

Emerging Disease Information

The health of students is of primary concern to the Mississippi Department of Education (MDE) and of Mississippi schools. This guide is designed to provide basic information and procedures regarding viruses in schools. MDE will continue to communicate with the MS State Department of Health (MSDH) to maintain as safe and healthy environment for our schools. As new information is made available MDE will update this guide. Please refer to the links to the Center for Disease Control (CDC) and the MSDH for more detailed information.

General Procedures for Personal Protection

Basic infection control in school settings should always be promoted and maintained.

- ✓ **Stay home when sick-**Those with flu like symptoms including respiratory symptoms should stay home from work or school and seek medical attention if the symptoms get worse. This would include uncontrolled temperature, difficulty breathing, worsening headache, unusual muscle weakness or seizure activity.
 - ✓ **Separate ill students and staff-**Students and staff who seem to have these symptoms should be separated from others until they can be sent home. CDC recommends personal protective equipment as part of universal precautions when caring for infected individuals and when cleaning body fluid spills.
 - ✓ **Hand hygiene-** CDC and MSDH recommend that students and staff be encouraged to wash hands often with soap and water, especially after coughing and sneezing. If soap and water is unavailable, sanitizers may be used.
<http://www.cdc.gov/handwashing/index.html>
 - ✓ **Respiratory etiquette-** CDC and MSDH recommend covering the nose and mouth with a tissue when coughing or sneezing (or a shirt sleeve or elbow if no tissue is available) and throwing the tissue in the trash after use, followed by hand washing.
<http://www.cdc.gov/flu/protect/covercough.htm>
 - ✓ **Routine Cleaning-** School staff should routinely clean areas that students and staff touch often with the cleaners they typically use. Standard droplet and contact precautions should be recommended for prevention of transmission. Cleaning should take place immediately.
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Enterovirus D68

- Enterovirus D68 (EV-D68) is one of more than 100 non-polio enteroviruses and can cause mild to severe respiratory illness.
- The number of reported cases of confirmed EV-D68 infection is on the rise in 46 states including Mississippi.
- The virus can be found in an infected person's respiratory secretions, such as saliva, nasal mucus, or sputum. EV-D68 likely spreads from person to person when an infected person coughs, sneezes, or touches a surface that is then touched by others.
- In general, infants, children, and teenagers are the most likely to become ill with EV-D68.
 - a. Mild symptoms may include fever, runny nose, sneezing, cough, and body and muscle aches.
 - b. Severe symptoms may include wheezing and difficulty breathing.
 - c. More serious cases can experience complicated respiratory symptoms especially in children with asthma.

<http://cdc.gov/non-polio-enterovirus/>

<http://www.cdc.gov/non-polio-enterovirus/about/EV68-infographic.html>

<http://www.cdc.gov/features/evd68/>

Acute Neurologic Illness with Focal Limb Weakness of Unknown Etiology in Children

- As of October 8, CDC has verified reports of 17 cases in the U.S, none in Mississippi, that meet the CDC case definition
- Children are reporting a respiratory episode 2 weeks prior to symptoms.
- Symptoms include extreme muscle weakness, paralysis and in some cases seizures.
- There are investigations in process to determine possible links to the EV- D68.

<http://www.cdc.gov/ncird/investigation/viral/sep2014.html>

Ebola

- The risk of an Ebola outbreak in the United States is very low with one travel related case and two associated infections of health care workers to date.
- Ebola is transferred to the US through the travel of individuals that have been exposed/infected when in areas of known outbreak, currently West African countries.
- Symptoms include: Fever (greater than 38.6°C or 101.5°F), severe headache, muscle pain, weakness, diarrhea, vomiting, abdominal (stomach) pain, unexplained hemorrhage (bleeding or bruising)
- Symptoms may appear anywhere from 2 to 21 days after exposure to Ebola, but the average is 8 to 10 days.
- Ebola is spread through direct contact with an infected person, the virus enters the body through broken skin or mucous membranes (example, the eyes, nose, or mouth). Direct contact is defined as contact with
 - a. Blood and body fluids (including but not limited to urine, saliva, sweat, feces, vomit, breast milk, and semen) of a person who is sick with Ebola

- b. Certain objects (like needles and syringes) that have been contaminated with blood or body fluids of a person sick with Ebola.
- c. Infected animals known to have been exposed to a person sick with Ebola.
- Ebola is not spread through the air or by water, or in general, by food

<http://www.cdc.gov/vhf/ebola/>
http://msdh.ms.gov/msdhsite/_static/14,0,389.html

Responding to Viruses in Schools

- 1) Enterovirus D68- coughing, sneezing, runny nose, muscle aches. Most cases are mild. The more serious cases can experience complicated respiratory symptoms especially in children with asthma.

School response:

- a. Have current individual Student Asthma Plans assessable for use
 - b. Provide hand washing instruction for teachers and students
 - c. Standard cleaning precautions
 - d. Separate ill students/staff and make appropriate medical referral
 - e. Engage school crisis management plan
- 2) Neurologic Illness- a history of respiratory illness in previous 2 weeks. Extreme muscle weakness, paralysis and seizure activity.

School response:

- a. Provide hand washing instruction for teachers and students
 - b. Standard cleaning precautions
 - c. Separate ill students/staff and make appropriate medical referral
 - d. Engage school crisis management plan
- 3) Ebola- sudden onset of fever (greater than 101.5), headache, diarrhea, vomiting, and stomach pain. 2-21 days after exposure. Transmission occurs by direct contact with bodily fluids of an infected person.

School response:

- a. Separate student/staff and make appropriate medical referral
- b. Engage school crisis management plan
- c. Follow CDC guidelines on cleaning and disposal of items soiled with bodily fluids from a person suspected of illness.

Questions to ask when enrolling students:

Have you recently lived/traveled outside the United States?

- If yes- then ask what country
 - If from West Africa then ask if they or someone in their household has had contact with anyone who was ill.
 - If yes refer to the closest hospital and notify local health department, school administrator, and school nurse.
 - Engage the school crisis management plan.
- If no then allow class attendance

Contact Information

Mississippi State Department of Health

- Toll-free: 1-866-HLTHY4U (866-458-4948)
- Public Health Emergencies: 601-576-7400
- <http://msdh.ms.gov/>

Mississippi Department of Education

- Healthy Schools 601-359-1737
- <http://www.mde.k12.ms.us/healthy-schools>

Additional Resources

Health in Action Lessons Dealing with Communicable Diseases:

<http://lessonplans.movetolearnms.org/Search.aspx>

- **Grades K-2:**
 - My Hands are Clean (this lesson utilizes United Streaming)
 - Keeping the Flu Away
 - Safety and Medicines
 - Immunizations
 - Mr. Germ Head
- **Grades 3-5:**
 - Do I Have to Wash My Hands?
- **Grades 6-8:**
 - Don't be Sick
 - Doctor, Doctor
- **Grades 9-12:**
 - What's Bugging You?
 - And you are.....
 - Clean Hands Are Happy Hands

Note: Even though these lessons are identified by grade level, a teacher can use the ideas and the information presented at any grade level that they feel is appropriate.