


Partnering for Prevention

The Role of the School Nurse in Outbreak Response

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Objectives



- Preparing
- Reporting
- Prevention
- Partnerships
- Response



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NJDOE Statutes Addressing Illness in Schools

N.J.S.A. 18A:40-6 The Board of Education may provide equipment to aid in the preservation of health.

N.J.S.A. 18A:40-7 Exclusion of students who are ill.

N.J.S.A. 18A:40-8 Exclusion of students whose presence is detrimental to health and cleanliness (exposed to a communicable disease).

N.J.S.A. 18A:40-9 Parent failing to pick up child in a reasonable time may be charged as a disorderly person.

N.J.S.A. 18A:40-10 Exclusion of teachers and pupils exposed to communicable disease may be excluded until they provide a certificate from a physician or the board of health that all danger of spreading the disease has passed.

N.J.S.A. 18A:40-11 Allows for the exclusion of pupils with active tuberculosis.

N.J.S.A. 18A:40-12 Board of Health may close schools during an epidemic.



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New Jersey Department of Education

Communicable Disease Prevention and Reporting

One of the most basic responsibilities of schools is to prevent the spread of communicable diseases. This is accomplished through a comprehensive program of immunizations, screening and referral, educators and exclusion, if necessary.

Reporting Outbreaks: In accordance with Executive Order No. 302 and Executive Directive No. 3113, **all schools must report weekly data for the 2024-2025 school year to NJDOE through the System for Operational Conditions (SOC) Module in New Jersey's Communicable Disease Reporting and Surveillance System (CDRSS).** Reporting outbreak information on the **all** SOC Module User Guide for Schools, are located under the "TRAINING" tab, located at the top left corner of the CDRSS homepage.

Please contact the SOC Reporting Team at CDSS@NJDOE.nj.gov for any of the following:

- New user enrollment
- Existing user account updates (i.e., school assignments, district changes, etc.)
- Account access questions (i.e., login credentials) and
- All reporting questions.

If you have not yet registered to report into the SOC module, please contact CDSS@NJDOE@doe.nj.gov during the summer months so you can get set up to report in advance of the new school year.

Weekly outbreak reporting into the SOC module does **NOT** replace the need for schools to notify their local health department when they become aware of illness clusters or possible outbreaks. Schools should notify their local health department and report the outbreak in the SOC module during the appropriate reporting week.

Links to Report a Disease


- Communicable Disease Guidance
- New Jersey Immunization Requirements
- New Jersey Immunization Information System (NJHIS)
- NJHIS Contact
- Resources

<https://www.nj.gov/education/safety/health/cdpr/>




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Planning for Outbreaks




Schools have a critical role in preventing infectious disease transmission within the school community

Prepare for outbreaks/pandemics by having an Emergency Operations Plan (EOP) with an infectious disease section




Everyday actions can help decrease infectious disease transmission

Handwashing
Respiratory etiquette
Staying home when sick
Routine cleaning and disinfection
Ventilation




Vaccination is a proven public health intervention

Schools can support vaccination uptake



[CDC: Prepping for a School Emergency](#)



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Before, During, and After

Before an outbreak


- Establish and implement infectious disease policies
- Share policies with school staff and key stakeholders
- Work closely with local public health partners, engage parents/caregivers, community partners
- Reinforce prevention strategies

During an outbreak

- Maintain communication with LHD
- Inform students, staff and families of the situation
- What the school is doing, what families can do at home, when can ill students return

After an outbreak

- Communication
- Review the situation
- Identify lessons learned and update EOP



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Role of a School Nurse in Responding to Infectious Disease Outbreaks



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Outbreak Decision Scenario #1

An elementary school nurse is observing the first increase of absenteeism and visits to the school nurse since school started this year.

The third grade is most affected; of the 80 third graders, 8 are sick with fever, cough, and sore throat.

Of the 480 students at the school, 25 students are absent due to respiratory illness.

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Outbreak Decision Scenario #1

- Is this a new event?
 - Does the school have any current open outbreaks? Outbreaks are considered over after two incubation periods without new reports of illness.
- Are the students in the same class or activity?
 - The third-grade cases are spread throughout 4 classrooms.
- Are the students reporting the same illness, or the same symptoms?
 - Out of 8 ill students in 3rd grade, 1 parent report of COVID-19, 2 reports of influenza, 3 report cough, and 2 parents report that their students have fever, and cough.

By answering these questions, have you determined that there is a respiratory outbreak occurring?

Why or why not?

At this time, the reports of illness are consistent to community trends. There is an increase of respiratory illness in the school overall, but not one specific pathogen is tied to the increase.



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Outbreak Decision Scenario #2

An elementary school nurse is observing the first increase of absenteeism and visits to the school nurse since school started this year.

The third grade is most affected; of the 80 third graders, 15 are sick with fever, cough, and sore throat.

Of the 480 students at the school, 25 students are absent due to respiratory illness.



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Outbreak Decision Scenario #2

- Are the students in the same class, activity?
 - The third-grade cases are spread throughout 2 classrooms.
- Are the students reporting the same illness, or the same symptoms?
 - Out of 15 ill students in 3rd grade, 14 parent reports of influenza, and 1 report of fever, cough and sore throat within the past 10 days.

By answering these questions, have you determined that there is a respiratory outbreak occurring?

Why or why not?

Even with a seasonal increase of community influenza, the school nurse typically does not see this many reported influenza cases clustered to two classrooms, in such a short duration.

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Considerations

- Seasonal respiratory illness
 - When seeing an increase in reported illnesses and absenteeism, it is sometimes difficult to know if an outbreak is occurring
- Epidemiological Linkage
 - Are students in the same class, same grade, after-school activity
 - Did the students attend a common event
- Utilize the NJDOH Respiratory Illness Report and Dashboard
 - The report and dashboard highlight statewide disease activity and trends
 - Includes Surveillance for Infectious Conditions(SIC) Reporting Data
 - Highlights outbreaks reported from schools as well as absenteeism

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SIC Reporting

- § 8:57-2.12 School data reporting

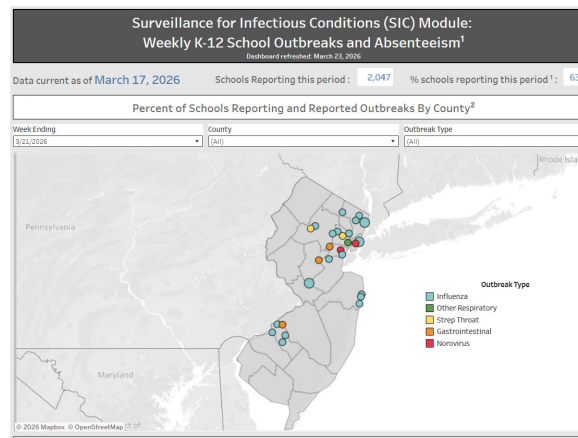
(a) A school administrator shall ensure that the school reports the following data into the CDRSS between 12:01 A.M. Tuesday and 5:00 P.M. Wednesday (reporting date):

1. Student census (total number of enrolled students) as of the Tuesday of the reporting date;
2. Number of students absent on the Tuesday of the reporting date;
3. Reason for each student's absence on the Tuesday of the reporting date; and
4. During the Monday through Sunday of the week preceding the reporting date, the number of outbreaks of a communicable disease, infection, or condition that were known or suspected to have occurred, and, if an outbreak occurred, the communicable disease, infection, or condition that was known or suspected to have occurred as an outbreak.

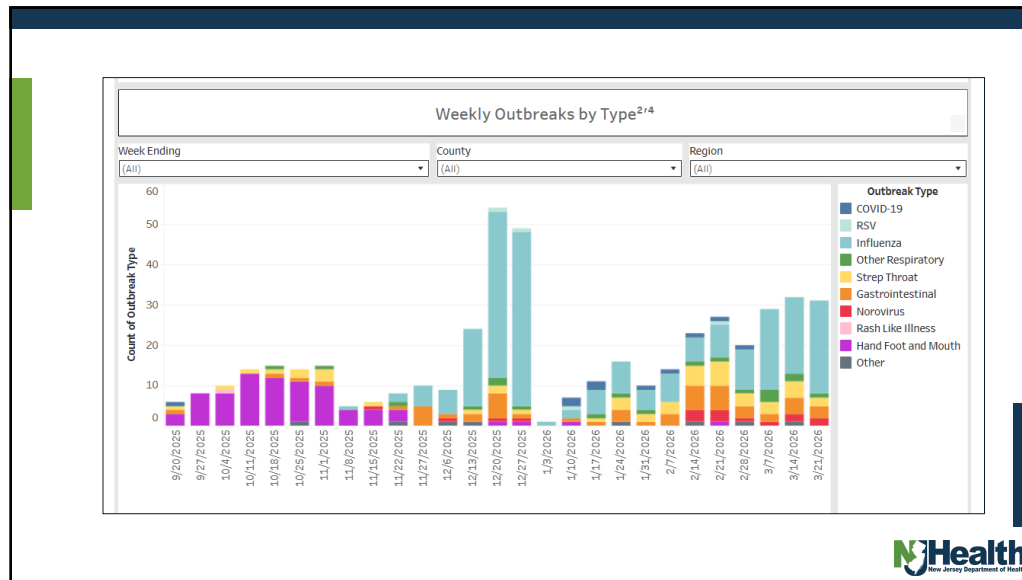


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SIC External Dashboard



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NJDOH Respiratory Surveillance Report

Respiratory Illness Surveillance Report
Week Ending January 4, 2025 (MMWR 1)

Report Highlights:

- There continues to be increases in percent positivity, emergency department visits, and hospital admissions due to COVID-19.
- The COVID-19 variants predominantly in circulation are H3C and KP.3.1.1.
- Seasonal influenza activity continues to increase. Influenza associated emergency department visits, admissions, percent positivity, and influenza like illness among emergency department visits continues to be higher compared to last week.
- Among the current circulating influenza viruses, the most frequently reported subtype remains influenza A(H3N2).
- RSV activity continues to be high. Emergency department visits and hospital admissions due to RSV continue to be elevated.
- Percent positivity is elevated for seasonal coronavirus.

Respiratory Trends:

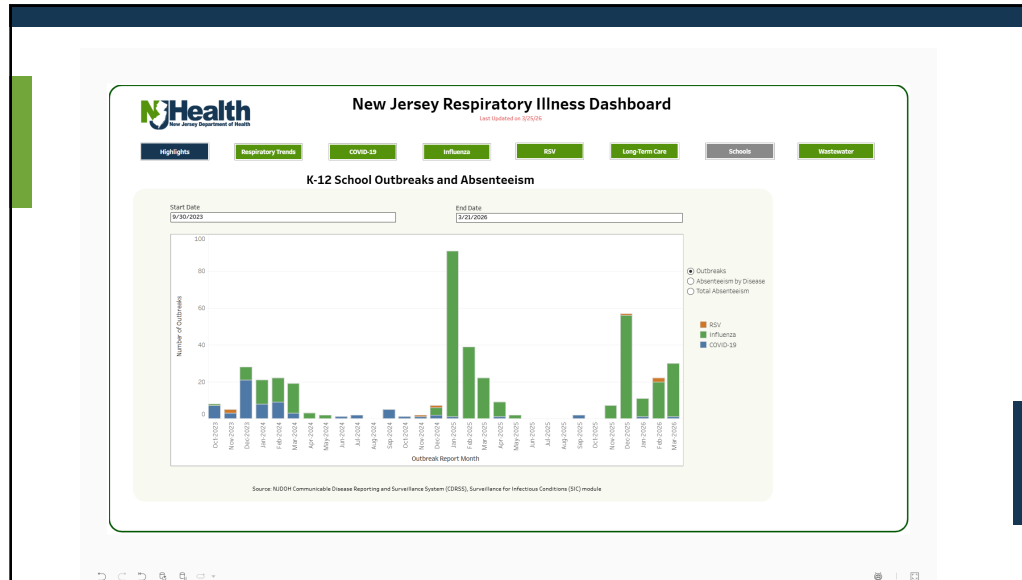
Data from the NJDOH Syndrome Surveillance System (S3) shows the weekly percent of emergency department visits and visits that resulted in hospitalizations associated with COVID-19, influenza, and/or RSV by diagnosis codes reported by 79 New Jersey emergency departments.

Percent of Emergency Department Visits with a Respiratory Illness Diagnosis

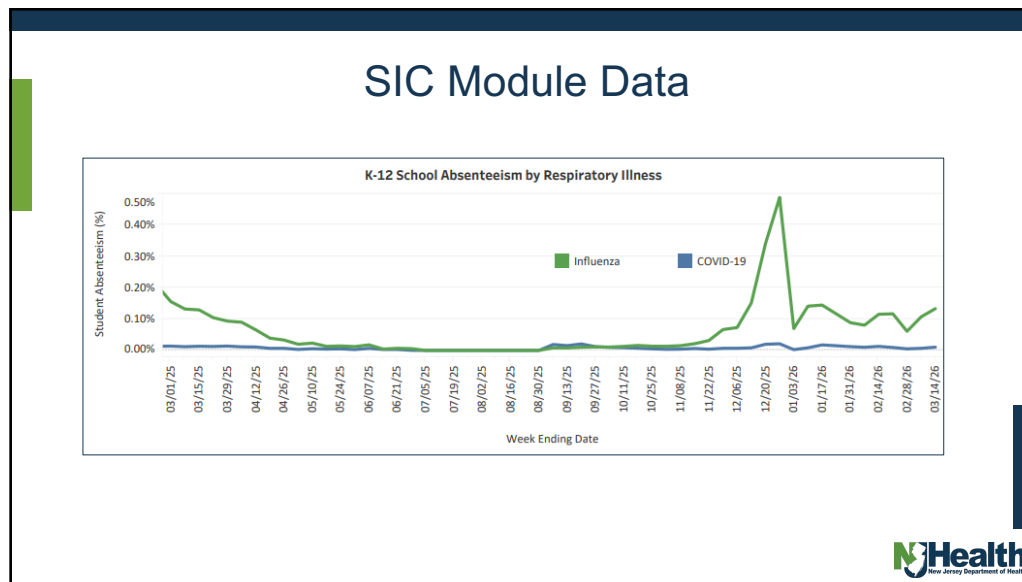
Emergency Department Visits with Respiratory Illness Diagnosis that Resulted in Admission

- Provides updates and surveillance information on respiratory illness throughout the state of New Jersey
- Collects data from hospitals, laboratories, long term care and schools
- <https://www.nj.gov/health/cd/statistics/respiratory-illness-reports/>

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What are the goals of outbreak reporting?

- 1 Control the spread of disease
- 2 Identify and eliminate source of infection
- 3 Learn about emerging problems
- 4 Highlight knowledge gaps/training needs
- 5 Implement new strategies for prevention



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Reporting an Outbreak

When reaching out to your Local Health Department to report an outbreak, please have the following information from your line list ready:



Total number of cohorts with ill students/staff

- Total # of students/staff in each effected cohort
- Total # in the school



Illness Onset

- First onset date
- Most recent onset date



Known diagnosis or positive lab

- Influenza, COVID-19
- Respiratory panel



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School/Childcare Excel Line Listing

1 Select Exposure Setting: SCHOOL		2 School Name: New Jersey Elementary School		Reported By: Jack Johns	Phone: 7321112222	Report Date: 12/4/2022																			
3 Outbreak/Investigation Number (E/I Number): E-2022-12345	Total Number of Students in School: 233	Number of Students ill Today: 4	Total Number of Staff: 300	Number of Staff ill Today: 2																					
S.No.	LAST NAME	FIRST NAME	DATE OF BIRTH (DOB)	GENDER	CASE ROLE (Student/Staff/Attendee/Visitor)	GRADE	ROOM	TEMPERATURE (°F)	DIARRHEA	BLOODY STOOL	ABDOMINAL PAIN	NAUSEA	VOMITING	PHARYNGITIS	SORE THROAT	COUGH	RAVITIS	CHILLS	OTHER (Specify)	ILLNESS ONSET DATE	DURATION OF SYMPTOMS	DATE SPECIMEN COLLECTED	TEST NAME & RESULTS (e.g. RSV POS)	DIAGNOSIS BY HCP	COMMENTS
1	Smith	James	01/01/2014	Male	STUDENT	3	223	100.0	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		12/10/2022	2 days	12/11/2022	RSV Pos	No		

1) Select Exposure Setting i.e., school, daycare or institute of higher education from dropdown.
 2) Enter other details such as school/institute name, reported by, report date and census.
 3) Enter Outbreak/Investigation (E/I) Number assigned by NJDOH.
 4) Enter Last and First name of case/patient (do not enter initials).
 5) Enter all dates in the line-list such as DOB, onset date, specimen collection date in mm/dd/yyyy format.
 6) Select gender from dropdown.
 7) Select case-role from dropdown. Case-role means identifying the case/patient by its role in the institute/school i.e., student/daycare attendee/staff/visitor.
 8) Select symptoms applicable to the case by checking the checkbox. To deselect the symptoms, just uncheck the checkbox.
 9) Enter test name followed by test result (e.g. RSV Pos)
 10) Enter diagnosis by HCP (health care provider), if applicable

To delete a row of data, select the row and right click to clear contents. To delete content of a cell, use delete or backspace on the keyboard.



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Sample Line List

SEX	CASE ROLE (Student/Staff/Attendee/Visitor)	ROOM	FEVER (Y/N)	TEMPERATURE (°F)	DIARRHEA	BLOODY STOOL	ABDOMINAL PAIN	NAUSEA	VOMITING	PHARYNGITIS	SORE THROAT	COUGH	RAVITIS	CHILLS	OTHER (Specify)	ILLNESS ONSET DATE	DURATION OF SYMPTOMS	DATE SPECIMEN COLLECTED	TEST NAME & RESULTS (e.g. RSV POS)	DIAGNOSIS BY HCP
Female	STAFF	IMBC	Yes	104.0					Yes	Yes	Yes	Yes	Yes		Body a/cx, congestion	12/02/24	5 days	12/06/24	flu	unknown Urgent Care
Female	STAFF	TodP	Yes	101.0					Yes	Yes	Yes	Yes	Yes		body a/cx, congestion	12/01/24	6 days	12/07/24	flu	Capital Health
Female	STAFF	Admin	Yes	101.0					Yes	Yes	Yes	Yes	Yes		body a/cx & difficulty breathing	12/01/24	3 days	12/03/24	flu	Urgent Care
Female	STAFF	IMBC						Yes	Yes	Yes						12/01/24		12/03/24	flu	
Female	STAFF	Tod BO	Yes					Yes	Yes							12/01/24	6 days	12/06/24	flu	
Female	STUDENT	1st D	Yes	101.0								Yes	Yes		congestion	12/01/24	3 days	12/04/24	flu	
Male	STUDENT	PSAB	Yes	101.0					Yes	Yes		Yes	Yes			12/01/24	2 days			
Male	STUDENT	IFBC	Yes	101.0	Yes				Yes	Yes		Yes	Yes		congestion	12/01/24	4 days			
Male	STUDENT	IFBC	Yes	101.0								Yes	Yes		congestion	12/01/24	2 days			
Female	STUDENT	IFFF	Yes	101.0					Yes	Yes	Yes	Yes	Yes			12/01/24	4 days	12/01/24	flu	
Male	STUDENT	IMBC	Yes	101.0								Yes	Yes			12/01/24	4 days			
Female	STAFF	IMC	Yes	101.0					Yes	Yes	Yes	Yes	Yes			12/01/24	4 days			
Female	STAFF	IFrom	Yes	101.0								Yes	Yes			12/01/24	3 days		12/01/24	flu
Male	STUDENT	TodMC	Yes	101.0								Yes	Yes							
Female	STAFF	TodMC	Yes	101.0											congestion	12/01/24	2 days			
Female	STUDENT	IMC	Yes	101.7								Yes	Yes		congestion	12/01/24	3 days	12/01/24	flu	



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Incomplete Line List


SEX	CASE ROLE (Student/Staff/Attorney/Visitor)	GRADE	ROOM	FEVER (°F)	TEMPERATURE (°F) IF KNOWN	SYMPTOMATIC	DIBBERIA	BLOODY STOOL	ABNORMAL PAN	INDIA	VOMITING	HEADACHE	SOFT TONGUE	COUGH	FAIRURE	CHILLS	ANY OTHER SYMPTOMS (KOH/CENTRIFUGED (Yes/No) or other (Type in comment))	ILLNESS ONSET DATE	DURATION OF SYMPTOMS	DATE SPECIMEN COLLECTED	TEST NAME & RESULT (e.g. RSV POS)	DIAGNOSIS BY ICF	HOSPITALIZED	COMMENTS
Female	Student	1	34														01/03/2025	8 days					Diagnosed influenza	
Male	Student	1	23			Yes											01/04/2025	1 day						
Male	Student	4	47	Yes										Yes			01/06/2025	8 days					"sick"	
Male	Student	4	49														01/06/2025	5 days					Student absent due to being "sick"	
Female	Student	5	214														01/06/2025	5 days					Diagnosed influenza	
Female	Student	7	212	Yes							Yes		Yes				01/06/2025	5 days					Influenza	
Male	Student	2	35														01/07/2025	3 days					Student absent due to being "sick"	
Female	Student	2	43														01/07/2025	2 days					Student absent due to being "sick"	
Female	Student	4	49								Yes		Yes				01/07/2025	4 days						
Male	Student	4	50											Yes			01/07/2025	4 days					Student returned to school on the 7th	
Female	Student	6	213														01/07/2025	4 days					Sent home on 7th with stomach discor	
Female	Student	K	26	Yes			Yes			Yes							01/07/2025	4 days						
Female	Student	2	43														01/08/2025	2 days					Student absent 2 days "sick"	
Male	Student	1	19														01/08/2025	7 days					Influenza	
Male	Student	2	17														01/08/2025	1 day					"sick"	
Male	Student	2	43														01/08/2025	7 days					Influenza Student still absent 1/31/2025	
Female	Student	2	43														01/08/2025	1 day					"Not feeling well"	
Male	Student	3	44	Yes													01/08/2025	3 days						
Male	Student	4	50														01/08/2025	1 day					"sick"	
Male	Student	6	209														01/08/2025	1 day					"sick"	
Female	Student	6	213														01/08/2025	6 days					MD note received. Symptoms not spe	
Male	Student	6	213														01/08/2025	1 day					"sick"	
Male	Student	7	212														01/08/2025	1 day					"Not feeling well"	
Female	Student	7	212														01/08/2025	3 days					Influenza A	

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Local Health Department Role

During an outbreak, the LHD will:

- Provide guidance and recommendations
- Develop a case definition
- Review messaging/notifications
- Help to determine if control measures are working
- Coordinate/communicate with
 - NJDOH
 - Other jurisdictions, health care providers, and public health partners
- Determine when an outbreak is over
- Work with school on final report



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Outbreak Definitions

- Occurrence of disease greater than expected at a specific time and place
- Each outbreak has a unique outbreak case definition and includes:
 - Symptoms and/or diagnosis
 - Physical location (i.e., classroom, team, event)
 - Specific period of time (i.e., last 7 days)
- Developed jointly with LHD, NJDOH, and school/childcare center
 - **Example 1:** Any student or staff diagnosed with RSV on or after mm/dd/yy in classroom 101
 - **Example 2:** Any student or staff with fever and at least 2 of the following: headache, nasal congestion, cough, sore throat, fatigue, that has been ill starting on or after mm/dd/yy and that is associated with the wrestling team



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Parental Notification



- Have a policy for notification to parents
- Sending notification during an outbreak is on a case-by-case basis
- Consult public health before sending notifications
 - How will parents/staff receive the notification?
 - Who will receive the notification
 - Specific classroom, school-wide, team
 - When to send notification



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Parental Notification

- What to include in the notification
 - Information about the illness
 - What the school doing
 - What can parents do at home
 - When can ill students return
 - Who parents can contact for any questions
- Trusted resources and references



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Healthcare Providers

- A school nurse may have to reach out to child's healthcare provider for more information
 - Example: Student was diagnosed with STEC, and needs two negative stools to return to school
- Gathering information for public health purposes is a HIPAA exempt activity
- School exclusion list should be followed, and school policies should align with the recommendations
- School policy should not require physician notes for all ill students



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Closures

- NJDOH does not recommend school closure for outbreaks of infectious disease
- Administrative decision
 - After consultation with public health officials and school district medical personnel




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Outbreak Conclusion

- Consult LHD to determine
- An outbreak is over when:
 - 2 incubation periods have passed without a new case of illness
 - Varies depending on the outbreak illness/disease
- LHD is required to submit a final outbreak report
 - The LHD may ask for collaboration/ more information in order to assist the completion of the report

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GENERAL GUIDELINES FOR THE PREVENTION AND CONTROL OF OUTBREAKS IN EDUCATIONAL SETTINGS

Introduction
Per New Jersey Administrative Code (N.J.A.C.) 8A:26-2.2 and N.J.A.C. 3A:52-7.1, each school district and childcare center shall immediately report by telephone to the health officer of the jurisdiction in which the school is located any communicable diseases identified as reportable pursuant to N.J.A.C. 8:57-1, whether confirmed or presumed.

These regulations pertain to youth camps, childcare/early care and education programs (ECEs), schools and institutions of higher education. Additional outbreak guidance specific to the camp setting can be found on the New Jersey Department of Health (NJDOH) [School Health](#) webpage. Throughout the rest of this document, unless otherwise noted, these educational settings will be referred to generally as "schools". This document has been prepared to guide in both identification and response to outbreaks occurring in the school setting.

Reporting
Information related to school absenteeism plays a crucial role in detecting disease clusters or outbreaks. In accordance with Executive Order 302 and Executive Directive No. 21-011, K-12 schools are required to submit weekly data, including student census and absenteeism, to the New Jersey Department of Health (NJDOH) through the Surveillance for Infectious Conditions (SIC) Module in New Jersey's Communicable Disease Reporting and Surveillance System (CDRSS). Weekly reporting into the SIC Module does not take the place of reporting outbreaks to the local health department (LHD).


Reporting communicable disease outbreaks in schools serves various purposes. The primary objective is to immediately control the further spread of the disease. Additionally, insights gained from outbreak investigations assist schools and public health agencies in identifying and eliminating sources of infection, understanding emerging problems, identifying carriers to mitigate their role in disease transmission, and implementing new prevention strategies within schools.


In the school setting, determining if an outbreak is occurring can be challenging. An outbreak is defined as an occurrence of disease greater than expected at a specific time and place. The following examples of confirmed or suspected outbreaks should be reported by the school to their local health department (LHD). This list is not exhaustive; if the situation doesn't align with these criteria and an outbreak is suspected, consultation with the LHD is recommended.

A school may be experiencing an outbreak (i.e., occurrence of disease greater than expected) if:

- Several children who exhibit similar symptoms are in the same classroom, the same wing of a facility or they attended a common event.

General School Outbreak Guidance





Respiratory Illness Guidance for K-12 Schools, Youth Camps, and Early Care and Education Programs

August 28, 2025

The Centers for Disease Control and Prevention's (CDC) [Respiratory Illness Guidance](#) offers a unified approach to preventing the spread of common respiratory illnesses like COVID-19, influenza, RSV and bacterial infections, such as *Mycoplasma pneumoniae*. These illnesses share transmission methods, symptoms, and prevention strategies and the guidance provides clear steps to limit spread when individuals are ill, regardless of the specific virus or bacteria.

CDC and the New Jersey Department of Health (NJDOH) recommend that schools, early care and education (ECE) programs, and youth camps implement the core set of infectious disease prevention strategies outlined in [CDC's guidance](#). While these strategies are effective, depending on specific circumstances, NJDOH and local health departments (LHDs) may recommend additional measures to control a respiratory outbreak.

The prevention strategies described in this guidance can help reduce the risk of getting or transmitting respiratory illnesses. They are especially helpful when:

- Respiratory illnesses are causing an increase of [illness in the community](#).
- Individuals or the people around them were recently exposed to a respiratory illness, are sick, or are recovering.
- Individuals or the people around them have [risk factors for severe illness](#).



CDC recommends that all people use core prevention strategies. These are [important steps individuals can take to protect themselves and others](#):


- Stay up to date with [immunizations](#).
- [Practice good hygiene](#) by covering coughs and sneezes, washing or sanitizing hands often, and cleaning frequently touched surfaces.
- Take steps for [cleaner air](#) such as bringing in more fresh outside air, purifying indoor air, or gathering outdoors.

When individuals may have a respiratory illness, they should:

- [Use precautions to prevent spread](#).

Respiratory Illness Guidance for K-12 Schools, Youth Camps, and Early Care and Education Programs




General Guidelines for the Control of Outbreaks in School and Childcare Settings
School Exclusion List

This chart provides information about some communicable disease that may occur in schools, day care centers, summer camps and other group settings for children. It is meant as a guide to answer questions frequently asked of persons responsible for groups of children. This is not an all-inclusive list of significant diseases or a comprehensive guide to all information about each disease or condition. More specific information about these and other diseases may be obtained by contacting your local health department or the New Jersey Department of Health, Communicable Disease Service. **Outbreaks and suspected outbreaks of illness are immediately reportable to the local health department where the school is located.**

Fever is defined as a body temperature ≥ 100.4 F (38°C) from any site.


Infection or Condition	Common Signs and Symptoms	Exclusion for School/Daycare Children	Exclusion for Childcare Provider and/or Food Handler	Notes	Individual Cases Reportable to Health Department
Acute Respiratory Illness (ARI)	Fever ≥ 100.4 F and rhinorrhea, nasal congestion, sore throat, or cough in absence of a known cause.	Until fever free for 24 hours without fever reducing medication and symptoms are improving. ¹			
COVID-19	New or worsening cough, shortness of breath, difficulty breathing, new olfactory or taste disorder, Fever, chills, myalgia, headache, sore throat, GI, fatigue, congestion, rhinorrhea	Until fever free for 24 hours without fever reducing medication AND symptoms are improving. ²		Once individuals return to normal activities, they should take additional precautions for the next five days. ²	
Diarrhea Unspecified (organism/cause not identified or not yet determined)	Defined by stool that is occurring more frequent or is less formed in consistency than usual in the child and not associated with changes of diet.	Exclude children whose stool frequency exceeds 2 above normal per 24 hours for that child. Exclude diapered children whose stool is not contained in	Exclude from cooking, preparing and touching food until 24 hrs. after symptoms resolve.	See norovirus. Medical evaluation for stools with blood or mucus.	

School Exclusion Recommendations



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School Health Page/General Linelist



Communicable Disease Service

Home | Diseases & Health Topics A-Z List | **School Health** | Outbreak Reporting | Information Requirements | Education & Training | Settings, Reports | Forms

Home > Diseases & Health Topics A-Z List > School Health

Surveillance

The Surveillance for Infectious Conditions (SIC) Dashboard is available.

[See the SIC Dashboard](#)

School Health

Prevention and control of communicable disease is a shared responsibility between schools, health care providers, parents, students, local and state health departments, and other community partners. The school environment is conducive to the acquisition and transmission of communicable diseases but is also where good preventive practices can lessen the impact of these diseases.

Outbreaks

Outbreaks and suspected outbreaks of any illness/condition are immediately reportable to the local health department where the school is located. This pertains to youth camps, child care centers, preschools, schools and institutions of higher education referred to in general as "schools".

Some school related illnesses reported to NJDOH include:

- Fish Disease
- Hand, Foot, and Mouth Disease (HFMD)
- Influenza
- Measles: Preventing the Spread in Child Care and School Settings
- MSSU
- Scabies

Educational Materials

- [Birth Flu Prevention Flyer](#)
- [Handwashing Booklet](#)

Outbreak Reporting Requirements

Outbreaks and suspected outbreaks of any illness/condition are immediately reportable to the local health department where the school is located. This pertains to youth camps, child care centers, preschools, schools and institutions of higher education referred to in general as "schools".

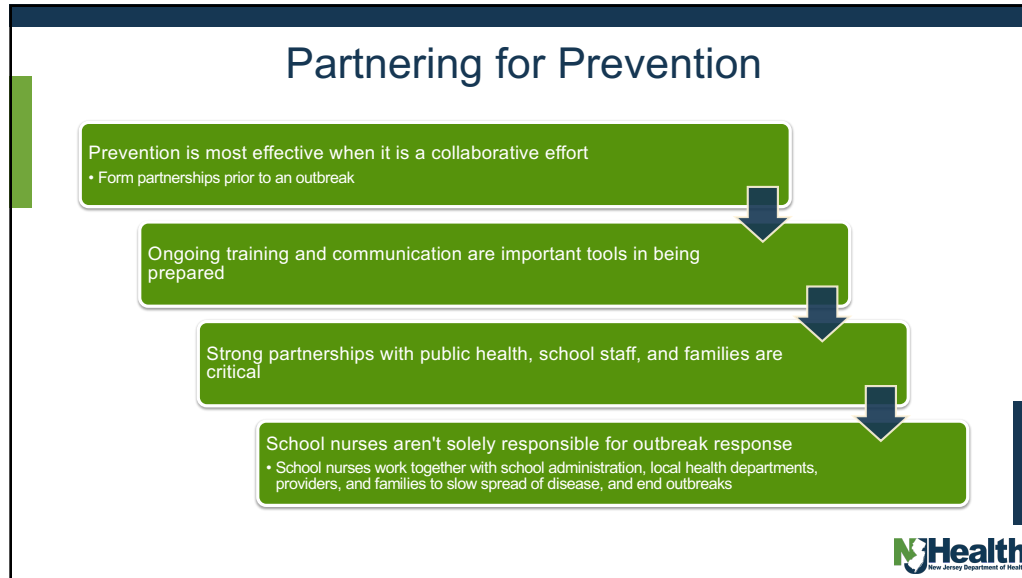
Administrative

Click here to view a letter to clarify legal obligations required by administrators in regard to public health investigations.

RESOURCES

- [Creating Safer and Healthier Classrooms - Tips for Teachers](#)
- [NJDOH Camp Infectionborne Disease Prevention Flyers](#)
- [Centers for Disease Control and Prevention - Healthy Schools](#)
- [Directory of Local Health Departments](#)
- [Epidemiology and Prevention of Vaccine-Preventable Diseases \(Pink Book\)](#)
- [Handwashing](#)
- [Quick Reference Mapset: Reporting Requirements for Communicable Diseases and Work-Related Conditions](#)
- [Disinfection, Ventilation, and Indoor Air Quality](#)
- [Selected EPA Registered Disinfectants](#)
- [Toolkit for Keeping Your Child Care Center Healthy](#)

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Contact Us

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