

Disease & incubation period	Symptoms	Period when infectious	Period of exclusion of infected person	Period of exclusion of contacts
<p>Chickenpox</p> <p>11-20 days</p>	<p>A slight fever & generally feeling unwell before a rash appears. The rash starts as red spots which become raised and filled with fluid then scab over after 3-4 days. There may be spots in the mouth and eyes as well as on the skin.</p>	<p>1-2 days before and 5 days after the rash develops.</p>	<p>5 days from the onset of the rash.</p> <p>It is the BHFT nursery policy that until the spots have scabbed over children will not be permitted to return to the nursery.</p>	<p>None however, if the contact is with a pregnant woman in the first 20 weeks or last 3 weeks of pregnancy she needs to seek advice from her GP.</p>
<p>Conjunctivitis</p> <p>12 hours-3 days</p>	<p>Often begins as pain or itchiness in one or both eyes together with excessive watering of the eyes, swelling of the lids and redness of the 'white' of the eye. There may be a yellowish discharge and the affected person may find it painful to look at bright lights.</p> <p>The symptoms normally resolve on their own, within a few days and without treatment. See GP immediately if the child has:</p> <ul style="list-style-type: none"> • eye pain • sensitivity to light (photophobia) 	<p>During active infection</p>	<p>There is no need to exclude children with symptoms of conjunctivitis and children should not normally require treatment with antibiotics before returning to nursery.</p> <p>Parents and staff should allow child's symptoms to resolve before seeking antibiotics from the GP</p>	<p>None.</p>

	<ul style="list-style-type: none"> • disturbed vision • intense redness in one eye or both eyes • a newborn baby with conjunctivitis 		<p>or Chemist.</p> <p>If the condition has not resolved after a week or is worsening parents should seek treatment.</p>	
Respiratory infections including coronavirus (COVID-19)	<p>Symptoms of COVID-19 can include:</p> <ul style="list-style-type: none"> • a high temperature or shivering (chills) – a high temperature means you feel hot to touch on your chest or back (you do not need to measure your temperature) • a new, continuous cough – this means coughing a lot for more than an hour, or 3 or more coughing episodes in 24 hours • a loss or change to your sense of smell or taste • shortness of breath • feeling tired or exhausted • an aching body • a headache • a sore throat • a blocked or runny nose • loss of appetite • diarrhoea • feeling sick or being sick 	TBC	<p>Children should not attend if they have a high temperature and are unwell.</p> <p>Children who have a positive test result for COVID-19 should not attend the setting for 3 days after the day of the test.</p> <p>Children with mild symptoms such as runny nose, and headache who are otherwise well can continue to attend nursery</p>	None
Diarrhoea and vomiting (with or without a specified diagnosis) 48 hours from last episode	<p>Prior to the actual diarrhoea and vomiting abdominal cramps/pain, nausea and general discomfort may be experienced. The child may have no desire to eat, be lethargic and disinterested.</p>	When having symptoms of diarrhoea and/or vomiting.	<p>Diarrhoea – 48 hours after last episode.</p> <p>Vomiting - 48 hours after last episode and when able to keep down food.</p>	None however, if the contact is with a pregnant woman she needs to seek advice from her GP.

<p><i>E Coli</i> 0157 VTEC</p> <p>Typhoid (and paratyphoid) 7-14 days NOTIFIABLE</p> <p>Shigella (dysentery)</p>	<p>Mild to severe bloody diarrhoea usually without fever.</p> <p>Sustained fever (39-40°C), headache, stomach pains loss of appetite and nausea. In some cases, patients have a rash of flat, rose-coloured spots.</p> <p>The illness is characterised by diarrhoea, sometimes with blood and mucus.</p>	TBC by HPU	<p>Diarrhoea – 48 hours after last episode.</p> <p>Further exclusion may be required for some children until they are no longer excreting.</p>	<p>Further exclusion may be required for young children under 5 and those who have difficulty in adhering to hygiene practices.</p>
<p>Diphtheria</p> <p>1-9 days NOTIFIABLE</p>	<p>The symptoms of diphtheria can come on suddenly. A child may become seriously ill within a day of developing the first signs of diphtheria.</p> <p>Symptoms include a sore throat, mild fever rapid pulse, headache, finding it hard to swallow and swollen neck glands.</p>	<p>The risk of catching</p> <p>Infected children will be admitted to hospital.</p>	<p>Advice will be sought from the HPU with regards to the length of exclusion.</p>	<p>If you have come into close contact with an infected person visit your GP immediately.</p>
<p>Slapped Cheek or Fifth Disease (Parvovirus)</p> <p>Variable, 4-20 days</p>	<p>The first symptom is fever which lasts 2-3 days until the rash appears. Children are often quite well apart from a red rash on the cheeks looking as though they have been slapped. This is followed by a lace like rash on the body and limbs.</p>	Before onset of rash.	None	<p>Can occasionally affect an unborn child if exposure is before 20 weeks. Inform person providing antenatal care.</p>

Glandular Fever From 4-6 weeks	The most common symptoms are tiredness, sore throat, fever and swollen glands in the neck. Tonsillitis is also possible and some people may develop mild jaundice. Many people, especially children have the illness without noticing any symptoms at all.	While the virus is present in the saliva.	Until the person feels well.	None.
Head lice Eggs hatch between 7-10 days	Itchy scalp.	As long as eggs or lice remain alive.	None, treatment should start as soon as the condition has been confirmed.	None.
Hand, Foot & Mouth 3-5 days	The illness usually starts suddenly with a sore throat, temperature and blisters which develop in the inside of the mouth and throat. Blisters may also appear on the palms, fingers and soles of the feet.	During the acute stage of the illness.	None however children should be kept at home until they feel well.	None.
Hepatitis A 2-6 weeks NOTIFIABLE	The illness usually begins with a sudden onset of fever, feeling unwell, loss of appetite, nausea & stomach pain which is followed within a few days by jaundice. Young children may have mild infections without jaundice.	2 weeks before first symptoms until 1 week after onset of jaundice (most infectious before the jaundice starts).	Until the person feels well. Children under 5 and those with poor hygiene control should be excluded for 7 days from onset of jaundice or stools going pale.	None – household contacts should seek advice from their GP.

<p>Impetigo</p> <p>4-10 days</p>	<p>Commonly affects the face, particularly around the nose and mouth or the nappy area in babies. It starts with redness which develops into weeping spots and then yellowish crusts. Young children are more likely to get impetigo and they may become quite miserable, irritable and feverish and have difficulty in feeding.</p>	<p>As long as the septic spots are discharging pus.</p>	<p>Until 48 hours after commencing antibiotic treatment.</p>	<p>None.</p>
<p>Meningitis & Meningococcal Septicaemia</p> <p>2-10 days depending on cause</p> <p>NOTIFIABLE</p>	<p>Not always easy to recognise as the symptoms are similar to those for many other common illnesses.</p> <p>In babies & toddlers – high temperature, fever possibly with cold hands and feet, vomiting or refusing feeds, fretful, floppy, dislike of being handled, pale blotchy skin, blank staring, drowsy, stiff neck, high pitched moaning, lethargic/difficult to wake, the fontanelle may be tense or bulging, rash that doesn't fade under pressure.</p> <p>In children and adults – high temperature, fever possibly with cold hands and feet, vomiting, sometimes diarrhoea, severe headache, neck stiffness (unable to touch the chin to the chest),</p>	<p>Clinical cases are rarely infectious.</p>	<p>Until person feels well.</p> <p>For Meningococcal Septicaemia Consultant in Communicable Disease Control will give advice on any action needed.</p>	<p>None – household contacts may be given antibiotic treatment.</p>

	joint or muscle pains, sometimes stomach cramps with septicaemia, dislike of bright lights, drowsiness, fits, the person may be confused or disorientated, a rash that doesn't fade under pressure.			
Measles 7-14 days NOTIFIABLE	Usually begins with one or more of the following symptoms: a fever, runny eyes/nose, a cough and characteristic Koplik spots in the mouth – this is the most infectious stage. The red, blotchy rash appears between 3-7 days later spreading from the face to the rest of the body and lasting for up to a week. Babies under a year and adults often have a more severe form of measles than children.	1 day before first symptoms until 4 days after onset of rash.	Until 4 days from onset of rash and the person feels well.	None.
Mumps 2-3 weeks, average 18 days NOTIFIABLE	Individuals with mumps will have a fever, swelling of one or more of the salivary glands in the neck and possibly in the mouth or throat.	Mumps is infectious from 7 days before symptoms appear to 2-4 weeks afterwards. Maximum infectiousness occurs between 2 days before to 4 days after onset of illness.	5 days from onset of swollen glands and when person feels well.	None.

Threadworms 2-6 weeks for life cycle to complete	Itching around the anus at night causing disturbed sleep. There may be no symptoms at all but sometimes worms can be seen in the stools or on toilet paper.	As long as eggs are shed in the stools.	None, but child should be treated.	None - household contacts should be treated at the same time.
Rubella (German Measles) 2-3 weeks NOTIFIABLE	The symptoms include fever, headache, sore throat, swollen glands and sometimes conjunctivitis, 2-3 days before the rash appears. Children often have very mild illness or no symptoms at all. Adults, especially women may have painful joints too.	Most infectious before the rash appears. 1 week before until 4 days after the rash appears.	6 days from onset of rash.	None however, if contact is with a pregnant woman she needs to seek advice from her GP.
Ringworm 4-10 days (body) 10-14 (scalp)	A contagious fungal infection which often appears in a round, ring shaped patch. It is red or silvery with scales and is itchy. There may be several patches and they may blister and ooze pus.	If left untreated it may pass to other people but if prescribed medication is used spread to others is extremely unlikely.	Until treatment has commenced.	None, do not share towels, clothing or bedding with anyone who has ringworm.
Scabies Several days-6 weeks	An allergic type rash anywhere on the body but often on the fingers, wrists, around the waist and on the buttocks. Itching particularly at night or after hot baths.	Until after the first treatment.	Child can return after the first treatment.	None. All close family and 'skin to skin' contacts must be treated at the same time to prevent re-infection.

<p>Scarlet Fever</p> <p>2-5 days</p> <p>NOTIFIABLE</p>	<p>Often starts with a sore throat or skin infection. The characteristic symptom is a fine pinkish-red rash on the body that feels like sandpaper. Cheeks become flushed.</p> <p>Other symptoms include headache, swollen neck glands, loss of appetite, nausea/vomiting, abdominal pain white coating on the tongue and a general feeling of being unwell.</p>	<p>Following treatment with an antibiotic scarlet fever quickly becomes non infectious.</p>	<p>24 hours after commencing antibiotics.</p>	<p>None.</p>
<p>Tuberculosis</p> <p>6 weeks</p> <p>NOTIFIABLE</p>	<p>Symptoms of pulmonary TB include fever, fatigue, loss of appetite and weight, night sweats and persistent cough.</p>	<p>TB of the lung is not infectious two weeks after an infected person has started full treatment.</p> <p>The other types of TB are not infectious.</p>	<p>We will always consult with the Health Protection Unit.</p>	<p>None.</p> <p>People who have been in close contact (usually a household contact) with a person who has been diagnosed with TB of the lung will have to attend a chest clinic.</p>

<p>Whooping Cough (Pertussis)</p> <p>5-21 days</p> <p>NOTIFIABLE</p>	<p>The initial illness starts with a cough, cold and fever. Over the next week the cough gradually becomes paroxysmal (whoop). There are bouts of coughing which are terminated by the typical whoop or by vomiting. The cough often lasts for 2-3 months. Young infants do not usually whoop and coughing spasms may be followed by periods of not breathing.</p>	<p>2 weeks. If treated with antibiotics, this may be reduced.</p>	<p>Until 5 days after commencing antibiotic treatment. Otherwise, 21 days.</p>	<p>None. – household contacts may be given antibiotic treatment</p>
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