

**STATE OF NEW HAMPSHIRE
SCHOOL NURSE TOOLKIT
FOR
ACUTE RESPIRATORY ILLNESS**

July 2019

*New Hampshire Department of Health and Human Services
Division of Public Health Services*

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INTRODUCTION

Purpose

This document outlines the State of New Hampshire (NH) Department of Health and Human Services (DHHS), Bureau of Infectious Disease Control's (BIDC) guidance on controlling, mitigating, and reporting outbreaks of acute respiratory illness in elementary and secondary school settings. This document also includes tools which a school nurse or an administrative staff member may use to communicate recommendations and best practices to students, staff, and families.

Authors

This document was developed in collaboration with NH Bureau of Infectious Disease Control:
NH Infectious Disease Surveillance Section
NH Infectious Disease Prevention, Investigation and Care Services Section

Scope

School-aged children are one of the populations at the highest risk for developing acute upper respiratory infections. Their immune systems are still developing so physical contact and exposure to other children makes the spread of these infections rapid and prevalent. Children spend the majority of their days in school, so enacting proper prevention and treatment measures can decrease the spread and severity of upper respiratory infections (URI).

Although there are several types of URI, the common cold and influenza (flu) are the most predominant URIs children experience, leading to more school absences and primary care provider visits than any other illness. These viral infections are spread by direct or indirect contact with droplets from an infected person that sneezes, coughs, or talks. Those who become infected are contagious one day before symptoms may even appear, and up to seven days after. Flu-like symptoms include fever, cough, sore throat, nasal congestion, muscle aches, headache, fatigue, vomiting, and diarrhea.

Contact Information

For questions about this document, please contact:

Bureau of Infectious Disease Control
Division of Public Health Services
NH Department of Health and Human Services
29 Hazen Drive, Concord, NH 03301-6504
Phone: (603) 271-4496
Website: <https://www.dhhs.nh.gov/dphs/cdcs/forms.htm>

DISEASE BACKGROUND

Case Definition

In the event of increased respiratory illness, case definition inclusion might consist of any or all of the following symptoms: myalgia (aches), headache, chills, fatigue, sore throat, sneezing, dry or productive cough, rhinorrhea (runny nose), and nausea accompanied by vomiting and diarrhea. Influenza-like-illness, in particular, may present with fever (temperature above 101°F (38.3°C) orally, above 102°F (38.9°C) rectally, or 100°F (37.8°C) or higher taken axillary).

Outbreak Report

By New Hampshire State Statute [RSA 141-C](#), many communicable respiratory diseases and related positive laboratory results are reportable. Additionally, state statute requires that any suspect outbreak, cluster of illness, or any unusual occurrence of disease that may pose a threat to the public's health must be reported to the NH Department of Health and Human Services, Bureau of Infectious Disease Control (BIDC) within 24 hours of recognition (Appendix B).

NH EPIDEMIOLOGY

Estimating the number of upper and lower respiratory tract infections in New Hampshire is difficult, as the vast majority of these infections is not etiologically defined and is not reportable. Therefore, the annual number of cases cannot be calculated for many viral and bacterial respiratory infections.

The [Reportable Communicable Diseases in New Hampshire](#) includes the following information on reportable respiratory illnesses during the last five years.

Disease	2012	2013	2014	2015	2016	2017	2018
<i>Haemophilus influenzae</i> , invasive disease	13	24	24	23	23	26	26
<i>Streptococcus pneumoniae</i> , invasive disease	82	101	96	101	96	106	119
Legionellosis	22	27	12	32	29	63	76
Pertussis	267	131	84	41	60	75	143
Tuberculosis disease	9	15	11	13	15	19	12

OUTBREAK INVESTIGATION AND REPORTING

In reporting ARI, it is essential to designate a school contact person (e.g., school nurse, principal or administrative staff) who is responsible for disseminating absenteeism information. Reports may be made by phone to BDC at 603-271-4496. After normal business hours or weekends, please make the phone report by calling the NH Hospital switchboard (603-271-5300) and request the Public Health Professional on-call to be paged. The Public Health Professional on call will then call you back to collect the report.

The BDC Public Health Professional will work closely with the school contact person to control the outbreak. Usually this involves the Public Health Professional talking with the school to establish methods to identify and count cases, clarify and update specific case definitions and exclusion periods and coordinating the exchange of information between the school and BDC.

Absenteeism surveillance is the systematic collection and analysis of student absence data. These data should differentiate between absenteeism rates due to illness or from other causes. Data describing student absences due to illness may be used to monitor disease trends and to detect and respond to clusters and outbreaks. Implementing an effective absenteeism surveillance system is key to monitoring acute respiratory illness in the student population and will help in instituting prevention measures.

An abnormally large absenteeism level may help identify a respiratory illness outbreak. This level is often identified by the school health office surveillance system. School nurses should record the following information on the initial outbreak investigation form:

- Total number of students at the school
- Number of ill students
- Number of students with current ARI outbreak symptoms
- Total number of staff at the school
- Number of ill staff (if known)
- Number of ill staff with current ARI outbreak symptoms (if known)
- Date of disease onset for first recognized case
- Presenting disease symptoms
- Hospitalization and/or death among cases

ONLINE ABSENTEE AND INFLUENZA-LIKE ILLNESS SURVEILLANCE TRACKING

Influenza-Like Illness (ILI) Reporting System for New Hampshire Schools is available to schools for the reporting influenza-like illness (ILI) in the school setting. The ILI Reporting System for NH Schools will assist the nurse or administrative staff in tracking the rates of absences and at the end of the year this data could be supplied back to the school for their own seasonal surveillance.

To use absenteeism surveillance data: please utilize this website link to report absentee surveillance data to the state <https://business.nh.gov/Influenza/InfluenzaReporting.aspx>

an official **NEW HAMPSHIRE** *government website*

dhhs New Hampshire Department of
HEALTH AND HUMAN SERVICES

**New Hampshire Department of Health and Human Services
Influenza-like Illness Reporting System for New Hampshire Schools**

2018-2019 School Year

Instructions: This is a voluntary reporting Program. If you volunteer to provide this data, please ensure that reporting from your school is consistent so that the data reported will be useful in evaluating trends of influenza-like illness in the community over time

Participating schools agree to log into the system at the end of each school day and provide the requested daily counts. We understand that not all schools will have access to all of the requested information. If information is not available for one of the requested counts, please check "Not Available."

ILI=Influenza-like illness defined as fever AND cough or sore throat. Fever can be a documented temperature of ≥ 100 °F or report from the student/staff/parent of fever-like symptoms (chills, feeling feverish/hot/etc.)

1. Report Date (mm/dd/yyyy)

2. Select School

3. Total Number Absent - Students Number of student absentees not available

4. Total Number Absent with ILI - Students Number of student absentees with ILI not available

New Hampshire Department of Health and Human Services
129 Pleasant Street | Concord, NH | 03301-3852
Telephone: (603) 271-5165

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There is also an example of the letter that explains absenteeism surveillance as Appendix A.

PREVENTION AND RESPONSE

Guidance on Acute Respiratory Illness for Elementary and Secondary Schools

NH Department of Health and Human Services (NH DHHS) Objective:

- Protect yourself, family, friends, and the community from acute respiratory illness (ARI).

Recommendations for students and staff:

- Maintain general health and hygiene activities in your school. Instruct and remind students and staff to carefully wash hands using soap (and or use alcohol based hand sanitizer if not visibly soiled). Encourage the importance of coughing and sneezing into the elbow. In addition, remind everyone not to share drinks or utensils with one another
- Any ill children or staff should stay home until they no longer have a fever without the use of anti-fever medications
- Education regarding proper hand washing techniques should be conducted twice every school year
- School officials should ensure that soap, paper towels, and hand sanitizers be readily available and well stocked. Frequently touched surfaces should be cleaned regularly
- Any student presenting respiratory symptoms (e.g., fever/chills, coughing, sore throat, runny or stuffy nose), general malaise, headaches, muscle aches, vomiting, or diarrhea should contact a health care provider
- Infected individuals should avoid public places and only leave home in case of emergency or to seek medical attention (e.g., pharmacy, clinical visit)
- If an infected individual or caretaker must leave their home, protective measures should be implemented (e.g., face mask, tissues, or handkerchief) to cover all coughs and sneezes
- Students and staff recovering from respiratory illness should be symptom-free for at least 24 hours prior to returning to school. It is recommended that individuals see a health care provider before returning.
- School nurses should report higher than normal absenteeism to NH DHHS Bureau of Infectious Disease Control at 603-271-4496, or utilize the reporting website (additional information on page 3).
- Please use attached parent letter template as an informational tool (Appendix C and D).

Recommendations to decrease respiratory illness in schools include:

- Maintain general health and hygiene activities in your school. Remind all students and staff of the importance of covering their nose and mouth with a tissue when coughing or sneezing (or coughing or sneezing into their sleeve if tissues aren't available). Frequent hand washing with soap and water, or using alcohol-based hand sanitizers, should be promoted in your school.
- Display posters in the school to promote hand hygiene. Hand washing posters can be downloaded from the CDC website at: <https://www.cdc.gov/handwashing/posters.html>
- Identify ways to increase social distances (the space between people). If possible, move desks further apart, rotate teachers between classrooms while keeping the same group of students in one classroom, and postpone class trips.
- Maintain good ventilation in shared school areas (e.g., open windows, keep air duct systems clean, etc.).
- Ensure that school staff takes steps to routinely clean and disinfect surfaces in the classroom (e.g., doorknobs, desks, keyboards). Schools can use standard products according to directions on the product label and per school protocol. Additional information can be found at: <https://www.cdc.gov/flu/school/cleaning.htm>
- Provide education about symptoms, mode of transmission, and prevention to parents, students, and staff.
- Remind those attending school and family members to assess, each morning, all people around them and especially all school-aged children for symptoms of respiratory illness.
- Encourage all students, staff, and faculty with respiratory illness to stay home and not attend school.
- If staff notes a student with visible signs of respiratory illness upon arrival at school the following should occur:
 - Isolate the child from other children.
 - Have the child wear a surgical mask if tolerated.
 - Limit the number of people who come into contact with the child.
 - Adults in contact with an ill child should use a surgical mask and continue to wash hands frequently.
 - Contact a parent or guardian and request the child be picked up as soon as possible.
 - Inform the parents or guardian about symptoms observed in the child and what is required for the child to return to school (see case definition section).
 - Ask the parent or guardian to relay observations made by school staff to the child's primary health care professional.

Appendix A: Surveillance and Online Tracking Letter

Date Address

Block

Dear School Nurse:

School administrative staff and nurses are valuable members of any school system and are often the first to note unusual levels of absenteeism. High levels of absenteeism may indicate the presence of a larger health event in the community for which the New Hampshire Bureau of Infectious Disease Control (BIDC) can offer assistance in mitigating. When health events are identified early, students and staff can be connected to resources, such as fact sheets and recommendations for cleaning, in order to help students and staff return to a normal routine as quickly as possible.

School staff and nurses also play a critical role in managing connections between schools and healthcare providers or other agencies, as well as collecting and monitoring school health data, which may help inform efforts for preventing disease outbreaks.

To inform public health activities and response in New Hampshire, all public and private schools are asked to voluntarily report daily aggregate counts for student absenteeism and those absent with influenza like illness (ILI). If absenteeism due to ILI is not collected, schools can simply enter "0" or check the box indicating these data are not available.

The tool for reporting your school's absenteeism data can be found at the following website:
<https://business.nh.gov/Influenza/InfluenzaReporting.aspx>.

No username or password is required and total time spent entering these data each day should be less than one minute. Your efforts will help identify health issues in the community, open a path to resources at BIDC should your school or community need assistance, and continue to strengthen the partnership between the Department of Education and the Department of Health and Human Services.

If you have any questions or concerns, please contact Kenneth Dufault at 603-271-5165 or Kenneth.Dufault@dhhs.nh.gov.

Thank you for your continued support of public health.

Kenneth Dufault
Emergency Preparedness Surveillance
Specialist
Bureau of Infectious Disease Control

Appendix B: NH Reportable Disease List

State of New Hampshire Reportable Infectious Diseases



Acute Flaccid Myelitis
 Acquired Immune Deficiency Syndrome (AIDS)
 Anaplasmosis [*Anaplasma Phagocytophilum*]
 Anthrax [*Bacillus anthracis*]*
 Arboviral infection, including EEE, WNV, Dengue, Powassan, Zika*
 Babesiosis [*Babesia microti*]
 Botulism [*Clostridium botulinum*]*
 Brucellosis [*Brucella abortus*]*
 Campylobacteriosis [*Campylobacter* species]
 Carbapenem-resistant enterobacteriaceae
 Chlamydial infection [*Chlamydia trachomatis*]
 Cholera [*Vibrio cholerae*]*
 Coccidioidomycosis [*Coccidioides immitis*]
 Creutzfeldt-Jakob Disease*
 Cryptosporidiosis [*Cryptosporidium parvum*]
 Cyclospora infection [*Cyclospora cayentanensis*]
 Diphtheria [*Corynebacterium diphtheriae*]*
 Ehrlichiosis [*Ehrlichia* species]
 Escherichia coli O157 infection and other shiga toxin producing *E. coli*
 Giardiasis [*Giardia lamblia*]
 Gonorrhea [*Neisseria gonorrhoeae*]
 Haemophilus influenzae, invasive disease, sterile site*
 Hantavirus Pulmonary Syndrome [Hantavirus]*
 Hemolytic Uremic Syndrome (HUS)
 Hepatitis, viral: A*, E,
 Hepatitis, viral: positive B surface antigen in a pregnant woman
 Hepatitis, viral: B, C (new diagnoses from providers only, no lab reporting)
 Human Immunodeficiency Virus (HIV), including perinatal exposure
 Human Immunodeficiency Virus-related CD4+ counts and all viral loads
 Legionellosis [*Legionella pneumophila*]
 Leprosy, Hansen's disease [*Mycobacterium leprae*]
 Leptospirosis [*Leptospira* species]
 Listeriosis [*Listeria monocytogenes*]
 Lyme disease [*Borrelia burgdorferi*]
 Malaria [*Plasmodium* species]
 Measles [Rubeola]*
 Mumps*
 Neisseria meningitidis, invasive disease, sterile site*
 Pertussis [*Bordetella pertussis*]*
 Plague [*Yersinia pestis*]*
 Pneumococcal disease, invasive [*Streptococcus pneumoniae*]
 Pneumocystis pneumonia [*Pneumocystis jiroveci* formerly *carinii*]
 Poliomyelitis [Polio]*
 Psittacosis [*Chlamydia psittaci*]*
 Rabies in humans or animals*
 Rocky Mountain Spotted Fever [*Rickettsia rickettsii*]
 Rubella, including Congenital Rubella Syndrome*
 Salmonellosis [*Salmonella* species] (report *S. Typhi** within 24 hours)
 Shigellosis [*Shigella* species]
 Syphilis, including Congenital Syphilis Syndrome [*Treponema pallidum*]
 Tetanus [*Clostridium tetani*]
 Toxic-Shock Syndrome (TSS) [streptococcal or staphylococcal]
 Trichinosis [*Trichinella spiralis*]
 Tuberculosis disease [*Mycobacterium tuberculosis*]*
 Tuberculosis infection, latent (lab reporting only, no provider reporting)
 Tularemia [*Francisella tularensis*]*
 Typhoid fever [*Salmonella Typhi*]*
 Typhus [*Rickettsia prowazekii*]*
 Varicella
 Vibriosis [any *Vibrio* species]*
 Vancomycin Resistant *Staphylococcus aureus* (VRSA)*
 Yersiniosis [*Yersinia enterocolitica*]
 Any suspect outbreak, cluster of illness, unusual occurrence of communicable disease, or other incident that may pose a threat to the public's health must be reported within 24 hours of recognition.*
 Any investigation of suspected or actual incident of diversion of injectable medications in a health care setting must be reported within 72 hours of initiation of such investigation.*

Disease Reporting Guidelines

- Diseases with an asterisk (*) and in red must be reported within 24 hours of diagnosis or suspicion of diagnosis.
- All suspect and confirmed cases must be reported within 72 hours of diagnosis or suspicion of diagnosis.
- Reports are handled under strict confidentiality standards.

Disease Reports Must Include

1. Name of the disease
2. Name of the person reporting
3. Patient information: name, date of birth, age, sex, race, ethnicity, address, telephone number, occupation, place of employment, date of illness onset
4. Diagnostic test information: type of test performed, specimen type(s), date, results
5. Treatment: date, medication, dosage

How to Report a Disease

New Hampshire Department of Health and Human Services, Division of Public Health Services, Bureau of Infectious Disease Control

Business Hours: 603-271-4496

Toll Free (in NH only): 1-800-852-3345 x 4496

After Hours: 603-271-5300

Toll Free (in NH only): 1-800-852-3345 x 5300

Fax: 603-271-0545

Do not fax HIV/AIDS Reports

Electronically: Call during Business Hours to request an account in the NH Electronic Disease Surveillance System (NHEDSS)

Reporting requirements are in accordance with Administrative Rules He-P 301 adopted Fall 2016

www.dhhs.nh.gov/dphs/cdcs

Appendix C: Sample Letter to Parents

Dear Parent:

Flu season is approaching. We are asking for your help to prevent the spread of flu in our school. The flu spreads from person to person and children in schools are among the most affected. We want to keep the school open during the flu season and we cannot do it without you. Here are a few ways to help:

- Know the signs of the flu: Signs may be fever greater than 100 degrees, cough, sore throat, body aches, headache, and feeling very tired. Some people may also vomit or have diarrhea.
- Keep sick children at home. Children should stay at home for at least 24 hours after the last signs of a fever without the use of medicine. They should not return to school within 24 hours of the last sign of vomiting or diarrhea. Those who have a constant cough should stay home until medicine relieves it. Any child that is sick at school should go home.
- Report their absence to the nurse. If your child is out sick with the flu or flu-like illness, please let the nurse know.
- Teach your children to wash their hands. Hand washing with soap and water or using hand sanitizer is the best way to reduce the spread of germs.
- Teach your children to cover their coughs and sneezes with a tissue or their elbow.
- Teach your child not to share personal items like their food or water bottles.

Our school works closely with the Bureau of Infectious Disease Control (BIDC) to monitor flu events. For more information, visit www.flu.gov, or call 1-800-CDC-INFO for the most current information about the flu. We will notify you of any changes to our school's plan to prevent the spread of the flu this season.

Sincerely,

[School administrator's name and signature]

Posters and Handouts

STAY HEALTHY!

Follow these simple tips, every day



COVER your mouth when you cough or sneeze—use your sleeve

ONLY use your own glass and utensils—don't share

USE soap and warm water to wash hands often

GET plenty of sleep, exercise, and eat a healthy diet

HOME is where you belong when you're sick, not at work or school



New Hampshire Department of Health and Human Services
129 Pleasant St., Concord, NH 03301



[Stay Healthy-Cover Your Cough](#)

School Guide

How to Clean and Disinfect Schools to Help Slow the Spread of Flu

Cleaning and disinfecting are part of a broad approach to preventing infectious diseases in schools. To help slow the spread of influenza (flu), the first line of defense is getting vaccinated. Other measures include covering coughs and sneezes, washing hands, and keeping sick people away from others. Below are tips on how to slow the spread of flu specifically through cleaning and disinfecting.

1. Know the difference between cleaning, disinfecting, and sanitizing.

Cleaning removes germs, dirt, and impurities from surfaces or objects. Cleaning works by using soap (or detergent) and water to physically remove germs from surfaces. This process does not necessarily kill germs, but by removing them, it lowers their numbers and the risk of spreading infection.

Disinfecting kills germs on surfaces or objects. Disinfecting works by using chemicals to kill germs on surfaces or objects. This process does not necessarily clean dirty surfaces or remove germs, but by killing germs on a surface after cleaning, it can further lower the risk of spreading infection.

Sanitizing lowers the number of germs on surfaces or objects to a safe level, as judged by public health standards or requirements. This process works by either cleaning or disinfecting surfaces or objects to lower the risk of spreading infection.

2. Clean and disinfect surfaces and objects that are touched often.

Follow your school's standard procedures for routine cleaning and disinfecting. Typically this means daily sanitizing surfaces and objects that are touched often, such as desks, countertops, doorknobs, computer keyboards, hands-on learning items, faucet handles, phones, and toys. Some schools may also require daily disinfecting these items. Standard procedures often call for disinfecting specific areas of the school, like bathrooms.

Immediately clean surfaces and objects that are visibly soiled. If surfaces or objects are soiled with body fluids or blood, use gloves and other standard precautions to avoid coming into contact with the fluid. Remove the spill, and then clean and disinfect the surface.

3. Simply do routine cleaning and disinfecting.

It's important to match your cleaning and disinfecting activities to the types of germs you want to remove or kill. Most studies have shown that the flu virus can live and potentially infect a person for only 2 to 8 hours after being deposited on a surface. Therefore, it is not necessary to close schools to clean or disinfect every surface in the building to slow the spread of flu. Also, if students and staff are dismissed because the school cannot function normally (e.g., high absenteeism during a flu outbreak), it is not necessary to do extra cleaning and disinfecting.

Flu viruses are relatively fragile, so standard cleaning and disinfecting practices are sufficient to remove or kill them. Special cleaning and disinfecting processes, including wiping down walls and ceilings, simultaneously using room air decontaminators, and fumigating, are not necessary or recommended. These processes can irritate eyes, nose, throat, and skin; aggravate asthma; and cause other serious side effects.



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4. Clean and disinfect correctly.

Always follow label directions on cleaning products and disinfectants. Wash surfaces with a general household cleaner to remove germs. Rinse with water, and follow with an EPA-registered disinfectant to kill germs. Read the label to make sure it states that EPA has approved the product for effectiveness against influenza A virus.

If an EPA-registered disinfectant is not available, use a fresh chlorine bleach solution. To make and use the solution:

- Add 1 tablespoon of bleach to 1 quart (4 cups) of water.
- For a larger supply of disinfectant, add ½ cup of bleach to 1 gallon (16 cups) of water.
- Apply the solution to the surface with a cloth.
- Let it stand for 5 to 5 minutes.
- Rinse the surface with clean water.

If a surface is not visibly dirty, you can clean it with an EPA-registered product that both cleans (removes germs) and disinfects (kills germs) instead. Be sure to read the label directions carefully, as there may be a separate procedure for using the product as a cleaner or as a disinfectant. Disinfection usually requires the product to remain on the surface for a certain period of time.

Use disinfecting wipes on electronic items that are touched often, such as phones and computers. Pay close attention to the directions for using disinfecting wipes. It may be necessary to use more than one wipe to keep the surface wet for the stated length of contact time. Make sure that the electronics can withstand the use of liquids for cleaning and disinfecting.

Routinely wash eating utensils in a dishwasher or by hand with soap and water. Wash and dry bed sheets, towels, and other linens as you normally do with household laundry soap, according to the fabric labels. Soak utensils, dishes, and linens used by sick persons do not need to be cleaned separately, but they should not be shared unless they've been washed thoroughly. Wash your hands with soap and water after handling soiled dishes and laundry items.

5. Use products safely.

Pay close attention to hazard warnings and directions on product labels. Cleaning products and disinfectants often call for the use of gloves or eye protection. For example, gloves should always be worn to protect your hands when working with bleach solutions.

Do not mix cleaners and disinfectants unless the labels indicate it is safe to do so. Combining certain products (such as chlorine bleach and ammonia cleaners) can result in serious injury or death.

Ensure that custodial staff, teachers, and others who use cleaners and disinfectants read and understand all instruction labels and understand safe and appropriate use. This might require that instructional materials and training be provided in other languages.

6. Handle waste properly.

Follow your school's standard procedures for handling waste, which may include wearing gloves. Place no-touch waste baskets where they are easy to use. Throw disposable items used to clean surfaces and items in the trash immediately after use. Avoid touching used tissues and other waste when emptying waste baskets. Wash your hands with soap and water after emptying waste baskets and touching used tissues and similar waste.

www.cdc.gov/flu/school
1-800-CDC-INFO

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[How To Clean and Disinfect Schools To Help Slow the Spread of Flu](#)

Flu Information



The Flu:

A Guide for Parents



Influenza (also known as the flu) is a contagious respiratory illness caused by influenza viruses that infect the nose, throat, and lungs. It is different from a cold, and usually causes more severe illness than a cold. It causes some millions of illnesses, hundreds of thousands of hospitalizations, and tens of thousands of deaths in the United States.

Flu can be very dangerous to children. CDC estimates that between 4,000 and 36,000 children younger than 2 years have been hospitalized each year in the United States because of influenza. The flu vaccine is safe and helps protect children from flu.

What parents should know

How serious is flu?

While flu illness can vary from mild to severe, children often need medical care because of flu. Children younger than 2 years and children of any age with pre-existing health problems are at high risk of complications like pneumonia, bronchitis, sinus and ear infections. Some health problems that are known to make children more vulnerable to flu include asthma, diabetes and disorders of the heart or nervous system.

How does flu spread?

Flu viruses are thought to spread mainly by droplets made when someone with the coughs, sneezes or talks. These droplets can land in the nose or mouth of people nearby. A person also can get flu by touching something that has the virus on it and then touching their mouth, eyes, or nose.

What are the symptoms?

The symptoms can include fever, cough, sore throat, runny or stuffy nose, body aches, headache, chills, and feeling tired and weakness. Sore throat and diarrhea are common in children and adults. Some people will have flu without a fever.



Protect your child

How can I protect my child from flu?

The best and most ways to protect against flu is to get a yearly flu vaccine for yourself and your child.

- The vaccination is recommended for everyone 6 months and older every year. The shots and nasal spray flu vaccines are both options for vaccination.
- It's especially important that young children and children with one long-term health condition get vaccinated.
- Complications of influenza symptoms of the complications about half of the vaccine. Children younger than 2 months are at high risk for serious complications, but are young (up to the month).
- Pregnant women should get a flu vaccine to protect themselves and their baby from flu. Research shows that flu vaccine during or after pregnancy can help protect against complications like pneumonia.
- Flu viruses are constantly changing and so flu vaccines are updated often to protect against the flu viruses that cause the illnesses most likely to occur during the upcoming flu season.

Is the vaccine safe?

Flu vaccines are made using either whole and inactivated viruses or. Millions of people have safely received flu vaccines for decades. Flu shots are safe and easy. Flu vaccines are both options for vaccination. Different types of flu vaccines are licensed for different ages. Talk to your child's pediatrician about the best option for their age. CDC and the American Academy of Pediatrics recommend an annual flu vaccine for all children 6 months and older.

What are the benefits of getting a flu vaccine?

- A flu vaccine can keep you and your child from getting sick. When vaccination and avoiding viruses are combined, flu vaccination can reduce the risk of getting sick with flu by about half.
- The vaccine can keep your child from being hospitalized from flu. Government studies found that flu vaccine reduced children's risk of hospitalization from the common flu infection by 76%.

- The vaccine can prevent your child from dying from flu. A study using data from several flu seasons found that flu vaccination reduced the risk of flu-associated death by half among children with high-risk medical conditions and by nearly two-thirds among children without medical conditions.
- The vaccination also may make your illness last if you do get sick.
- Getting yourself and your child vaccinated also can protect others who may be more vulnerable to serious flu illness. The babies and young children, older people, and people with certain health problems.

What are some other ways I can protect my child against flu?

It's a lot like getting flu vaccine, you and your child should take everyday actions to help prevent the spread of germs.

Many ways to help prevent the spread of germs are as simple as possible to keep from getting sick yourself if you or your child are sick, make sure someone else is possible to keep from getting sick. Also, remember to regularly cover your cough and sneeze, wash your hands often, avoid touching your eyes, nose and mouth, and because germs that may be spread through saliva. These everyday actions can help reduce your chances of getting sick and prevent the spread of germs to others if you are sick. However, a yearly flu vaccine is the best way to prevent flu illness.

If your child is sick

What can I do if my child gets sick?

Talk to your doctor early if you are worried about your child's illness.

Make sure your child gets plenty of rest and drinks enough fluids.

If your child is younger than 2 years and does not have a long-term health condition and you are not pregnant, talking to a new doctor is safe, and your doctor is needed.

Children younger than 2 years of age (especially those younger than 2 years) and children with certain long-term health problems (including asthma, diabetes and disorders of the heart or nervous system) are at high risk of serious flu complications. Call your doctor or take your child to the doctor right away if they develop flu symptoms.

What if my child seems very sick?

Some healthy children can get very sick from flu. If your child is experiencing the following emergency warning signs, you should call for the emergency team:

- Fast breathing or trouble breathing
- Bluish lips or face

- Flu (cough) with wheezing
- Chest pain
- Severe muscle pain (child refuses to walk)
- Dehydration (no urine for 8 hours, if you're not urinating)
- Stomach or intestinal discomfort
- Seizures
- Fever above 102°F
- In children less than 12 months, any fever
- Fever or cough that keeps back their behavior or mood
- Worsening of chronic medical conditions

This list is not all-inclusive. Please consult your medical provider for any other symptoms that concern or concern you.

Is there a medicine to treat flu?

Yes, antiviral drugs are prescription medicines that can be used to treat the flu virus. They can shorten your flu and reduce its severity, and they can prevent serious complications that could result in a hospital stay. Antiviral drugs work best when started during the first 2 days of illness. Antiviral drugs are recommended to treat flu in people who are very sick (in hospital or emergency room) or people who are at high risk of serious flu complications when they get the flu. Antiviral drugs require a doctor's prescription and a prescription.

How long can a sick person spread flu to others?

People with flu may be able to infect others from 1 day before getting sick to up to 7 days after. Usually, it people are young children may be able to spread the flu longer, especially if they still have symptoms.

Can my child go to school, day care, or camp if he or she is sick?

No. Your child should stay home to rest and to avoid spreading flu to other children or caregivers.

When can my child go back to school after having flu?

Keep your child home from school, day care, or camp for at least 24 hours after their fever begins. If a fever does return, your child should stay home for another 24 hours. If a fever is defined as 102°F (38.3°C) or higher.

*This information is not intended to replace the advice of a health care professional. It is intended for informational purposes only. It is not intended to be used as a substitute for professional medical advice.



For more information, visit www.cdc.gov/flu/parents/children-flu-vaccine.html

[Handout for Parents about the Flu](#)

GERMS ARE EVERYWHERE!

You can stop germs from spreading by washing your hands:

- when your hands are dirty
- before eating or cooking
- after using the bathroom
- after blowing your nose or coughing
- after touching pets or other animals
- before and after visiting a sick relative or friend
- after playing outside
- especially during flu and cold season

Hand washing steps:

- 1. WET** your hands with clean water.
- 2. SOAP** up your hands.
- 3. SCRUB** your hands front and back, between your fingers, and under your nails for at least 20 seconds.
- 4. RINSE** your hands with clean water.
- 5. DRY** your hands using a clean towel or air dry them.



Illustration: iStock.com

[Handwashing Poster](#)