



### SCHOOLS and CHILD CARE FACILITY - REPORTING PERTUSSIS TO PUBLIC HEALTH

Please report laboratory or clinically-diagnosed pertussis in children to [your local health department](#) .  
Fill out the following information as completely as possible. Public health staff may be unable to follow up on cases that have inadequate information.

- Name of student \_\_\_\_\_  
DOB \_\_/\_\_/\_\_      Date of Onset (any symptoms) \_\_/\_\_/\_\_
  
- Name/contact information of healthcare provider who made the diagnosis:  
Name \_\_\_\_\_ Phone number \_\_\_\_\_  
Clinic Name \_\_\_\_\_
  
- Lab results: Positive \_\_\_ Negative \_\_\_ Not tested \_\_\_ Unknown \_\_\_ Date tested \_\_/\_\_/\_\_
  
- Pertussis immunization dates (please enter dates **or** fax Certificate Of Immunization Status form  
DTaP dates \_\_/\_\_/\_\_    \_\_/\_\_/\_\_    \_\_/\_\_/\_\_    \_\_/\_\_/\_\_    \_\_/\_\_/\_\_  
Tdap date \_\_/\_\_/\_\_  
No pertussis doses received \_\_\_ Reason not vaccinated: Parent refusal \_\_\_ Other \_\_\_\_\_
  
- Was the child treated with antibiotics? Y \_\_\_ N \_\_\_ Unknown \_\_\_  
Name of antibiotic \_\_\_\_\_ Date prescribed? \_\_/\_\_/\_\_
  
- Does the child have contact with any high risk persons? Y \_\_\_ N \_\_\_ Don't know \_\_\_  
**High risk is defined as:**
  - **Infants < 1 year old**
  - **Pregnant women (particularly those in 3<sup>rd</sup> trimester of pregnancy)**
  - **Anyone who may expose infants < 1 year old or pregnant women (e.g., members of a household with infants or pregnant women, child care workers who take care of infants < 1 year old, health care workers with face-to-face contact with infants < 1 year old or pregnant women, childbirth educators)**
  
- Were preventive antibiotic treatment was given to household and high risk close contacts?  
Household contacts: Y \_\_\_ N \_\_\_ Don't know \_\_\_ High risk contacts: Y \_\_\_ N \_\_\_ Don't know \_\_\_
  
- Was the child excluded from school or child care until after 5 days of antibiotics? Y \_\_\_ N \_\_\_ Partially \_\_\_  
Dates attended school/childcare while contagious: \_\_/\_\_/\_\_ through \_\_/\_\_/\_\_      None \_\_\_\_\_  
**Contagious period = from the first day of any symptoms (includes runny nose) until after 5 days of antibiotics have been completed (or 21 days after the onset of severe cough if no antibiotics taken.)**

## INFORMATION ON PERTUSSIS

Thank you for reporting your pertussis case to your local health department. Public Health's role is to assure appropriate treatment, prophylaxis and exclusion to prevent pertussis from spreading in high risk persons. The ultimate goal is to prevent pertussis in infants because they are most at risk for severe illness and even deaths from this disease.

### Infection Control

Sick children should not be at school. Please send children with a severe, persistent or spasmodic cough home and recommend to the parent/guardian that the child be evaluated by a healthcare provider. Persons with pertussis are contagious from the first onset of any symptoms until 3 weeks after the onset of cough.

### Treatment

Antibiotic treatment of pertussis is most effective if it is started early (before coughing becomes severe) but is recommended as long as it has been less than 3 weeks since the onset of coughing. The health department can help obtain antibiotic treatment for uninsured children.

### Postexposure Prophylaxis (PEP)

PEP is recommended for all household and other close contacts of pertussis cases, but is especially important for any high risk contact such as infants < 1 year, pregnant women, or anyone who may expose infants < 1 year old or pregnant women (*e.g., members of a household with infants or pregnant women, child care workers who take care of infants < 1 year old, health care workers with face-to-face contact with infants < 1 year old or pregnant women, childbirth educators*). Persons in close contact with a pertussis case should contact their healthcare provider to ask if PEP is recommended.

### Exclusion

Exclusion of pertussis cases from public settings (work, school, child care) is recommended until after 5 days of appropriate antibiotics have been completed or until 21 days after the onset of cough if the patient is unable to take, or refuses, antibiotics. Exclude immediately when you learn that a student or staff member has healthcare provider-diagnosed pertussis.

### Vaccination

Make sure teachers and other school/child care staff are up to date on pertussis vaccine. Any adult who works with children and has not received a Tdap is recommended to get one. Though fully vaccinated people can still be infected with pertussis, the illness is much less likely, and symptoms are milder in persons who are up to date.