How **Campylobacter** treated?

- **Campylobacter** can be treated with antibiotics. People with mild infections will usually recover on their own. Antibiotics may shorten the duration of the illness and prevent relapse when they are given early in the course of the intestinal infection.

How can I prevent **Campylobacter**?

- *Avoid* eating undercooked chicken and pork.
- *Wash* hands thoroughly with soap and water after using the toilet and changing diapers, as well as before handling or eating food.
- *Supervise* hand washing of toddlers.
- *Keep* children with diarrhea *out of* child care settings.
- *Persons* with diarrhea should *not prepare food* for others.
- *Always* wash hands after handling animals.
- *Wash* or *peel* all raw vegetables and fruits before eating.



Feel free to call us if you have any questions.
(904) 529-2852 or 2848 or 2871.



Is It Catching?

Volume 12 Issue 5

Clay County Health Department

Chickenpox (Varicella)

What is **Chickenpox**?



Chickenpox is a rash illness caused by a virus. It is usually mild, but can cause serious problems in infants, adults, and persons with impaired immune systems. Chickenpox is **contagious**, and 95% of Americans can get it by adulthood. There are approx 4 million cases in the United States every year. It is most common in the late winter and spring.

What are the symptoms of **Chickenpox**?

Chickenpox has a characteristic itchy rash, which starts on the trunk and then spreads. Red bumps may turn into blisters that dry and may become scabs in 4-5 days. The rash may be the first sign of illness, sometimes accompanied by fever and generally “feeling bad”, which could be more severe in adults. An infected person may have only a few lesions on his body or may be covered by many.

Adults may have a more serious case of chickenpox with a higher rate of complications.

How do you get it?

Chickenpox is contagious 1-2 days before the rash appears and until all blisters have formed scabs. Chickenpox develops 10-21 days after contact with an infected person. About 90% of persons in a household who have not had chickenpox will get it if exposed to a family member with chickenpox.

How can you protect yourself and your family from **Chickenpox**?

Good health habits like washing your hands after you sneeze, cough or blow your nose will help protect others. Chickenpox can be spread from the liquid in the blisters, so be sure to avoid scratching, **keep fingernails short and keep hands clean**. There is a vaccine available for chickenpox, and it is recommended that all children be routinely vaccinated at 12 months of age.

Children who exhibit lesions should **NOT** return to school until all lesions have crusted over. Immunized children without crusts can return to school when lesions have resolved.

Any questions? Call the Clay County Health Department at (904) 529-2852 or 2848 or 2871.

H:\chickenpox.doc

Clay County Health Department



What is Chlamydia? Chlamydia is a sexually transmitted disease caused by a bacteria called *Chlamydia trachomatis*. Most people infected with chlamydia are not aware of their infections (6 out of 10 people have NO symptoms) and may not seek health care to prevent the consequences of untreated chlamydia.

Symptoms ?

Chlamydia can cause, in both men and women, a penile or vaginal discharge and painful urination. Women may have abdominal pain and bleeding between menstrual periods.

Complications and Consequences?

4 out of 10 women who have untreated chlamydia will develop Pelvic Inflammatory Disease (PID) that affects the reproductive organs and can cause sterility (inability to have children). Some of these women will have a life-threatening tubal pregnancy. Men may develop severe and painful infections in their testicles. Babies who are born to mothers who are infected, but untreated, are at risk for pneumonia and eye infections.

Treatment? Chlamydia can be treated and cured with antibiotics prescribed by your provider. You and your sex partner must BOTH be treated at the same time to prevent reinfection. You should not have sexual intercourse until you and your partner have both completed treatment.

Feel free to call us if you have any questions. (904) 529-2871 or 529-2852.

Is It Catching?

Volume 5 Issue 11

Clay County Health Department



CRYPTOSPORIDIOSIS

What is **Cryptosporidiosis (Crypto)**?

- Crypto is a contagious disease caused by a microscopic parasite that can be found in drinking water and in public recreational waters (swimming pools, rivers, lakes etc) or in food that has been contaminated with the parasite.

What are the symptoms of **Crypto**?

- The symptoms generally begin 2 to 10 days after being infected and include diarrhea, loose or watery stool, stomach cramps, upset stomach, and a slight fever. Some people have no symptoms at all but can still infect other people.

How is **Crypto** spread?

- **Crypto** parasites can be released in the bowel movement of an infected human or animal. You can become infected after accidentally swallowing water or food that has been contaminated with this stool.

How is **Crypto** treated?

- Some treatment is available so consult with your health care provider for more information. Most people who have a healthy immune system will recover without treatment.

How can I prevent **Crypto**?

- Wash hands thoroughly with soap and water after using the toilet and before handling or eating food.
- Wash hands after every diaper change.
- Protect others by not swimming if you have diarrhea (essential for children in diapers).
- Avoid swallowing recreational waters (in pool, ponds, lakes, etc. **CHLORINE DOES NOT KILL THE CRYPTO PARASITE.**)
- Wash and peel all raw vegetables and fruits before eating.

Feel free to call us at if you have any questions. (904) 529-2852 or 2848 or 2871.

Is It Catching?

Volume 15 Issue 3

Clay County Health Department

CYCLOSPORA



What is **Cyclospora**?

- **Cyclospora** is a one-celled parasite, too small to be seen without a microscope.

How is **Cyclospora** spread?

- **Cyclospora** is spread by people eating or drinking food or water contaminated with infected stool. Outbreaks of **Cyclospora** have been linked to various kinds of fresh produce. It is unlikely that **Cyclospora** is passed directly from one person to another.

What are the symptoms of **Cyclospora** ?

- The symptoms of **Cyclospora** watery diarrhea, with frequent, sometimes explosive bowel movements. Other symptoms can include loss of appetite, loss of weight, bloating, increased gas, stomach cramps and nausea and vomiting. Some people do not have any symptoms at all.

How long will symptoms last?

- If not treated, the illness may last from a few days to a month or longer. Symptoms may go away and then return.

How is **Cyclospora** diagnosed?

- Your health care provider will ask you to submit stool specimens to see if you are infected.

How is infection treated?

- The recommended treatment for infection with **Cyclospora** is Septra, Bactrim or Cotrim.

How is infection prevented?

- Avoiding food or water that may be contaminated with stool may help prevent **Cyclospora**.



Feel free to call us if you have any questions.
(904) 529-2852 or 2848 or 2871.

isitcatchingcyclospora.doc

What's New in Epi??

Clay County Health Department (904)529-2800

Volume II Issue 2

What is E. coli? Why is E. coli in the news? What does it have to do with me?



Actually, E. coli is the nickname for a bacteria whose long name is Escherichia coli.

This family of bacteria has some very helpful members, as well as some very dangerous ones. All of us need a certain kind of E.coli in our intestines to help us with digestion. Different kinds of E.coli are everywhere in the environment, and anytime we eat or drink anything or touch something that has been near where animals are, there is a potential for us to ingest these bacteria. (An excellent reason to wash your hands frequently!) The E. coli we read about in the paper, making people very sick and even killing some people, is E.coli 0157:H7. This strain of E.coli produces a poison that can cause serious damage to the lining of your intestine and can lead to kidney failure and hemorrhage. E.coli outbreaks have been caused by apple juice, alfalfa sprouts and undercooked meat. So how can you protect yourself and your family from this modern threat?

1. **Always** clean any surface that has come in contact with raw meat, before any other item is placed on that surface.
2. **Always** thoroughly wash your hands after handling raw meat and before you handle any other utensils or other food items.
3. **Never** use the same plate, tray or utensils for the cooked meat that you use for the raw meat; unless you thoroughly wash the plate, tray or utensils in between.
4. **Always** cook meat, especially ground meat, until the juices run clear--pink is not good enough. In fact, it is necessary for the internal temperature of a hamburger patty to reach 160 degrees F to kill all of any contaminating E.coli.
5. Wash fresh fruit, vegetables, etc., thoroughly before eating.
6. In day care centers, schools, etc., any small children with diarrhea should be carefully handled, and kept separate from all well children. All diapers and any soiled clothing should be handled with care. The day-care worker, teacher and health-care personnel should practice strict hygiene at all times, regardless of the health of the children.



Any questions? Call (904)529-2852 or 2848 or 2871.

What's New in Epi?

Volume 6 Issue 01

FIFTH DISEASE

CLAY COUNTY HEALTH DEPARTMENT



What is **Fifth Disease** ?

- **Fifth Disease** is a catching disease also called “slapped cheek syndrome”. Some doctors call it “human parvovirus infection”. Outbreaks usually occur during the winter and spring.

What are the symptoms of **Fifth Disease**?

- Symptoms begin with a mild fever and complaints of tiredness. After a few days, the cheeks take on a flushed appearance that looks like the cheeks have been slapped. There may also be a lacy rash on the trunk, arms and legs. Most people who get Fifth Disease are not very sick and recover without problems. However, children with sickle cell anemia or an impaired immune system may become seriously ill and need to see a doctor. If a pregnant woman develops fifth disease, she should see her doctor.

How is **Fifth Disease** spread?

- **Fifth Disease** is spread through direct contact with someone who has the disease. People with Fifth Disease are only catching before the onset of the rash. Once the rash appears, a person is no longer contagious. A child who has a rash from Fifth Disease need not be excluded from school or daycare.
- Hand washing can limit the spread of Fifth Disease. Hands should be washed after using the bathroom, after coughing or sneezing, and before touching anything that goes into the mouth.

Feel free to call us at 529-2852 or 2848 or 2871 if you have any questions.

what=newfifth.doc

What's New in Epi?

Volume 6 Issue 02

Clay County Health Department

KEEP IT TO YOURSELF!

- Flu season is here again.
- Colds and flu are the most common contagious diseases in the workplace at this time of year. Following are some suggestions to prevent the spread of colds and flu.
- Remember that the ten most common factors in the spread of disease are your ten fingers! Frequent hand washing is the single most important way to prevent the spread of illness. Hands should be washed with soap under running water and with vigorous rubbing for at least 20 seconds. Wash your hands after using the bathroom, after coughing and sneezing and before touching anything you put in your mouth.
- Stay home when you are sick. Keep children home from school or day care when ill. Rest and drink plenty of fluids.
- If you share telephones and computer keyboards, keep them clean.
- Cover your cough and sneezes, use your sleeve
- Get the yearly flu vaccine

Feel free to call us if you have any questions.
(904) 529-2852, 2848 or 2871

whatnewflu.doc

Is It Catching?

Volume 14 Issue 10

Clay County Health Department

GIARDIA

What is **Giardia**?

- **Giardia** is a diarrhea caused by parasite that can be spread from one person to another.

What are the symptoms of **Giardia**?

- People usually get symptoms 3 to 25 days after being infected and they include chronic diarrhea, abdominal pain, bloating, fatigue and weight loss. People can have **Giardia** without any symptoms.

How is **Giardia** spread?

- **Giardia** is often associated with drinking contaminated water, swimming in contaminated fresh water, or having a young family member in daycare. **Giardia** cysts are in the stools of an infected person while they are sick and for several weeks or months afterwards. **Giardia** infections can pass from stools or soiled fingers of one person to the mouth of another person. This happens when people are careless about basic hygiene and hand washing. It is very likely to occur among toddlers who are not fully toilet trained. Food may become contaminated by infected food handlers who forgot to wash their hands with soap after using the bathroom.

How **Giardia** treated?

- **Giardia** can be treated by a doctor.

How can I prevent **Giardia**?

- *Avoid* drinking contaminated water.
- *Avoid* swimming in contaminated lakes.
- *Wash* hands thoroughly with soap and water after using the toilet and changing diapers, as well as before handling or eating food.
- *Supervise* hand washing of toddlers.
- Keep children with diarrhea *out of* child care settings.
- Keep children with diarrhea *out of* wading or swimming pools.
- Persons with diarrhea should *not prepare food* for others.
- *Always* wash hands after handling animals.



Feel free to call us if you have any questions.
(904) 529-2852 or 2848 or 2871.



What is Gonorrhea?

Gonorrhea (“the clap” or “the drip”) is a disease that is transmitted through sexual contact: vaginal, oral, or rectal. If not treated, gonorrhea can cause serious illnesses in men and women, and in the newborn babies of women who are infected.

Symptoms

Gonorrhea can cause, in both men and women, a penile or vaginal discharge and painful urination. Women may have abdominal or back pain and bleeding between menstrual periods. Many women have no symptoms at all until the infection has spread into the reproductive organs and is causing complications.

Incubation Period

The disease usually develops, in women, approximately 10 days after exposure. In men, the disease usually develops in 3 to 5 days.

Complications and Consequences of Untreated Gonorrhea

Women may develop Pelvic Inflammatory Disease that affects the reproductive organs and can cause sterility (inability to have children). Men, as well, can become sterile if not treated. Both men and women can develop arthritis or heart disease as a result of untreated gonorrhea. Newborn babies of women who have gonorrhea are at high risk for very serious illness.

Treatment

Gonorrhea can be treated and cured with antibiotics prescribed by your provider. You may be given pills or a shot. You and your sex partner must BOTH be treated at the same time to avoid reinfection. You should not have any sexual contact until you and your partner have both completed treatment.



Clay County Health Department
(904)529-2871, or 529-2852

What's New in Epi?

H1N1 INFLUENZA

Clay County Health Department

KEEP IT TO YOURSELF!

- H1N1 Influenza is treated the same as the seasonal influenza. H1N1 will be in the seasonal flu vaccine starting Fall of 2010. It will not be necessary to get 2 different flu shots.
- Colds and flu are the most common contagious diseases in the workplace during the year. Most of the flu activity occurs Sept. – April. The following are some suggestions to prevent the spread of colds and flu.
- Remember that the ten most common factors in the spread of disease are your ten fingers! Frequent hand washing is the single most important way to prevent the spread of illness. Hands should be washed with soap under running water and with vigorous rubbing for at least 20 seconds. Wash your hands after using the bathroom, after coughing and sneezing and before touching anything you put in your mouth.
- Stay home when you are sick. Keep children home from school or day care when ill. Rest and drink plenty of fluids.
- If you share telephones and computer keyboards, keep them clean.
- Cover your cough and sneezes, use your sleeve
- Get the yearly flu vaccine

Feel free to call us if you have any questions.
(904) 529-2852, 2848 or 2871

Is it Catching?

HAND, FOOT, & MOUTH

CLAY COUNTY HEALTH DEPARTMENT



What is **Hand, Foot, & Mouth Disease**?

- Hand, foot, and mouth disease is a common illness of infants and children, which is caused by a virus.

What are the symptoms of **Hand, foot, and mouth disease**?

- Hand, foot, and mouth disease begins with a mild fever, poor appetite, malaise (“feeling sick”), and frequently a sore throat. Sores develop in the mouth, one or two days after onset of fever and begin as small red spots that blister or become ulcers. These sores are usually located on the tongue, gums, and inside of the cheeks. A skin rash develops over one to two days with flat or raised red spots, which may have blisters. This rash is usually located on the palms of the hands and the soles of the feet, but may appear on the buttocks.

How is **Hand, foot, and mouth disease** spread?

- Hand, foot, and mouth disease is spread from person to person by direct contact with nose and throat discharges or the stool of infected persons. It is most contagious during the first week of illness.

How is **Hand, foot, and mouth disease** treated?

- No specific treatments available.
- Symptomatic treatment is given to provide relief from fever, aches, or pain from the mouth ulcers.
- Preventive measures include frequent hand washing, disinfection of contaminated surfaces by household cleaners, and washing soiled articles of clothing.

Feel free to call us if you have any questions.
(904) 529-2852 or 2848 or 2871.

isitcatchingdengue.doc

What's New in Epi?



Volume 5 Issue(13) Clay County Health Department

HEPATITIS A

What is hepatitis A?

- Hepatitis A is a liver disease caused by the hepatitis A virus.

What are the symptoms of hepatitis A ?

- Most symptoms of hepatitis A infection are mild; many people have no symptoms. If symptoms do occur, they usually come on quickly and may include fever, tiredness, loss of appetite, nausea, abdominal discomfort, dark urine and jaundice (yellowing of the skin and eyes.)

How is hepatitis A infection spread?

- Hepatitis a virus is spread from person to person by putting something in the mouth that has been contaminated with the stool of a person with hepatitis A. This type of transmission is called “fecal-oral”. For this reason, the virus is more easily spread in areas where there are poor sanitary conditions or where good personal hygiene is not practiced.
- Most infections result from contact with a household member or sex partner who has hepatitis A. Casual contact, as in the usual office, factory or school setting, does not spread the virus.

How can I prevent the spread of infection and reinfection?

- Very careful hand washing can stop the spread of hepatitis A. Thorough hand washing after using the bathroom and before eating or handling food is essential.

**Feel free to call us if you have any questions.
(904) 529-2852 or 2848 or 2871.**

What's New in Epi?



Volume 5 Issue 3

Clay County Health Department

HEPATITIS B

What is hepatitis B?

- Hepatitis B is a liver disease caused by the hepatitis B virus.

What are the symptoms of hepatitis B ?

- Symptoms of hepatitis B infection are fever, fatigue, loss of appetite, nausea, abdominal discomfort, joint pain, dark urine and jaundice (yellowing of the skin and eyes.) 30% of persons have no symptoms.

How is hepatitis B infection spread?

- Hepatitis B virus is spread through having sex with an infected person without using condoms, sharing needles or “works” when “shooting” drugs, through needle-sticks or sharps exposure while on the job, or from an infected mother to her baby during birth.

How can I avoid hepatitis B infection?

- There is a vaccine available to prevent hepatitis B. Hepatitis B vaccine is the best protection against hepatitis B.
- If you are having sex, but not with one steady partner, use latex condoms correctly and every time you have sex.
- If you are pregnant, you should get a blood test for Hepatitis B.
- Do not share personal care items that might have blood on them.

**Feel free to call us if you have any questions.
(904) 529-2852 or 2848 or 2871.**

What's New in Epi?

Volume 1 Issue 8

(904) 529-2852 or 2848
or 2871

HEPATITIS C

CLAY COUNTY HEALTH DEPARTMENT



Jill has donated blood for years. This year, she got a letter from the blood bank, rejecting her donation! The letter said her blood has tested positive for Hepatitis C! How can that be? She hasn't been sick, certainly she hasn't had any yellow eyes or skin or liver trouble! What's going on? Jill has just benefited from the progress of modern technology! The test for Hepatitis C has recently been developed and now the blood bank can test all donations to make sure nobody spreads Hepatitis C in donated blood. The blood bank didn't go into details, but we will.

That test the blood bank did on Jill's blood was very sensitive.

That means blood with Hepatitis C will not sneak by this test.

Unfortunately, it's *so* sensitive, it sometimes finds Hepatitis C when it isn't there! There is a possibility that Jill's test was a *false* positive for Hepatitis C! She needs to go to her doctor and be tested to make sure she really is (or is not!) infected with Hepatitis C.

Hepatitis C is usually spread through use of needles for illegal drugs or unclean tattoos and body piercing. Blood transfusions might have posed a risk before this test was available but since 1992 all blood is carefully screened for Hepatitis C before it is used in a transfusion. We are not sure yet if Hepatitis C can be spread through sexual activity, but it is considered unlikely. It certainly is not spread through the air or in food or drink.

People can have Hepatitis C and not know it! Sometimes there are no symptoms of this disease for 20 or 30 years. Unfortunately, the results of this disease can be quite serious. Hepatitis C can cause severe liver problems. If Jill finds out from her doctor that she really has Hepatitis C, she will need to take care to keep her liver healthy. Her doctor will tell her to avoid alcohol, Tylenol and any other drugs that could hurt her liver.

She needs to be careful that her blood does not put anyone else at risk. She should not share toothbrushes, fingernail clippers or razors with anyone. There is not yet a vaccine to prevent Hepatitis C. There is no medicine to *cure* hepatitis A, B or C. But there are medicines that can delay the liver damage these viruses cause. Jill needs to contact her doctor and follow his advice.

Unfortunately, neither the tests nor the medicines for Hepatitis C are available at the Health Department in Clay County.

Feel free to call us at (904) 529-2852 or 2848 or 2871 if you have any questions.

Is It Catching?

Volume 14 Issue 11

Clay County Health Department

MEASLES

Measles is a very serious viral disease that usually occurs in children, but can affect anyone not properly immunized.

What are the symptoms of measles?

At first, people with **measles** get a very high fever, a bad runny nose, red, matted eyes and a deep cough. After about three days of being very sick, they develop a bad rash, starting on their face or neck and finally covering their whole body.

Measles is very catching. It takes about 2 weeks to get sick after being around someone with **measles**.

How serious is measles?

Measles can be very serious, even fatal. Many people get pneumonia and ear infections, and have to go to the hospital.

How do you catch measles?

Measles is spread in the air by contact with nose or throat secretions, caused by sneezing and coughing. You can get **measles** by simply breathing the air in room where the sick person has been. The virus can live two hours after an infected person leaves the room. A person with **measles** is catching four days before they get a rash and four days after the rash begins.

How can you protect yourself and your family from measles?

1. **Measles** is completely preventable with vaccine. You need two doses of **measles** vaccine or "MMR". Children should get their first dose of measles vaccine (or MMR) at one year of age and the second one at 4 to 5 years.
2. Wash your hands (and make sure children wash theirs!) after sneezing, coughing or wiping or blowing your nose.

*Remember, if the patient doesn't have a rash all over, a fever higher than 101 degrees and the "three C's", he doesn't have **measles**!*

The "three C's" are:

1. Cough (a deep, chest cough)
2. Coryza (runny nose and cold symptoms)
3. Conjunctivitis (red, matted eyes.)

Feel free to call us if you have any questions.
(904) 529-2852 or 2848 or 2871.

isitcatchingmeasles.doc

What's New ?

Volume 2 Issue 1

Clay County Health Department

BACTERIAL MENINGITIS

What is **Bacterial meningitis**?



Bacterial meningitis is an infection of a person's spinal cord and the fluid that surrounds the brain. Bacterial meningitis can be quite severe. It can cause serious problems in infants, adults, and persons with impaired immune systems.

What are the symptoms of **Bacterial meningitis**?

High fever, headache and stiff neck are common symptoms of meningitis.

How is **Bacterial meningitis** diagnosed?

Early diagnosis and treatment are very important. The diagnosis is usually made from growing bacteria from a sample of spinal fluid. The spinal fluid is obtained by performing a spinal tap.

Can **Bacterial meningitis** be treated?

Bacterial meningitis can be treated with a number of effective antibiotics.

How do you get **Bacterial meningitis**?

Bacterial meningitis is spread through the exchange of respiratory and throat secretions, through kissing or sharing eating utensils or drinks. People in the same household or daycare as a person with **Bacterial meningitis**, or anyone with direct contact with a patient's oral secretions (such as a boyfriend or girlfriend) would be considered at risk for getting the infection. People who are close contacts of a person with **Bacterial meningitis** should receive antibiotics to prevent them from getting sick.

How can you protect yourself and your family from **Bacterial meningitis**?

Good health habits like washing your hands after you sneeze or cough or blow your nose will help protect other family members. Teach young children not to eat or drink after others, including family members. Never share toothbrushes or smoking equipment.

Any questions? (904) 529-2852, 2848, 2871

Is it Catching?

Infectious Mononucleosis

CLAY COUNTY HEALTH DEPARTMENT

“Kissing Disease”
“Epstein-Barr virus (EBV)”



What is **Infectious Mononucleosis**?

- **Infectious Mononucleosis** is a very common disease.
- Most people are infected with EBV sometime during their lives. In the U.S., 95% of adults 35–44 years old have been infected.

What are the symptoms of **Infectious Mononucleosis**?

- The symptoms of EBV are fever, sore throat, and swollen lymph nodes.
- Many children become infected with EBV, and these infections usually cause no symptoms.

How is **Infectious Mononucleosis** spread?

- Transmission of EBV requires intimate contact with saliva of an infected person.
- Transmission of this virus through the air or blood does not usually occur.

How is **Infectious Mononucleosis** prevented?

- People should avoid sharing saliva.
- No special precautions or isolation procedures are needed, since the virus is frequently found in the saliva of healthy people.
- There is no vaccine against **Infectious Mononucleosis**.
- There is no specific treatment for **Infectious Mononucleosis**, other than treating symptoms.

Feel free to call us if you have any questions.
(904) 529-2852 or 2848 or 2871.

Is it Catching?

MOSQUITO-BORNE

CLAY COUNTY HEALTH DEPARTMENT

What is the risk from mosquito bites? ?

- Certain kinds of mosquitoes can carry diseases such as West Nile Virus (WNV), St. Louis Encephalitis (SLE), Eastern Equine Encephalitis (EEE), Malaria and Dengue fever.



- These illnesses can be carried by certain mosquitoes and transmitted to humans by the mosquito when it bites.

People can protect themselves from these diseases by being careful to protect themselves from mosquito bites.

There are several things to remember to protect yourself and your family. These should include the "5 D's" for prevention:

- Dusk and Dawn (avoid being outdoors when mosquitoes are seeking blood, for many species this is during the dusk and dawn hours)
- Dress (wear clothing that covers skin)
- DEET (use mosquito repellents including DEET [N, N diethyl-*m*-toluamide] on skin and pyrethrins on clothing when you are outside)
- Drainage (check your home to rid it of standing water in which mosquitoes can lay their eggs)

Elimination of breeding sites is one of the keys to prevention.

Tips on Eliminating Mosquito Breeding Sites

Clean out eaves, troughs and gutters.

Remove old tires or drill holes in those used in playgrounds to drain.

Turn over or remove empty plastic pots.

Pick up all beverage containers and cups.

Check tarps on boats or other equipment that may collect water.

Pump out bilges on boats.

Replace water in birdbaths and pet or other animal feeding dishes at least once a week.

Change water in plant trays, including hanging plants, at least once a week.

Remove vegetation or obstructions in drainage ditches that prevent the flow of water.

Remember that these mosquito-borne illnesses are rare, but why take chances? Protect yourself from these diseases by preventing mosquito bites.

Feel free to call us if you have any questions.

(904) 529-2852 or 2848 or 2871.

isitcatchingmosquitoborne.doc

Is It Catching?

Volume 15 Issue 3

Clay County Health Department

MRSA



What is MRSA?

- **MRSA** is a form of a bacteria commonly carried on the skin or nose of 20 to 30% of healthy people. That common bacteria (or germ) is *Staphylococcus aureus*, often called “staph”. Staph is one of the most common causes of infection of the skin like pimples or boils. Staph germs can also cause serious infections such as wound infections and pneumonia. **MRSA** actually stands for Methicillin Resistant Staph Aureus. It means that the antibiotic methicillin does not kill this kind of germ.

Who gets MRSA infections?

- **MRSA** infection usually develops in hospitalized patients who are elderly or very sick or who have open wounds, (such as a bedsore) or a tube going into their body (such as a urinary catheter). In addition, certain factors can put some patients at higher risk for **MRSA**, including prolonged hospital stay, use of multiple antibiotics, and spending time close to other patients with **MRSA**.

How is MRSA spread?

- Staph germs and **MRSA** can spread among people having close contact with infected people. **MRSA** is almost always spread by direct physical contact, and not through the air. It can also be spread through indirect contact by touching items (such as sheets, wound dressings, towels) contaminated by the infected skin of a person with **MRSA** or staph.

How is MRSA prevented?

1. Keep your hands clean by washing thoroughly with soap and water.
2. Keep cuts and abrasions clean and covered with a proper dressing (bandage) until healed.
3. Avoid contact with other people's wounds or material contaminated from wounds.

- Remember:

The spread of MRSA can be prevented by careful hand washing.

Feel free to call us if you have any questions.
(904) 529-2852 or 2848 or 2871.

isitcatchingMRSA.MEV.doc

Is It Catching?

Volume 4 Issue 2

Clay County Health Department

MUMPS



What is **MUMPS**?

- **Mumps** is an infectious disease of humans caused by a virus. People get sick about 12 to 25 days after they have been exposed. It is not always easy to diagnose because some people have very mild symptoms.

What are the symptoms of **mumps**?

- The first symptoms of **mumps** are usually a fever and general feelings of fatigue. This progresses to tenderness and swelling in the glands that are behind and below the ear.

How is **mumps** spread?

- It is spread from person to person through respiratory droplets and by direct contact with the saliva of an infected person. It is most catching for a few days before the swelling and for 9 days after the swelling appears.

How is **mumps** diagnosed?

- A blood test is necessary to diagnose **mumps**. Sometimes it is necessary to do two blood tests, the second one drawn 10 days to 2 weeks after the first.

How is **mumps** treated?

- There is no specific treatment for mumps. It is caused by a virus and will not respond to antibiotics. Symptoms, though, can be treated. Ask your provider what can be done to make an infected person more comfortable.
- Remember: there is a vaccine against **mumps**.

Feel free to call us if you have any questions.
(904) 529-2852, or 2848 or 2871.

isitcatchingmumps.doc

Is it Catching?

Norwalk Virus ("Norovirus")

CLAY COUNTY HEALTH DEPARTMENT



What is **Norwalk virus**?

- Norwalk viruses are an important cause of diarrhea in the United States.

What are the symptoms of **Norwalk virus**?

- Symptoms of Norwalk virus infection include nausea, vomiting, diarrhea, and abdominal cramps. Headache and low-grade fever may also occur. People usually recover within 2-3 days without serious or long-term effects.

How is **Norwalk virus** spread?

- Hands contaminated with feces and not washed thoroughly and frequently are the most common cause of the spread of **Norwalk virus**
- People can reduce their chance of getting infected by frequent hand washing, prompt disinfection of contaminated surfaces with household bleach-based cleaners and prompt washing of soiled articles or clothing.

How is **Norwalk virus** prevented?

- Thorough hand washing can prevent the spread of **Norwalk virus**
- There is no vaccine against **Norwalk virus**.
- There is no antibiotic treatment for **Norwalk virus**.



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WHAT'S NEW?



Clay County Health Department

(904) 529-2852 or 2848 or 2871

PERTUSSIS (WHOOPIING COUGH)

What is **pertussis**? **Pertussis** is a bacterial disease of the throat and lungs that is characterized by long bouts of coughing that usually end with the person making a whooping sound. That is why it has been called “whooping cough.” The number of deaths in immunized populations is low. The vast majority of deaths occur in infants under 6 months of age, often in those who are too young to have completed primary vaccination.

How is **pertussis** transmitted? **Pertussis** is transmitted through direct contact with mucous discharges from the throat and lungs. It is very contagious with up to 90% of susceptible household members developing the disease after exposure. People with **pertussis** can infect others from several days before their cough starts until 3 weeks afterwards.

How is **pertussis** prevented? The best way to prevent **pertussis** is to have all children under the age of 7 vaccinated against the disease. The vaccine is part of the DTP or DtaP shot given to babies at 2 months, 4 months, 6 months, and 18 months and children 4-6 years of age.

Is there a vaccine for adults? Yes. There is an approved vaccine for adolescents and adults. This Tdap vaccine can be given instead of Td for adults. Also, if children are protected against **pertussis**, they cannot spread it.

Pertussis is diagnosed by a simple culture test. Your Doctor, using a Q tip, can take a sample of mucus taken from the back of the nose for testing. This sample is then sent to the laboratory to determine if the patient has **pertussis**.

What is the treatment for **pertussis**? There are antibiotics that treat **pertussis** and shorten the time the person is contagious to others. Antibiotics should also be given to all household members who have been exposed. These antibiotics can prevent them from getting sick.



If you have any questions, call 529-2852 or 2848 or 2871.

What's New in Epi?

Volume 3 Issue 7

Clay County Health Department

PINKEYE



Pinkeye, also called conjunctivitis, is usually caused by one of two problems:

Bacterial or viral infections

- Bacterial and viral infections usually produce a white or yellowish pus that may cause the eyelids to stick shut in the morning.

Allergic reactions to dust, pollen, and other materials.

- The discharge in allergic conjunctivitis is usually clear and watery.

Red and sore eyes may also be part of viral respiratory infections. All types of pinkeye cause redness and burning or itching of eyes.

The germs that cause pinkeye may be present in nasal secretions, as well as in the discharge from the eyes. People can be infected when their hands become contaminated with these materials and they rub their eyes.

Eyes can also become infected when a person uses contaminated towels or eye makeup.

If you or your child develops pinkeye:

- See a doctor. Eye injuries and foreign bodies in the eye can cause similar symptoms.
- Monitor other family members and daycare contacts for signs of developing pinkeye.
- Make sure children and adults use good hand washing practices and hygiene including proper use and disposal of paper tissues used for wiping noses.
- Eliminate any shared articles, such as towels. Use disposable paper towels.
- Disinfect any articles that may have been contaminated.
- Children with pinkeye should not attend daycare until they have been on antibiotic for at least 24 hours.



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What's New in Epi?



Volume 3 Issue 8

Clay County Health Department

PINWORMS

What is Pinworm Infection?

- This infection is caused by a small white worm that can live in the rectum of humans. Pinworms are about the length of a staple. While an infected person sleeps, female pinworms leave the intestines through the anus and deposit eggs on the surrounding skin.

What are the symptoms of pinworms?

- Itching around the anus, disturbed sleep, and irritability are common symptoms. If the infection is heavy, symptoms may also include loss of appetite, restlessness, and difficulty sleeping. Most symptoms of pinworm infection are mild; many people have no symptoms.

Who is at risk for pinworm infection?

- Pinworm is the most common worm infection in the United States. School-age children, followed by pre-schoolers, have the highest rates of infection.

How is pinworm infection spread?

- Pinworm eggs are infective within a few hours after being deposited on the skin. They can survive up to two weeks on clothing, bedding, or other objects. You and your children can become infected after accidentally swallowing pinworm eggs from contaminated surfaces or fingers.

How is pinworm infection treated?

- With either prescription or over-the-counter drugs. You should consult your health care provider before treating a suspected case of pinworms. Treatment involves a two-week course of medicine.

How can I prevent the spread of infection and reinfection?

- Bathe when you wake up to help reduce the egg contamination.
- Change and wash your underwear every day. Frequent changing of nightclothes is recommended.
- Change underwear, nightclothes, and sheets, after each treatment. Because the eggs are sensitive to sunlight, open blinds or curtains in bedrooms during the day.
- Personal hygiene should include washing hands after going to the toilet, before eating and after changing diapers.
- Trim fingernails short.
- Discourage nail biting and scratching bare anal areas. These practices increase the risk of continuous self-reinfection.

Children may return to day care after the first treatment dose, after bathing, and after trimming and scrubbing nails.

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What's New in Epi?



Volume 3 Issue 5

Clay County Health Department

SCABIES

What is Scabies? How do you get it?

Scabies is a very contagious skin condition that is caused by a mite, (called *Sarcoptes scabiei*), that can barely be seen by the human eye. The rash is extremely itchy (and often called "the itch" or "the seven-year itch") and can be difficult to diagnose. It may appear as a small white dot. It can affect both humans and animals. The scabies mite causes symptoms when it digs a little tunnel below the skin (referred to as a burrow) and causes a type of allergic reaction. Scabies can affect anyone regardless of age, gender, or personal hygiene. It does not select only those with low-income or poor housing conditions. Scabies is not the same as lice, although the treatment may be the same. Scabies is almost always contracted by close human contact. Although less common, you can get scabies from touching something that the mite is on. It is believed that the mite can survive no longer than 2 days when not in contact with a human.



What are the symptoms of scabies?

Sufferers may experience severe and continuous itching (especially at night). A good clue that scabies may be the cause is if several members of the same family or close contacts have the same symptoms.

- Your skin may show small insect-type bites on it, or the areas may look like pimples. It may also be red and crusty due to scratching of the area. A burrow (a short S-shaped track that indicates the mite's movement under the skin) may also be visible.
- Scabies frequently occurs in the cracklike areas of the body such as between the fingers or toes, the buttocks, the elbows, the waist area, the genital area, or under the breasts in women.

How do you treat Scabies?

Scabies can be treated. Several lotions are available to treat scabies. Always follow the directions on the package insert. Apply lotion to a clean body from the neck down to the toes and leave on overnight (8 hours). After 8 hours, take a bath or shower. Put on clean clothes. All clothes, bedding and towels should be washed in hot water and dried in a hot dryer. **For more severe cases, see your doctor. Your Doctor can prescribe prescription medications to help.** Follow your doctor's instructions for prescription anti-scabies agents, if prescribed for you.



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scabies.doc

Is it Catching???



What's going on? Birds dropping out of the sky in New York? People getting sick with a virus from the Nile?

Let's talk about diseases carried by mosquitoes.

This is not a new concept. We've known for years that Malaria is carried by mosquitoes. Anti-malarial drugs and mosquito control has reduced the risk in the U.S., but malaria is still a problem in other parts of the world.

The mosquito-borne disease in the news lately is called West Nile encephalitis. "Encephalitis" means inflammation of the brain. There are several kinds of encephalitis. This one is thought to be caused by a virus similar to one found in the West Nile region of Africa. It is carried by birds and spread to humans by a mosquito. Some of the other kinds of encephalitis spread by mosquitoes are St. Louis encephalitis, Eastern Equine encephalitis and Lacrosse encephalitis.

Not all mosquitoes carry disease. Specific mosquitoes carry specific kinds of diseases. The chance of being bitten by a mosquito carrying encephalitis is very slim.

Most of the encephalitis spread by mosquitoes causes a fever, headache and body aches in 5 to 15 days. Some people get very sick and others don't get any symptoms at all. A few people, usually older people, can die from these illnesses. There are only a few cases of mosquito-borne encephalitis in Florida each year, but most of them could be prevented. What? Prevent mosquito bites?? Yes! Here are some easy tips:

1. If mosquitoes are bad, don't go outside in the early morning or late evening, when they are at their worst!
 2. If you have to go out, wear long sleeves and long pants or use mosquito repellent. DEET is good, but avoid it for kids, use pediatric repellent on them.
 3. Mosquitoes breed in just a little water left standing in flower pots or trash, so empty or remove any potential mosquito homes in your yard.
 4. And protect *your* home by making sure your screens are intact. Make sure screen doors close quickly and tightly.
- *If you or your family do get bites, whether from mosquitoes or ants or yellow-jackets, limit scratching by using over the counter anti itch creams and/or consult your physician or pharmacist.*

Let's have a safe summer, don't let the critters get you down!

Questions? Call: 904-529-2852, or 2848 or 2871 Fax: (904) 529-1043