

Communicable Diseases



Army Public Health Nursing

CLASS OBJECTIVES

Upon completion of this class, you should have an understanding of:

- How infection spreads
- Basic infection control measures in the childcare setting
- Basics of recognizing an ill child including exclusion criteria
- Basic knowledge of common communicable diseases in the childcare setting.

Definitions

Contagious Communicable Infectious

- Describes illnesses that can be passed from one individual to another

Infection

- Describes a situation in which a germ causes disease. Germs include:
 - Bacteria
 - Parasites
 - Viruses
 - Fungi
- It is possible to have an infection without any outward sign of a disease

Contamination

- The presence of infectious microorganisms (germs) in or on the body, environmental surface, articles of clothing, food, or water.

Types of Germs: Virus

Virus

Microscopic organism

Can grow and reproduce only in living cells.
Limited ability to survive outside the body

Few medications to treat viruses (i.e. influenza, herpes)

Examples of viruses:

Influenza

The Common Cold

Measles

Hepatitis

HIV

Varicella (Chicken Pox)

Types of Germs: Bacteria

Bacteria

Larger than a virus

Can survive inside
or outside the body

Often requires
antibiotic for
treatment

Examples of Bacteria:

Streptococcus

Tuberculosis

E coli

Salmonella

Pertussis (whooping
cough)

Meningococcal
Meningitis

Types of Germs: Fungus

Fungus

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graph TD; Fungus[Fungus] --- A["A type of living organism such as yeasts, mildews, molds, as well as mushrooms"]; Fungus --- B["Often on surfaces of the body and can be treated with creams or oral medications"]; Fungus --- C["Examples of fungus: Yeast organism that causes thrush and diaper rash Ringworm Athletes foot"]
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A type of living organism such as yeasts, mildews, molds, as well as mushrooms

Often on surfaces of the body and can be treated with creams or oral medications

Examples of fungus:
Yeast organism that causes thrush and diaper rash
Ringworm
Athletes foot

Types of Germs: Parasite

Parasite

An organism that lives in another organism (host)

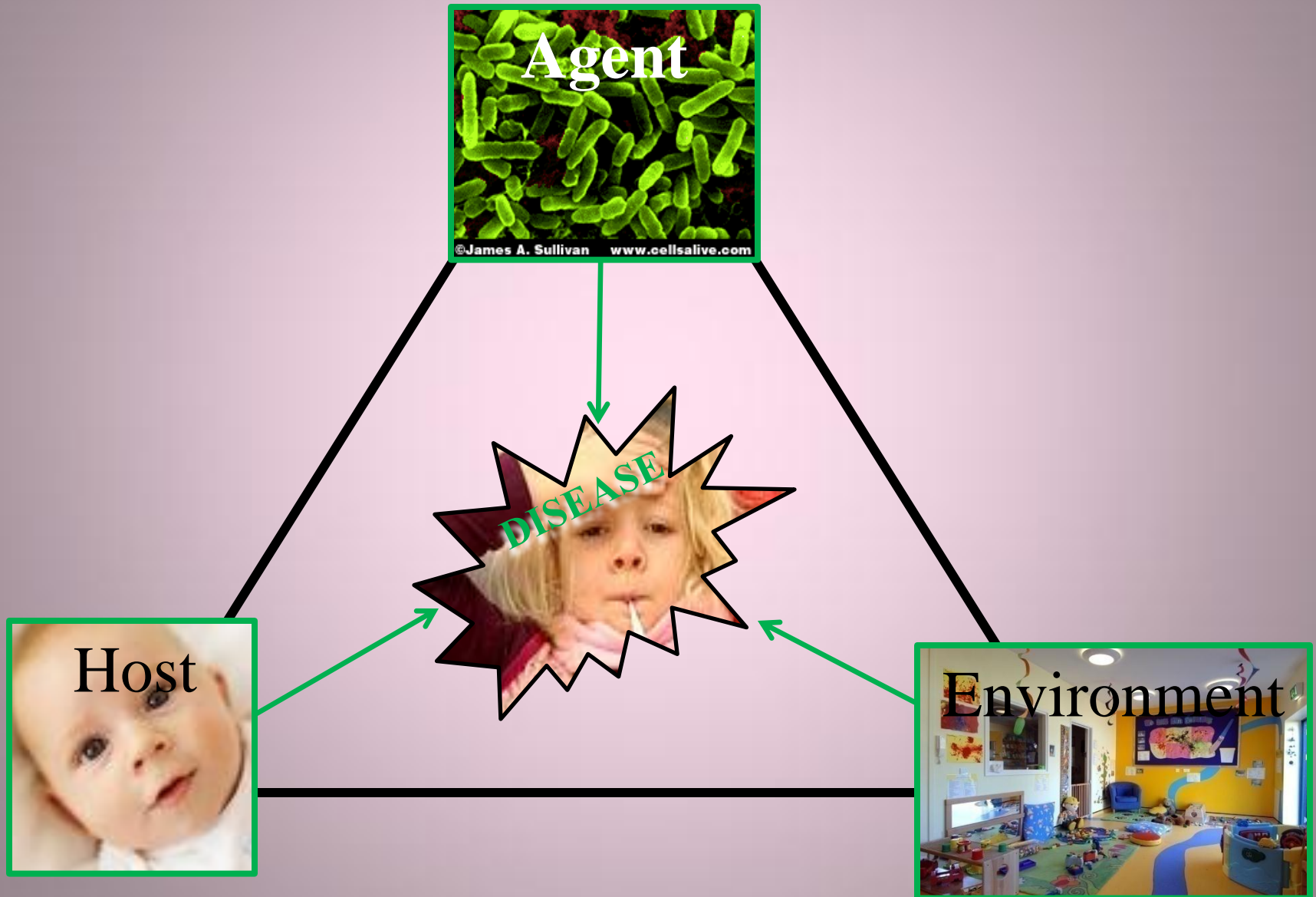
Dependent on the host for survival

Often transmitted through the fecal-oral route (contaminated food or water or person-to-person contact)

Examples of Parasites:

Lice
Scabies
Pinworms

The Triangle of Infection



Why Infants and Children are Vulnerable to Infections

- Their immune systems are still developing
- They are still learning appropriate hygiene skills such as keeping fingers out of nose/eyes/mouth, covering coughs, proper hand washing etc.
- Young infants and some children may not be fully immunized
- Children tend to have closer physical contact due to not practicing social distancing.



Who Is **Most** Vulnerable to Infection?

- **Young infants**
 - More susceptible because their immune systems are immature and don't have a lot of defense (antibodies) built up yet.
 - Some immunity is received from the mother through the placenta and some can be passed through breast milk
- **Children with Special Health Care Needs**
 - Equipment in bodies such as catheters and feeding tubes can capture or carry bacteria



Who is **Most** Vulnerable to Infection?

- **Children with impaired immune systems**
 - Including children with HIV/AIDS, children receiving chemotherapy, children who've had transplant surgery, children who take high-dose steroid therapy for long periods
- **Pregnant Women**
 - Are not necessarily more susceptible themselves, but may pass on certain types of infections to the fetus if the mother is not immune to the disease



How Infection Spreads

- **Airborne (Respiratory)**
 - Spread from an infected person via droplets in the air through coughing, sneezing, and close face to face contact. The droplets are inhaled by another person. Colds, Influenza, Measles, Mumps, and chickenpox are spread this way
- **Direct Contact with people or objects**
 - Many objects can absorb, retain, and carry germs. In child care settings be cautious of surfaces of floors, activity and food tables, diaper changing tables and mats, doorknobs, bathroom surfaces, toys, dress up clothes
 - Skin-to-skin contact can cause the spread of some communicable disease such as impetigo and scabies.
 - Head-to-head contact can facilitate the spread of head lice
 - Shared hats and hairbrushes can spread infections caused by fungus

How Infection Spreads

- **Fecal-Oral Route**

- Fecal matter can get into the mouth when a person touches an area contaminated by feces and then does wash hands adequately to remove the germs
- Diaper changing and frequent mouthing behaviors of infants and small children can easily cause hands, floors, toilets, diaper changing mats, toys, etc to become contaminated with fecal matter
- Germs can spread to many people when someone contaminates food either during or after food preparation
- Examples of disease that can be spread by fecal-oral route: **Hepatitis A, Hand-Foot-and –Mouth Disease, Shigella, Salmonella, and Rotavirus.**

How Infection Spreads

- **Blood, urine, and saliva**

- Most viruses spread in blood, urine, and saliva require intimate contact for transmission to occur
- Some infections such as hepatitis and HIV can spread through contact with contaminated blood with the mucous membranes (i.e. eyes, nose, and mouth) or an open area in the skin such as a cut
- While theoretically possible, it's highly unlikely that a blood borne infection would be spread through biting.
- Some viruses may be spread through contact with saliva such as herpes simplex virus and cytomegalovirus. Good hand washing will help to prevent the spread of these viruses.

Blood Borne Pathogens

Infectious microorganisms in human blood that can cause disease in humans

The three most prevalent blood borne pathogens are Hepatitis B, Hepatitis C, and Human Immunodeficiency Virus (HIV)

In order to contract a blood borne disease, blood or bodily fluids containing blood from an infected person must be directly introduced into the bloodstream. This can happen through a needlestick, a cut or opening in the skin, or through the mucous membranes of the eyes, nose, or mouth.

Casual contact such as hugging and shaking hands does not transmit blood borne pathogens

Hepatitis C Virus (HCV) is the most common chronic blood borne infection in the U.S.

Hepatitis B

HEPATITIS B

General Information



Who is at risk?

Although anyone can get Hepatitis B, some people are at greater risk, such as those who:

- Have sexual contact with an infected person
- Have multiple sex partners
- Have a sexually transmitted disease
- Are men who have sexual encounters with other men
- Inject drugs or share needles, syringes, or other injection equipment
- Live with a person who has Hepatitis B
- Are on hemodialysis
- Are exposed to blood on the job
- Are infants born to infected mothers

What is hepatitis?

"Hepatitis" means inflammation of the liver. The liver is a vital organ that processes nutrients, filters the blood, and fights infections. When the liver is inflamed or damaged, its function can be affected.

Hepatitis is most often caused by a virus. In the United States, the most common types of viral hepatitis are Hepatitis A, Hepatitis B, and Hepatitis C. Heavy alcohol use, toxins, some medications, and certain medical conditions can also cause hepatitis.

What is Hepatitis B?

Hepatitis B is a contagious liver disease that results from infection with the Hepatitis B virus. When first infected, a person can develop an "acute" infection, which can range in severity from a very mild illness with few or no symptoms to a serious condition requiring hospitalization. **Acute** Hepatitis B refers to the first 6 months after someone is exposed to the Hepatitis B virus. Some people are able to fight the infection and clear the virus. For others, the infection remains and leads to a "chronic," or lifelong, illness. **Chronic** Hepatitis B refers to the illness that occurs when the Hepatitis B virus remains in a person's body. Over time, the infection can cause serious health problems.

The best way to prevent Hepatitis B is to get vaccinated.

Is Hepatitis B common?

Yes. In the United States, approximately 1.2 million people have chronic Hepatitis B. Unfortunately, many people do not know they are infected. The number of new cases of Hepatitis B has decreased more than 80% over the last 20 years. An estimated 40,000 people now become infected each year. Many experts believe this decline is a result of widespread vaccination of children.

How is Hepatitis B spread?

Hepatitis B is usually spread when blood, semen, or other body fluids from a person infected with the Hepatitis B virus enter the body of someone who is not infected. This can happen through sexual contact with an infected person or sharing needles, syringes, or other injection drug equipment. Hepatitis B can also be passed from an infected mother to her baby at birth.

Hepatitis B is not spread through breastfeeding, sharing eating utensils, hugging, kissing, holding hands, coughing, or sneezing. Unlike some forms of hepatitis, Hepatitis B is also not spread by contaminated food or water.



Can Hepatitis B be spread through sex?

Yes. In the United States, Hepatitis B is most commonly spread through sexual contact. The Hepatitis B virus is 50–100 times more infectious than HIV and can be passed through the exchange of body fluids, such as semen, vaginal fluids, and blood.

Hepatitis B



Who should get vaccinated against Hepatitis B?

Vaccination is recommended for certain groups, including:

- Anyone having sex with an infected partner
- People with multiple sex partners
- Anyone with a sexually transmitted disease
- Men who have sexual encounters with other men
- People who inject drugs
- People who live with someone with Hepatitis B
- People with chronic liver disease, end stage renal disease, or HIV infection
- Healthcare and public safety workers exposed to blood
- Travelers to certain countries
- All infants at birth

What are the symptoms of acute Hepatitis B?

Not everyone has symptoms with acute Hepatitis B, especially young children. Most adults have symptoms that appear within 3 months of exposure. Symptoms can last from a few weeks to several months and include:

- Fever
- Vomiting
- Dark urine
- Fatigue
- Abdominal pain
- Joint pain
- Loss of appetite
- Grey-colored stools
- Jaundice
- Nausea

What are the symptoms of chronic Hepatitis B?

Many people with chronic Hepatitis B do not have symptoms and do not know they are infected. Even though a person has no symptoms, the virus can still be detected in the blood. Symptoms of chronic Hepatitis B can take up to 30 years to develop. Damage to the liver can silently occur during this time. When symptoms do appear, they are similar to acute infection and can be a sign of advanced liver disease.

How serious is Hepatitis B?

Over time, approximately 15%–25% of people with chronic Hepatitis B develop serious liver problems, including liver damage, cirrhosis, liver failure, and liver cancer. Every year, approximately 3,000 people in the United States and more than 600,000 people worldwide die from Hepatitis B-related liver disease.

How is Hepatitis B diagnosed and treated?

Hepatitis B is diagnosed with specific blood tests that are not part of blood work typically done during regular physical exams. For acute Hepatitis B, doctors usually recommend rest, adequate nutrition, fluids, and close medical monitoring. Some people may need to be hospitalized. Those living with chronic Hepatitis B should be evaluated for liver problems and monitored on a regular basis. Even though a person may not have symptoms or feel sick, damage to the liver can still occur. Several new treatments are available that can significantly improve health and delay or reverse the effects of liver disease.

Can Hepatitis B be prevented?

Yes. The best way to prevent Hepatitis B is by getting vaccinated. For adults, the Hepatitis B vaccine is given as a series of 3 shots over a period of 6 months. The entire series is needed for long-term protection. Booster doses are not currently recommended.

For more information

Talk to your health professional, call your health department, or visit www.cdc.gov/hepatitis.



DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Disease Control and Prevention
Division of Viral Hepatitis



www.cdc.gov/hepatitis

Hepatitis C

HEPATITIS C

General Information



Can Hepatitis C be prevented?

Yes. To reduce the risk of becoming infected with the Hepatitis C virus:

- Do not share needles or other equipment to inject cosmetic substances, drugs, or steroids
- Do not use personal items that may have come into contact with an infected person's blood, such as razors, nail clippers, toothbrushes, or glucose monitors
- Do not get tattoos or body piercings from an unlicensed facility or in an informal setting

Is there a vaccine for Hepatitis C?

Although there is currently no vaccine to prevent Hepatitis C, research is being conducted to develop one.

What is hepatitis?

"Hepatitis" means inflammation of the liver. The liver is a vital organ that processes nutrients, filters the blood, and fights infections. When the liver is inflamed or damaged, its function can be affected.

Hepatitis is most often caused by a virus. In the United States, the most common types of viral hepatitis are Hepatitis A, Hepatitis B, and Hepatitis C. Heavy alcohol use, toxins, some medications, and certain medical conditions can also cause hepatitis.

What is Hepatitis C?

Hepatitis C is a contagious liver disease that results from infection with the Hepatitis C virus. When first infected, a person can develop an "acute" infection, which can range in severity from a very mild illness with few or no symptoms to a serious condition requiring hospitalization.

Acute Hepatitis C is a short-term illness that occurs within the first 6 months after someone is exposed to the Hepatitis C virus. For reasons that are not known, 15%–25% of people "clear" the virus without treatment. Approximately 75%–85% of people who become infected with the Hepatitis C virus develop "chronic," or lifelong, infection.

Chronic Hepatitis C is a long-term illness that occurs when the Hepatitis C virus remains in a person's body. Over time, it can lead to serious liver problems, including liver damage, cirrhosis, liver failure, or liver cancer (see chart).

How is Hepatitis C spread?

Hepatitis C is usually spread when blood from a person infected with the Hepatitis C virus enters the body of someone who is not infected. Today, most people become infected with Hepatitis C by sharing needles or other equipment to inject drugs. Before widespread screening of the blood supply began in 1992, Hepatitis C was also commonly spread through blood transfusions and organ transplants. Although uncommon, outbreaks of Hepatitis C have occurred from blood contamination in medical settings.

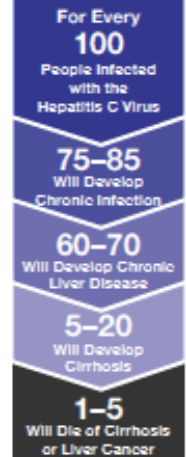
Can Hepatitis C be spread through sex?

Yes, although scientists do not know how frequently this occurs. Having a sexually transmitted disease or HIV, sex with multiple partners, or rough sex appears to increase a person's risk for Hepatitis C. There also appears to be an increased risk for sexual transmission of Hepatitis C among gay men who are HIV-positive.

Can a person get Hepatitis C from a tattoo or piercing?

There is little evidence that Hepatitis C is spread by getting tattoos in licensed, commercial facilities. Whenever tattoos or body piercings are given in informal settings or with non-sterile instruments, transmission of Hepatitis C and other infectious diseases is possible.

Progression of Hepatitis C



Hepatitis C



How is Hepatitis C treated?

Since acute Hepatitis C rarely causes symptoms, it often goes undiagnosed and therefore untreated. When it is diagnosed, doctors recommend rest, adequate nutrition, fluids, and antiviral medications. People with chronic Hepatitis C should be monitored regularly for signs of liver disease. Even though a person may not have symptoms or feel sick, damage to the liver can still occur. Antiviral medication can be used to treat some people with chronic Hepatitis C, although not everyone needs or can benefit from treatment. For many, treatment can be successful and results in the virus no longer being detected.

What can people with Hepatitis C do to take care of their liver?

People with chronic Hepatitis C should see a doctor regularly. They also should ask their health professional before taking any prescriptions or over-the-counter medications—including herbal supplements or vitamins—as they can potentially damage the liver. People with chronic Hepatitis C should also avoid alcohol since it can accelerate liver damage.

How common is Hepatitis C?

An estimated 3.2 million people in the United States have chronic Hepatitis C. Most are unaware of their infection. Each year, about 17,000 Americans become infected with Hepatitis C.

How serious is Hepatitis C?

Chronic Hepatitis C is a serious disease that can result in long-term health problems, including liver damage, liver failure, and liver cancer. Approximately 12,000 people die every year from Hepatitis C-related liver disease.

What are the symptoms of Hepatitis C?

Many people with Hepatitis C do not have symptoms and do not know they are infected. Even though a person has no symptoms, the virus can still be detected in the blood.

If symptoms occur with acute infection, they can appear anytime from 2 weeks to 6 months after exposure. Symptoms of chronic Hepatitis C can take up to 30 years to develop. Damage to the liver can silently occur during this time. When symptoms do appear, they often are a sign of advanced liver disease. Symptoms for both acute and chronic Hepatitis C can include fever, fatigue, loss of appetite, nausea, vomiting, abdominal pain, dark urine, grey-colored stools, joint pain, and jaundice.

How is Hepatitis C diagnosed?

Doctors can diagnose Hepatitis C using specific blood tests that are not part of blood work typically done during regular physical exams. Typically, a person first gets a screening test that looks for "antibodies" to the Hepatitis C virus. Antibodies are chemicals released into the bloodstream when a person becomes infected. The antibodies remain in the bloodstream, even if the person clears the virus. If the screening test is positive for Hepatitis C antibodies, different blood tests are needed to determine whether the infection has been cleared or has become a chronic infection.

Who should get tested for Hepatitis C?

Testing for Hepatitis C is recommended for certain groups, including people who:

- Currently inject drugs
- Injected drugs in the past, even if it was just once or occurred many years ago
- Have HIV infection
- Have abnormal liver tests or liver disease
- Received donated blood or organs before 1992
- Have been exposed to blood on the job through a needlestick or injury with a sharp object
- Are on hemodialysis

For more information

Talk to your health professional, call your health department, or visit www.cdc.gov/hepatitis.



DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Disease Control and Prevention
Division of Viral Hepatitis





HIV/AIDS: The Basics

HIV/AIDS

What Is HIV/AIDS?

The **human immunodeficiency virus**, or **HIV**, is the virus that causes HIV infection. During HIV infection, the virus attacks and destroys the infection-fighting **CD4 cells** of the body's immune system. Loss of CD4 cells makes it difficult for the immune system to fight infections.

Acquired immunodeficiency syndrome, or **AIDS**, is the most advanced stage of HIV infection.

How is HIV transmitted?

HIV is transmitted (spread) through the blood, semen, genital fluids, or breast milk of a person infected with HIV. Having **unprotected sex** or sharing drug injection equipment (such as needles and syringes) with a person infected with HIV are the most common ways HIV is transmitted.

You can't get HIV by shaking hands, hugging, or closed-mouth kissing with a person who is infected with HIV. And you can't get HIV from contact with objects such as toilet seats, doorknobs, dishes, or drinking glasses used by a person infected with HIV.

Even though it takes many years for symptoms of HIV to develop, a person infected with HIV can spread the virus at any stage of HIV infection. Detecting HIV early after infection and starting treatment with anti-HIV medications before symptoms of HIV develop can help people with HIV live longer, healthier lives. Treatment can also reduce the risk of **transmission of HIV**.

What is the treatment for HIV?

Antiretroviral therapy (ART) is the recommended treatment for HIV infection. ART involves taking a combination (**regimen**) of three or more anti-HIV medications daily. ART prevents HIV from multiplying and destroying infection-fighting CD4 cells. This helps the body fight off life-threatening infections and cancer.

ART can't cure HIV, but anti-HIV medications help people infected with HIV live longer, healthier lives.

Can treatment prevent HIV from advancing to AIDS?

Yes. Treatment with anti-HIV medications prevents HIV from multiplying and destroying the immune system. This helps the body fight off life-threatening infections and cancers and prevents HIV from advancing to AIDS.

Terms Used in This Fact Sheet:

AIDS: Acquired immunodeficiency syndrome. AIDS is the most advanced stage of HIV infection. AIDS is diagnosed when a person infected with HIV has a CD4 count of less than 200 cells/mm³ or has an AIDS-defining condition.

AIDS-defining condition: Any one of several illnesses that can lead to a diagnosis of AIDS in a person infected with HIV. AIDS is the most advanced stage of HIV infection.

Antiretroviral therapy (ART): The recommended treatment for HIV. ART involves taking a combination of three or more anti-HIV medications from at least two different drug classes every day to control the virus.

CD4 cells: Also called T cells or CD4+ T cells. Infection-fighting white blood cells of the immune system. HIV destroys CD4 cells, making it harder for the body to fight infections.

CD4 count: The number of CD4 cells in a sample of blood. A CD4 count measures how well the immune system is working.

HIV: Human immunodeficiency virus. HIV is a virus that attacks the immune system, putting people infected with HIV at risk for life-threatening infections and cancer. AIDS is the most advanced stage of HIV infection.

Opportunistic infection: An infection that occurs more frequently or is more severe in people with weakened immune systems (such as people with HIV or people receiving chemotherapy) than in people with healthy immune systems.

Regimen: A combination of three or more anti-HIV medications from at least two different drug classes.

Transmission of HIV: The spread of HIV from a person infected with HIV to another person through the infected person's blood, semen, genital fluids, or breast milk.

Unprotected sex: Sex without using a condom.

It takes many years, but without treatment, HIV infection can advance to AIDS. A diagnosis of AIDS requires that a person infected with HIV have either:

- A **CD4 count** of less than 200 cells/mm³. (The CD4 count of a healthy person ranges from 500 to 1,200 cells/mm³.)

OR

- An **AIDS-defining condition**. (AIDS-defining conditions include **opportunistic infections** and cancers that are life-threatening in a person with HIV. Having an AIDS-

defining condition signals that a person's HIV infection has advanced to AIDS.)

What illnesses are considered AIDS-defining conditions?

The Centers for Disease Control and Prevention (CDC) considers several illnesses AIDS-defining conditions.

Pneumocystis jiroveci pneumonia, tuberculosis, and toxoplasmosis are examples of AIDS-defining conditions.

For more information:

Contact an AIDSinfo health information specialist at 1-800-448-0440 or visit <http://aidsinfo.nih.gov>. See your health care provider for medical advice.

HIV/AIDS

Universal Precautions

Treating blood and certain body fluids as if they may contain HIV, Hepatitis B, or other blood borne pathogens.

Using personal protective equipment (PPE) such as gloves to reduce the risk of exposure to blood, body fluids containing visible blood, and other fluids to which universal precautions apply.

Universal precautions do not apply to feces, nasal secretions, sputum, sweat, tears, urine, and vomit unless they contain visible blood.

Gloves do not need to be worn when feeding an infant a bottle of breast milk.

In the childcare setting, gloves are the primary protective barrier that is available in all rooms for childcare providers

Protecting Yourself From Blood borne Pathogens

Assume everyone, including the children in your care are infected, by practicing universal precautions.

Always use PPE such as disposable latex gloves when coming into contact with blood or other bodily fluids

Always wash your hands after removing gloves

Get vaccinated against Hepatitis B. The Hepatitis B Vaccination Series is offered free through Fort Riley Occupational Health

If you are exposed to a bodily fluid, **immediately** wash the exposed area with water and report to your supervisor. Do not wait until the end of the day to report the exposure

Common Exposure Incidents in the Childcare Setting Include:

- **Nosebleeds**
- **Diaper changes**
- **Injuries**
sustained at play



We Are All Susceptible Hosts for Communicable Disease. What Can We do to Stop the Spread of Disease???



Health Requirements for Children



- ✓ Be free of communicable disease
- ✓ Have current immunizations
- ✓ An immunization waiver can only be completed by the Chief of Preventive Medicine
- ✓ Health assessment completed by parents and medical provider within the past calendar year or within 30 days of enrollment
- ✓ Special Needs Accommodation Process meeting to address specific health needs of a child, as determined by Army Public Health Nurse.
- ✓ Medical Action Plans as required for asthma, seizures, food allergies, etc.

Vaccine-Preventable Diseases and the Vaccines that Prevent Them

Disease	Vaccine	Disease spread by	Disease symptoms	Disease complications
Chickenpox	Varicella vaccine protects against chickenpox.	Air, direct contact	Rash, tiredness, headache, fever	Infected blisters, bleeding disorders, encephalitis (brain swelling), pneumonia (infection in the lungs)
Diphtheria	DTaP* vaccine protects against diphtheria.	Air, direct contact	Sore throat, mild fever, weakness, swollen glands in neck	Swelling of the heart muscle, heart failure, coma, paralysis, death
Hib	Hib vaccine protects against <i>Haemophilus influenzae</i> type b.	Air, direct contact	May be no symptoms unless bacteria enter the blood	Meningitis (infection of the covering around the brain and spinal cord), intellectual disability, epiglottitis (life-threatening infection that can block the windpipe and lead to serious breathing problems), pneumonia (infection in the lungs), death
HepA	HepA vaccine protects against hepatitis A.	Personal contact, contaminated food or water	May be no symptoms, fever, stomach pain, loss of appetite, fatigue, vomiting, jaundice (yellowing of skin and eyes), dark urine	Liver failure
HepB	HepB vaccine protects against hepatitis B.	Contact with blood or body fluids	May be no symptoms, fever, headache, weakness, vomiting, jaundice (yellowing of skin and eyes), joint pain	Chronic liver infection, liver failure, liver cancer
Flu	Flu vaccine protects against influenza.	Air, direct contact	Fever, muscle pain, sore throat, cough, extreme fatigue	Pneumonia (infection in the lungs)
Measles	MMR** vaccine protects against measles.	Air, direct contact	Rash, fever, cough, runny nose, pinkeye	Encephalitis (brain swelling), pneumonia (infection in the lungs), death
Mumps	MMR** vaccine protects against mumps.	Air, direct contact	Swollen salivary glands (under the jaw), fever, headache, tiredness, muscle pain	Meningitis (infection of the covering around the brain and spinal cord), encephalitis (brain swelling), inflammation of testicles or ovaries, deafness
Pertussis	DTaP* vaccine protects against pertussis (whooping cough).	Air, direct contact	Severe cough, runny nose, apnea (a pause in breathing in infants)	Pneumonia (infection in the lungs), death
Polio	IPV vaccine protects against polio.	Air, direct contact, through the mouth	May be no symptoms, sore throat, fever, nausea, headache	Paralysis, death
Pneumococcal	PCV vaccine protects against pneumococcus.	Air, direct contact	May be no symptoms, pneumonia (infection in the lungs)	Bacteremia (blood infection), meningitis (infection of the covering around the brain and spinal cord), death
Rotavirus	RV vaccine protects against rotavirus.	Through the mouth	Diarrhea, fever, vomiting	Severe diarrhea, dehydration
Rubella	MMR** vaccine protects against rubella.	Air, direct contact	Children infected with rubella virus sometimes have a rash, fever, swollen lymph nodes	Very serious in pregnant women—can lead to miscarriage, stillbirth, premature delivery, birth defects
Tetanus	DTaP* vaccine protects against tetanus.	Exposure through cuts in skin	Stiffness in neck and abdominal muscles, difficulty swallowing, muscle spasms, fever	Broken bones, breathing difficulty, death

* DTaP combines protection against diphtheria, tetanus, and pertussis.

** MMR combines protection against measles, mumps, and rubella.

Health Requirements for Staff

- ✓ Must be able to walk, bend, stoop, and stand for prolonged periods
- ✓ Must be able to lift 40 pounds
- ✓ Annual PPD or TB questionnaire and Occupational Health clearance
- ✓ Must be in good health as evidenced by the pre-employment physical
- ✓ Immunizations as determined by Occupational Health and Health Consultant (APHN)



Follow Exclusion Criteria per AR 608-10 and local SOP's

- The purpose of exclusion criteria is to:
 - Exclude children with communicable disease to reduce the risk of disease transmission.



Illness Criteria for Denial of Service: Fever

- **Temperature is excess of 100.5° F axillary (under the arm) for children under 3 months of age**
- **Temperature in excess of 101° F axillary for children over 3 months of age.**
- **Axillary temperatures are accurate only when the thermometer remains within the closed armpit for the time period recommended by the manufacturer of the thermometer.**
- **An oral temperature can be checked on a child who is over 4 years of age. If the temperature is in excess of 101° F the child needs to be sent home**

Illness Criteria for Denial of Service: Fever

- Keep in mind that body temperature can increase due to overdressing, a hot environment, response to an infection, or reaction from a medication
- Never check a rectal temperature in CYSS
- Exclude child for 24 hours after the child no longer has a fever, without the use of fever reducing medications such as Tylenol or Ibuprofen.



Illness Criteria for Denial of Service: Vomiting

- More than 2 episodes in a 24 hour time period.
- May return to care 24 hours after the last episode of vomiting.



Illness Criteria for Denial of Service: Diarrhea

- American Academy of Pediatrics defines diarrhea as more watery stools or decreased form of stool that is not associated with changes in diet
- Exclusion is required for all diapered children whose stool is not contained in the diaper
- Exclusion is required for all toilet-trained children if the diarrhea is causing “accidents”
- Additionally, diapered children with diarrhea should be excluded if they have diarrhea more than 2 times.
- Children may return to care 24 hours after diarrhea resolves
- Blood or mucous in stool



Illness Criteria for Denial of Service: Persistent Cough

- Exclude if the child has a persistent cough that interferes with inability to participate in activities, meals, etc.
- Exclude for rapid or difficulty breathing
- Exclude for wheezing if not already evaluated and treated
- Exclude for bluish coloring around mouth/lips, or bluish coloring of nail beds.
- **The above criteria may indicate the immediate need to call 911**
- May return to care when exclusion criteria has resolved.

Illness Criteria for Denial of Service: Rash

- Per Fort Riley Health SOP a child must be excluded for any rash of unknown origin.
- Child may return to care when a medical provider has determined that the illness is not a communicable disease OR when the rash has completely subsided.



Illness Criteria for Denial of Service: Draining Wounds

- A child should be excluded from care if he or she has a wound that is open and draining.
- If the wound can be covered with a bandage, and the drainage does not soak through or around the bandage, the child may stay in care
- Immediately notify the parent/guardian if the child develops a fever, has increased redness or swelling around the wound, increased drainage, or foul smelling drainage from the wound.

Illness Criteria for Denial of Service: Drainage from the Eyes

- Exclude child from care if discharge is noted from the eyes. Wipe the eyes first, from inside to outside (start where the eye meets the bridge of the nose). Clean each eye with a separate clean tissue. If drainage returns, then exclude child
- May need to exclude or notify parents as soon as possible if child complains of eye itching or irritation, eye swelling, or eye watering.
- May return to care when eye drainage is no longer present



Illness Criteria for Denial of Service: Inability to Participate in Daily Activities

- Exclude for the following:
 - Not participating in activities due to complaints of not feeling well
 - Behavior changes such as lethargy (tired, lack of energy)
 - Wanting to rest on cot and not participate
 - Refusing to eat do to complaints of not feeling well



Common Communicable Diseases Requiring Exclusion: Impetigo

- Skin infection caused by bacteria. The germs cause oozing, leading to honey-colored crusted lesions.
- Most often found on the face around the nose or mouth
- Spread through direct contact with an infected person or from surfaces that are contaminated such as door knobs.
- Exclude until antibiotic has been started and child no longer has draining lesions
- Controlled though good hand-washing techniques, clipping fingernails, cleaning and sanitizing surfaces, and covering lesions.



Common Communicable Diseases Requiring Exclusion: Scabies

- An infestation of the skin caused by the human itch mite
- Signs and symptoms include rash, severe itching (worse at night), red bumps or blisters found on skin folds between the fingers, toes, wrists, elbows, armpits, waistline, thighs, penis, abdomen, and lower buttocks
- Incubation period is 4 to 6 weeks for someone who has never been infected and 1 to 4 days for previous infections
- Spread through person-to-person contact and sharing of bedding, towels, and clothing.



Common Communicable Diseases Requiring Exclusion: Scabies

- May return to care after treatment has been completed (usually overnight)
- Medications used to treat scabies are called scabicides
- In the childcare setting launder all linens (cot sheets, blankets, etc.), stuffed animals, and any clothing that may have been worn next to the skin during the 3 days before the start of treatment. Dress up clothes should be laundered.
- Scabies mite generally does not survive more than 2 to 3 days away from human skin.



Common Communicable Diseases Requiring Exclusion: Ringworm

- A fungal infection that develops in the top layer of skin
- Characterized by an itchy, red circular rash with healthy-looking skin in the middle.
- Gets its name from the characteristic ring that can appear. Has nothing to do with a worm under the skin
- Spread through direct person-to-person contact by sharing combs, brushes, towels, clothing, or bedding
- Spread through contact with infected humans, animals (eg, cats, dogs), or contaminated surfaces or objects
- Mildly contagious

Common Communicable Diseases Requiring Exclusion: Ringworm

- Controlled through early treatment of infected people, covering skin lesions, and not sharing bedding, clothing, combs, hairbrushes, etc.
- May return to care once treatment has been started.....typically an anti fungal cream applied topically such as Lotrimin.
- In the childcare setting launder all bedding, dress up clothes, stuffed animals, etc.



Common Communicable Diseases Requiring Exclusion: Chickenpox

- An illness with rash and fever caused by the varicella-zoster virus.
- A vaccine preventable disease. The first dose of varicella vaccine is given at 12 months and second dose between 4 and 6 years.
- The virus can stay for a lifetime in an inactive form in the body's nerve cells.
- Shingles is the condition that occurs when someone has fully recovered from chickenpox and, at another time the virus becomes active.
- Chickenpox is a highly contagious illness

Common Communicable Diseases Requiring Exclusion: Chickenpox

- Signs and symptoms include a rash with small red, fluid filled blisters that will form scabs in 3 to 4 days after occurring
- Symptoms also may include fever, runny nose, and cough
- Chickenpox is spread primarily from direct contact from fluid inside the blisters of an infected person and airborne via mouth or nose droplets from coughing or sneezing.
- Good hand washing and surface cleaning and sanitation is critical
- Pregnant women should be referred to their health care professional within 24 hours after exposure to chickenpox.



Common Communicable Diseases Requiring Exclusion: Head Lice

- Small, tan-colored insects that:
 - Live on blood they draw from the scalp
 - Live for days or weeks depending on temperature and humidity
 - Crawl, but do not jump or fly
 - Can't live for more than 48 hours away from the scalp.
 - Do not carry disease
- Signs and symptoms include itching of the scalp and back of neck. The eggs (nits) of head lice may be glued to the hair, mostly seen behind the ears and at or near the nape of the neck.



Common Communicable Diseases Requiring Exclusion: Head Lice

- Incubation period is 10 to 14 days from laying to hatching of eggs
- Contagious period occurs as long as there are lice
- Spread through direct contact with infested hair, sharing of hats/combs/brushes
- Per AR 608-10, may not return to childcare until lice are under treatment.
- Medications that kill lice are called pediculocides.



Common Communicable Diseases Requiring Exclusion: Strep Throat

- Disease caused by group A Streptococcus bacteria
- Signs and symptoms can include sore throat, fever, stomachache, headache, and swollen lymph nodes in neck.
- Incubation period is 2 to 5 days
- Contagious period: Risk of spread is reduced when a person diagnosed with strep throat is treated with antibiotics
- Spread through direct contact, respiratory droplets, and close contacts.
- Hand washing, cleaning, and sanitizing surfaces is pertinent to stop the spread.

Common Communicable Diseases Requiring Exclusion: Strep Throat

- Can not be admitted to group setting until after 24 hours after the start of antibiotic treatment.
- Scarlet fever is a fine red rash that's caused by a strep infection. The rash is usually more prominent in the armpits and groin area.



Common Communicable Diseases Requiring Exclusion: Conjunctivitis

- Several types of conjunctivitis (pink eye) including:
 - **Bacterial:** Eye(s) may be red, pink, itchy, painful, and have green/yellow discharge. Eye(s) may be crusted shut in the morning
 - **Viral:** Eye(s) may be pink, swollen, and sensitive to light.
 - **Allergic:** Eye(s) may be itchy, red, and have excessive tearing. Usually occurs in both eyes
 - **Chemical:** Eye(s) may be red, and watery especially after swimming in chlorinated water
- Spread by hands that have been contaminated with the discharge from eyes.



Common Communicable Diseases Requiring Exclusion: Conjunctivitis

- Controlled through good hand hygiene and keeping hands away from the eyes, nose, and mouth
- Sanitation of objects that are commonly touched by hands such as tables, doorknobs, telephones, cots, and toys.
- Exclude from childcare until the eye is no longer draining.

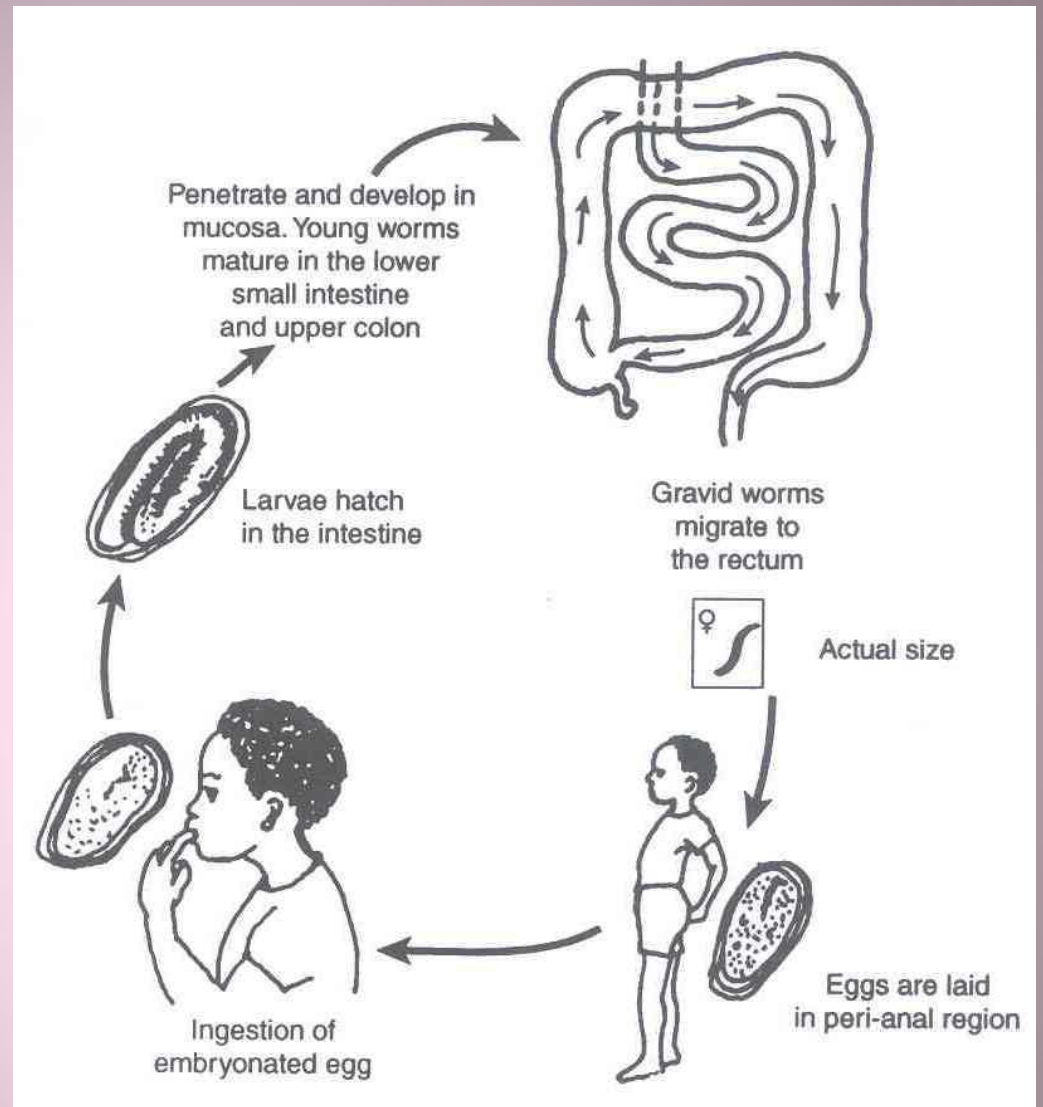
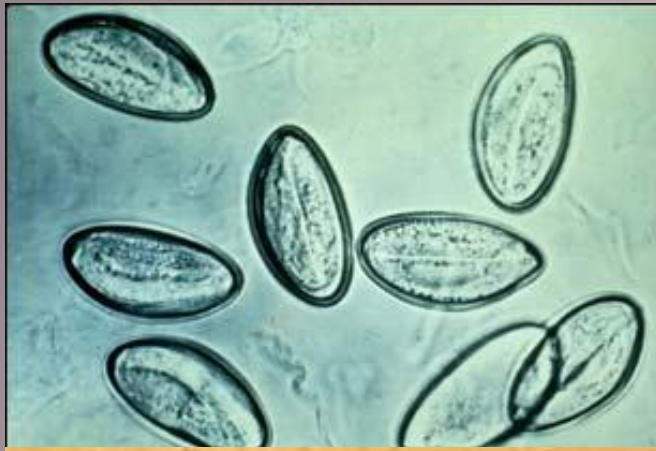


Common Communicable Diseases Requiring Exclusion: Pinworms

- Small white, threadlike worms that live in the large intestine
- Cause itching and irritation around the anal or vaginal area
- Incubation period: 1 to 2 months or longer
- Contagious period: As long as the female worms are discharging eggs to the skin around the anus
- How are they spread???
 - Fecal-oral route
 - Directly or indirectly by sharing toys, bedding, clothing, toilet seats, etc.
 - Pinworm eggs remain infective for 2 to 3 weeks in indoor environments

Common Communicable Diseases Requiring Exclusion: Pinworms

- How to control spread:
 - Good hand washing is the most important
 - Treatment with oral medicine once or repeated in 2 weeks may be necessary for the whole family and group of children who share a common environment
- Role of caregivers:
 - Report suspected infection immediately
 - Wash toys per protocol
 - Clean and sanitize surfaces used for eating, toileting, hand washing, diapering, etc.
 - Wash hands
- Exclude from childcare until for 24 hours after treatment



PINWORMS

A Child Meets Exclusion Criteria. Now What???

- CYSS personnel will immediately notify the parent or parent-designee should a child become ill or injured while in CYSS care
- Children who are ill should be placed in the designated isolation area, away from other children until the arrival of the parent or parent-designee. Typically should not be longer than 60 minutes.
- Child should never be left unattended in the isolation area.
- Offer age appropriate toys/activities for child, if he or she feels well enough



CHILD YOUTH AND SCHOOL SERVICES
CHILD ILLNESS/INJURY READMISSION RECORD

Child's Name _____ Date & Time _____ Center _____

Your child is being excluded from CYSS for the following reason:

- | | |
|--|---|
| <input type="checkbox"/> Elevated Body Temperature of _____ | <input type="checkbox"/> Loose Stools (_____ times in _____ hours) |
| <input type="checkbox"/> Rash | <input type="checkbox"/> Vomiting (_____ times in _____ hours) |
| <input type="checkbox"/> Unhealed Sore | <input type="checkbox"/> Eyes/Ear's red or draining |
| <input type="checkbox"/> Continued Cough | <input type="checkbox"/> Injury (see comments section below) |
| <input type="checkbox"/> Not participating in daily activities | |

CDC Director's Signature Parent Signature

Comments: _____

Parents Instructions: Your child must meet the readmission guidelines below when he/she returns to care. Many childhood illnesses are contagious, and sometimes we will request that your child sees a health care provider, however it is not mandatory. Children may be readmitted to CYSS without a medical statement providing they meet the following criteria found in AR 608-10:

- a. Fever has been absent for 24 hours.
- b. Vomiting or diarrhea has subsided for 24 hours.
- c. Strep throat has been under treatment for 24 hours.
- d. Chickenpox lesions are all crusted over, which usually takes 5 to 6 days after onset of rash.
- e. Scabies has been under treatment for 24 hours.
- f. Lice are under treatment and NO nits are present.
- g. Pinworm treatment was administered 24 hours prior.
- h. Conjunctivitis has been treated with medication for 24 hours and there is no discharge from the eyes.
- i. Ringworm is under treatment for 24 hours and area is covered with a bandage or clothing (if at all possible).
- j. Lesions from impetigo are no longer weeping and the child has been under treatment for 24-48 hr.
- k. There are no weeping/drainage sores or wounds.
- l. Child has received antibiotics for 24 hours outside CYSS prior to administration by CYSS personnel.
- m. Child has received at least one dose of non-antibiotic prescription medication and has been observed by the parent for no less than 20 minutes after the dose.
- n. Child has completed the contagious stage of the illness. A note from the doctor may be requested.
- o. The child is well enough to participate in daily activities.

THANK YOU!

If your child needs to be seen by a physician, please call the clinic before taking them in. Please have the doctor complete this form and bring it with you when the child returns to CYSS/FCC.

.....
DOCTOR'S STATEMENT

I have examined the named child and have made the following conclusions:

This child has a contagious illness: YES _____ NO _____

DIAGNOSIS: _____

CYSS READMISSION GUIDELINES: [Note: A physician's recommendation may not override AR 608-10 guidelines.]

This child may return to CYSS on: _____

Comments: _____

Physician's Signature & Stamp

Complete an
Exclusion
Form and
include as
much
information
as possible
for the
parent!

Readmission Following Illness

When can a child be readmitted to care?

- After treatment has begun
- The contagious stage of the illness has passed as defined by the installation health SOP (4-3 Readmission Following Illness)
- Child is able to physically function in the program setting



Example of Exposure Notice

Your Child May Have Been Exposed to Molluscum Contagiosum



© The Nemours Foundation/KidsHealth®

What is Molluscum Contagiosum?

- A skin disease caused by a virus, somewhat similar to warts

What are the Signs or Symptoms:

- Small round pink, white, or skin-colored bumps on the skin, often with a tiny, hard, indented, seed-like center.
- Can appear alone as a single bump or in groups or clusters.

How it's spread:

- Person-to-person through close contact
- Through sharing of inanimate objects such as towels

Preventing Spread:

- Do not touch, scratch, or rub growths.
- Wash Hands frequently
- Cover areas of growths with clothing or bandage
- Do not share towels, clothing, or personal items

Treatment:

- Usually goes away on it's own after a few months
- Sometimes treatment such as freezing or scraping of the growths is used

Incubation Period:

Usually between 2 and 7 weeks
Contagious period is unknown

Exclusion from group setting:

No

*Mildly contagious and most often spread to other areas of the affected child's body, rather than to other children.

Parent Information

- ✓ Information about communicable disease must be shared with all parents
- ✓ Place a copy in each child's cubby, or hand each parent a copy.
- ✓ Important for parents to know:
 - ✓ Signs and symptoms to watch for
 - ✓ The period of time the disease can be spread
 - ✓ How the disease is spread



Pink Eye Facts for Parents & Teachers

Conjunctivitis, an inflammation of the outermost layer of the eye, is commonly called "pink eye," although in reality any number of conditions can make the eye look pink or red.

Conjunctivitis can occur in adults, but most often occurs in young children, who are more vulnerable to infection. In fact, pink eye epidemics often spread rapidly through classrooms and day care centers.

In such communal settings you need to take extra precautions to prevent conjunctivitis, such as disinfectant spray use and frequent hand washing.

Types of Conjunctivitis

You should see an eye doctor to determine if your child has conjunctivitis or another ailment. If conjunctivitis is the problem, the way the eyes look and feel will provide clues about which type it is:

- **Viral conjunctivitis** usually affects only one eye, which has excessive watering and a light discharge. Crusting on eyelids sometimes occurs. Viral conjunctivitis is contagious, and like other viruses, antibiotics can't treat it. Unless there's a special reason to do so, eye doctors don't normally prescribe medication for viral conjunctivitis, because usually it clears up on its own in a few days or weeks.
- **Bacterial conjunctivitis** often spreads to both eyes and causes a heavy discharge, sometimes greenish. Crusting may appear on eyelids. Bacterial conjunctivitis is contagious. Antibiotic eye ointments or drops may help eliminate it.
- **Allergic conjunctivitis** causes itching, redness and excessive tearing in both eyes. The nose also may be stuffy, itchy and runny. Allergic conjunctivitis is not contagious; it occurs when irritants such as allergens, dust and smoke are in the environment. Artificial tears may dilute irritants in the eye's tear film, and antihistamine allergy pills or eyedrops also may help control symptoms.

A burning feeling and light sensitivity may also occur. For all types, warm compresses placed on the outside of eyelids and lubricating eyedrops may help eyes feel a little better.

Conjunctivitis is a common and easily treatable problem, which generally has no lasting effects and is not sight-threatening.

How to Prevent the Spread of Pink Eye


Because children are in close contact in day care centers and classrooms, it's difficult to avoid the spread of bacteria and viruses causing pink eye.

Teachers, school nurses and day care supervisors should encourage parents to notify them if a child has pink eye so classrooms and other shared environments can be sanitized.

Parents should minimize exposure by keeping their child with pink eye home until the contagious stage has passed. The child's doctor can advise when the contagious stage has passed, usually three to five days after a diagnosis.

Tips to prevent a pink eye outbreak:

- Wash your hands frequently, and encourage children to do the same. Soap should always be available.
- Never allow personal items, including hand towels, to be shared at school or at home.
- Encourage children to use tissues and cover their mouths and noses when they sneeze or cough.
- Discourage eye rubbing and touching, to avoid spread of bacteria and viruses. Use antiseptic solutions constantly to wipe common toys, table tops, drinking fountains, faucet handles, etc.



This doctor-reviewed information was adapted from www.allaboutvision.com/conditions/conjunctivitis.htm. Please see the article for more complete information.

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Hand Washing

One of the most important ways to prevent the spread of germs!!

Signs indicating hand washing procedures should be posted in all bathrooms and in all rooms with sinks.



When to Wash Hands

- When you come in from outside
- Before and after
 - Eating
 - Giving medication
 - Playing in water used by more than one person, such as a water table
- After
 - Diapering
 - Using the toilet
 - Handling any body fluid
 - Handling uncooked food, especially raw meat and poultry
 - Contact with animals or cleaning animal cages, etc.
 - Handling trash or garbage
 - Removing gloves



Other Housekeeping Reminders

- No food or drink allowed in the diaper changing area. May have a cup of water with a lid, or a bottle of water in the classroom, but no other drinks are acceptable.
- Don't apply cosmetics or contacts in the child care area
- Clean up all spills immediately
- Toilet rooms and fixtures should be sanitary and odor-free at all times
- Dirty linen must be separated from storage of clean linen, food, and other supplies and will be inaccessible to children

Sanitation Interventions



Bleach Solution: Mixing and Storage

- Surface sanitizing for all tasks that do not involve blood:
 - Use 1 tablespoon bleach to 1 quart of water or $\frac{1}{4}$ cup to 1 gallon of water
 - Dilute bleach with cool water and don't use more than the recommended amount
 - Select a bottle made of opaque material
 - Make a fresh bleach solution daily and label the bottle "bleach solution" and the date solution mixed
 - Store away from heat and sunlight. Sunlight and heat weaken the chlorine in the bleach which will make the solution ineffective
 - Store out of the reach of children



Cleaning and Sanitizing Toys

- All toys can spread disease
- Toys and equipment used by children **under the age of 3** must be washed with soap and water and sanitized with a bleach solution at least daily
- Toys used by children **3 and over** must be washed and sanitized as needed but at a minimum of weekly
- Mouthed toys or toys contaminated by body secretions or excretions should be removed from the play area and placed in the “dirty bucket” until washed with water and soap, rinsed, sanitized, and allowed to air dry.



Cleaning and Sanitizing Toys

- Small hard-surfaced toys can be cleaned at the toy cleaning sink.
- A dishwasher may be used to clean and sanitize smaller toys that may be mouthed by a child
- Ensure the complete dishwasher cycle is used, and toys are washed separately from dishes.
- Machine-washable cloth toys should be used by only one child until these toys are laundered.



Cribs, Cots, and Mats

Per 608-10 there will be one crib, cot, or mat for every child under 18 months in attendance for full-day care and at least one crib, cot, or mat for every two children under 18 months of age enrolled for hourly care.

There will be a cot or mat available for each child over the age of 18 months who are present during group rest and nap periods.

Cots or mats must be labeled with the child's first and last name

Mattresses will have water proof covers and crib mattresses must fit securely.

Cots, cribs, or mats must be sanitized before being used by another child and after the child has soiled a mattress during a toileting accident

Cribs, Cots, and Mats



Crib sheets must be laundered daily and before being used by another child

Cot/Mat sheets and blankets must be laundered before being used by another child and weekly at a minimum

Cribs, cots, and mats must be placed at least two feet apart on all sides while being used by children sleeping or resting

Cribs with solid headboards may be placed head to head when used by children under the age of 9 months.



Toothbrushes

Personal toilet items such as toothbrushes may not be stored or used in common

Toothbrushes should not be touching

Each toothbrush should be labeled with the child's full first and last name.

Do not place a toothbrush underneath another toothbrush so the water contaminates the toothbrush below.



Don't Forget the Dress-Up Clothes

Wash
weekly and
more often
if necessary.



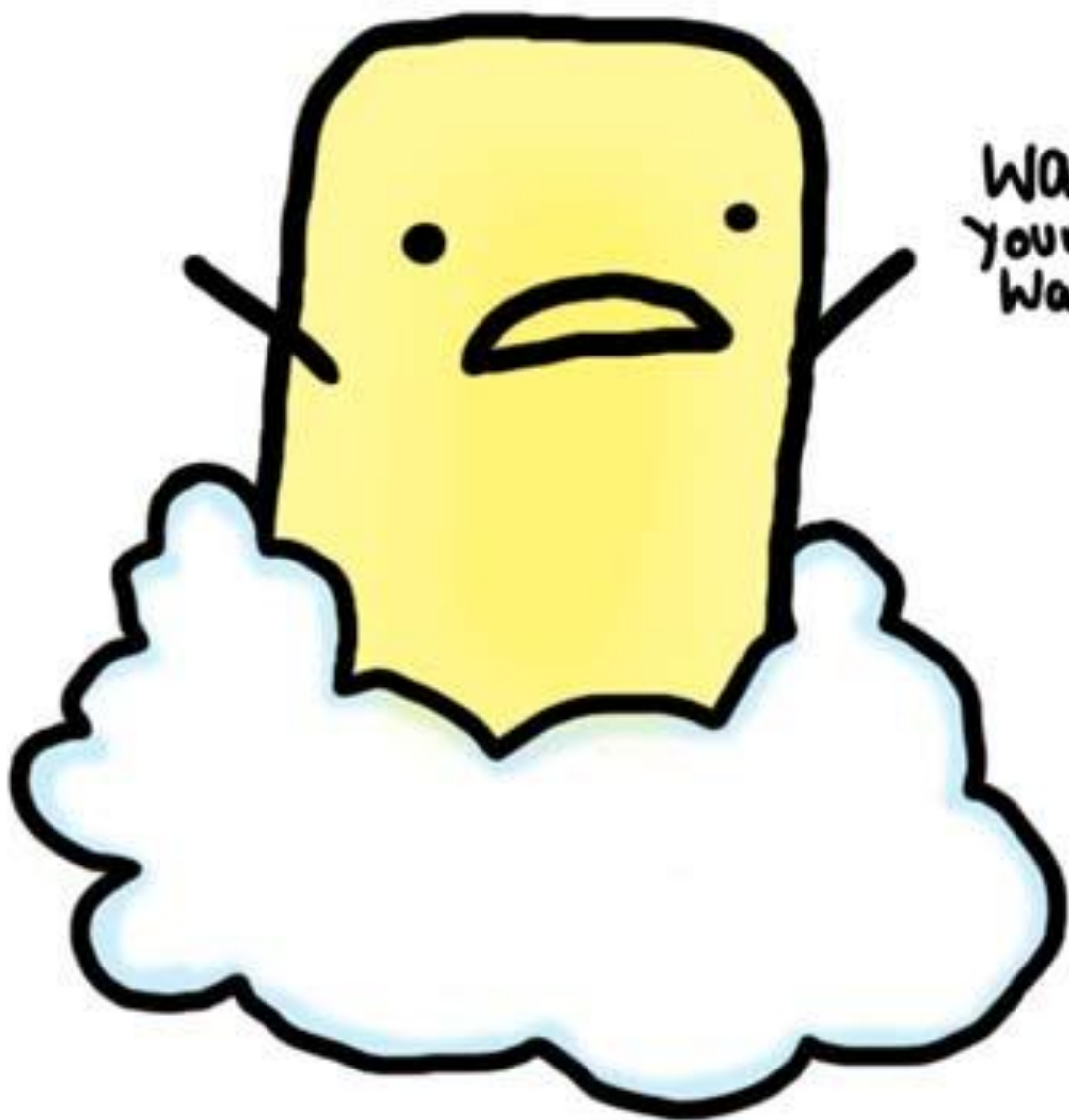
Pets

- **Veterinary approval is required for all pets in CYSS**
- **FCC Certification may be denied if the FCC Director feels a child may be at risk from a pet living in or associated with an FCC Home**
- **Pet cages, bowls, fish tanks, etc. must be kept clean and sanitary and kept inaccessible to crawling children**
- **Pets must be in good health with current immunization records if appropriate.**
- **Pet food and supplies must be kept out of the reach of children.**
- **Sanitary condition of pets and the environment will be monitored monthly by preventive medicine staff.**
- **Pets maintained at center on a permanent basis will be inspected monthly by Fort Riley Veterinary Services.**

Plants

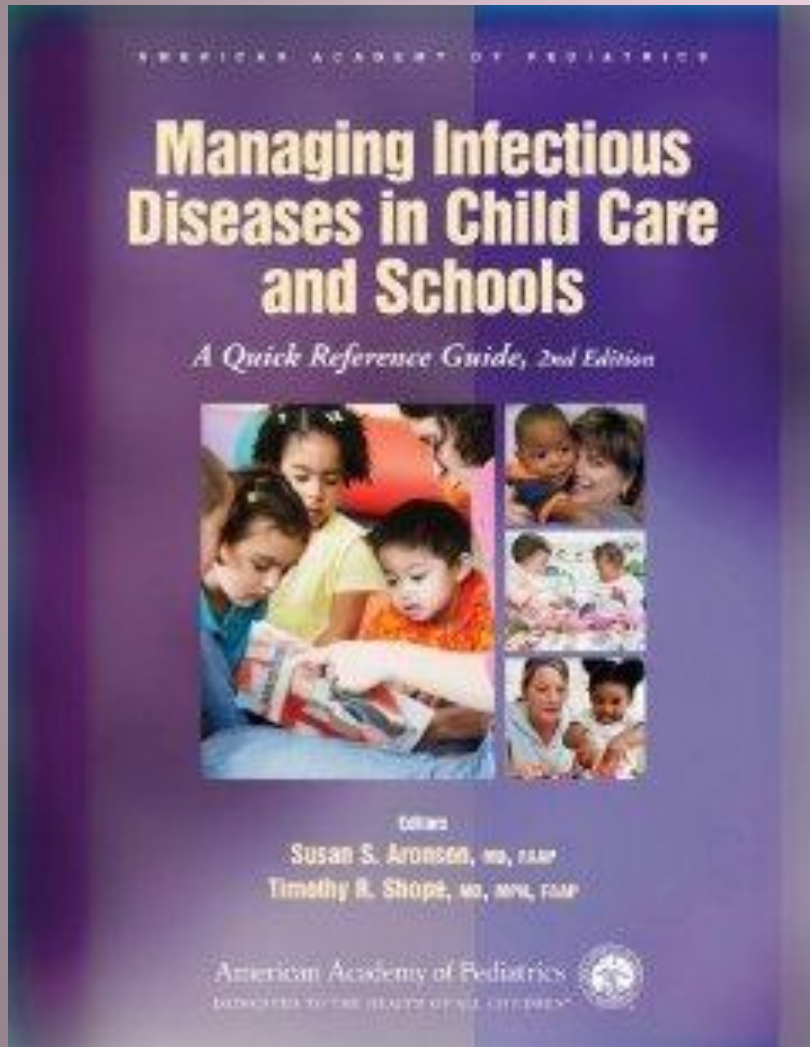
- **Toxic plants must not be present in centers or outside play areas**
- **Indoor and outdoor areas accessible to children must be free of plants with poisonous berries or leaves.**
- **Non-toxic plants will be permitted in all CYSS facilities and FCC Homes for use in child science and developmental activities and to enhance the physical environment.**
- **All plants must be labeled with the plant's name**
- **All plants in CYSS facilities and FCC Homes must be checked against the toxic/non-toxic plant list in 608-10.**

Just A Reminder...



Wash your hands! Wash
your hands wash your hands!
Wash your hands! Wash your
hands!

References



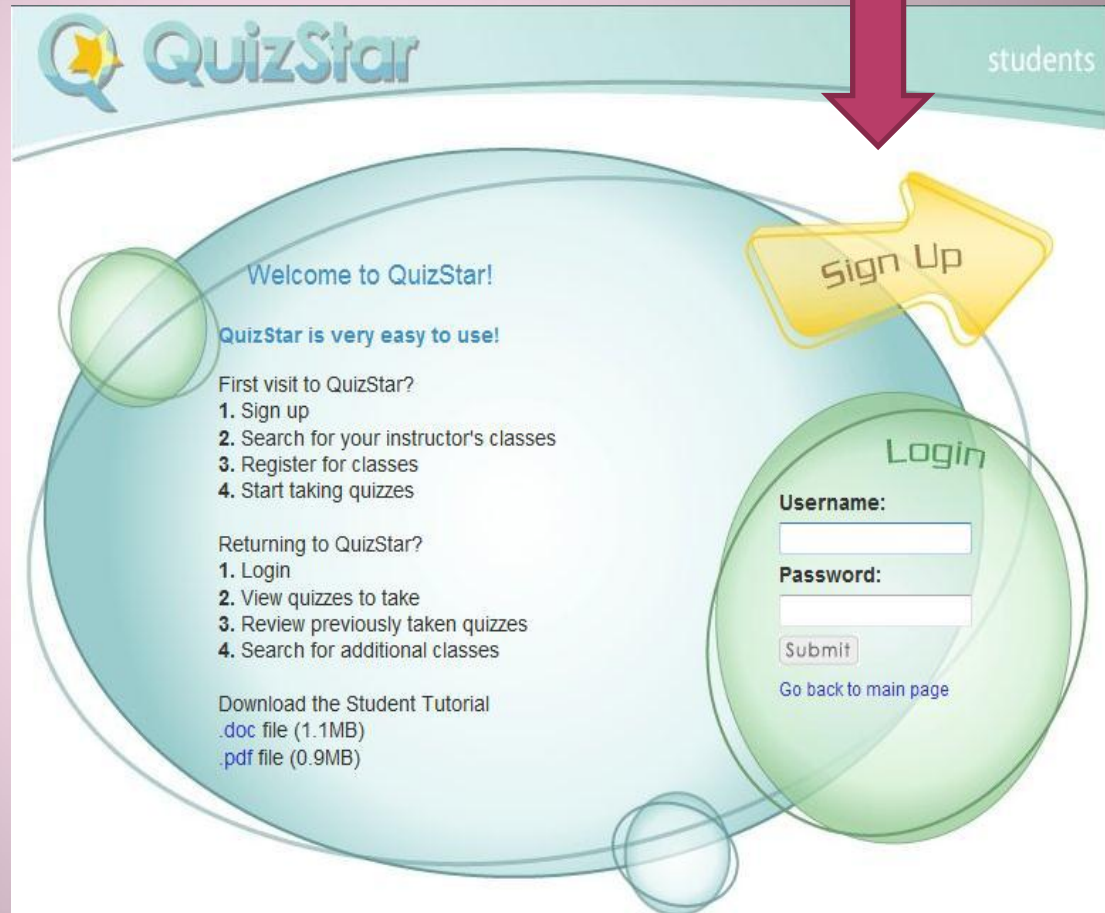
Centers for Disease Control and Prevention
CDC 24/7: Saving Lives. Protecting People.™

NOW YOU'RE READY FOR THE QUIZ

- **Go to**
<http://quizstar.4teachers.org/indexs.jsp>
- **Follow the next slides to Register,
Enroll and Take the Quiz**

ON THE WEBSITE

- Click
“Sign Up”



The image shows a screenshot of the QuizStar website for students. At the top, there is a navigation bar with the QuizStar logo on the left and the word "students" on the right. A large red arrow points down from the top right towards a yellow "Sign Up" button. The main content area is enclosed in a large, light blue, rounded shape. It contains the following text:

Welcome to QuizStar!

QuizStar is very easy to use!

First visit to QuizStar?

1. Sign up
2. Search for your instructor's classes
3. Register for classes
4. Start taking quizzes

Returning to QuizStar?

1. Login
2. View quizzes to take
3. Review previously taken quizzes
4. Search for additional classes

Download the Student Tutorial

- [.doc file \(1.1MB\)](#)
- [.pdf file \(0.9MB\)](#)

On the right side of the main content area, there is a green rounded rectangle containing a "Login" form. The form includes fields for "Username:" and "Password:", a "Submit" button, and a link that says "Go back to main page".

REGISTER

- Registering
- Enter
 - First Name
 - Last Name
 - Username
 - Password
 - Then click “Register”

QuizStar students

Student Registration

Enter your personal information in the form below. If you forget your password, you can contact your instructor to have your password reassigned.

Enter your information

First Name	Joey	If you are under age 13, type your first name and last initial. Please do not enter any personally identifiable information.
Last Name	Doe	
Username	jodo83	Create an unique username to login to QuizStar. (minimum of 3 characters with no spaces)
Create Password	●●●●●●	Use a password that only you will know and remember. (minimum of 5 characters)
Re-type Password:	●●●●●●	

NOTE - Your instructors are able to change your profile information at any time.

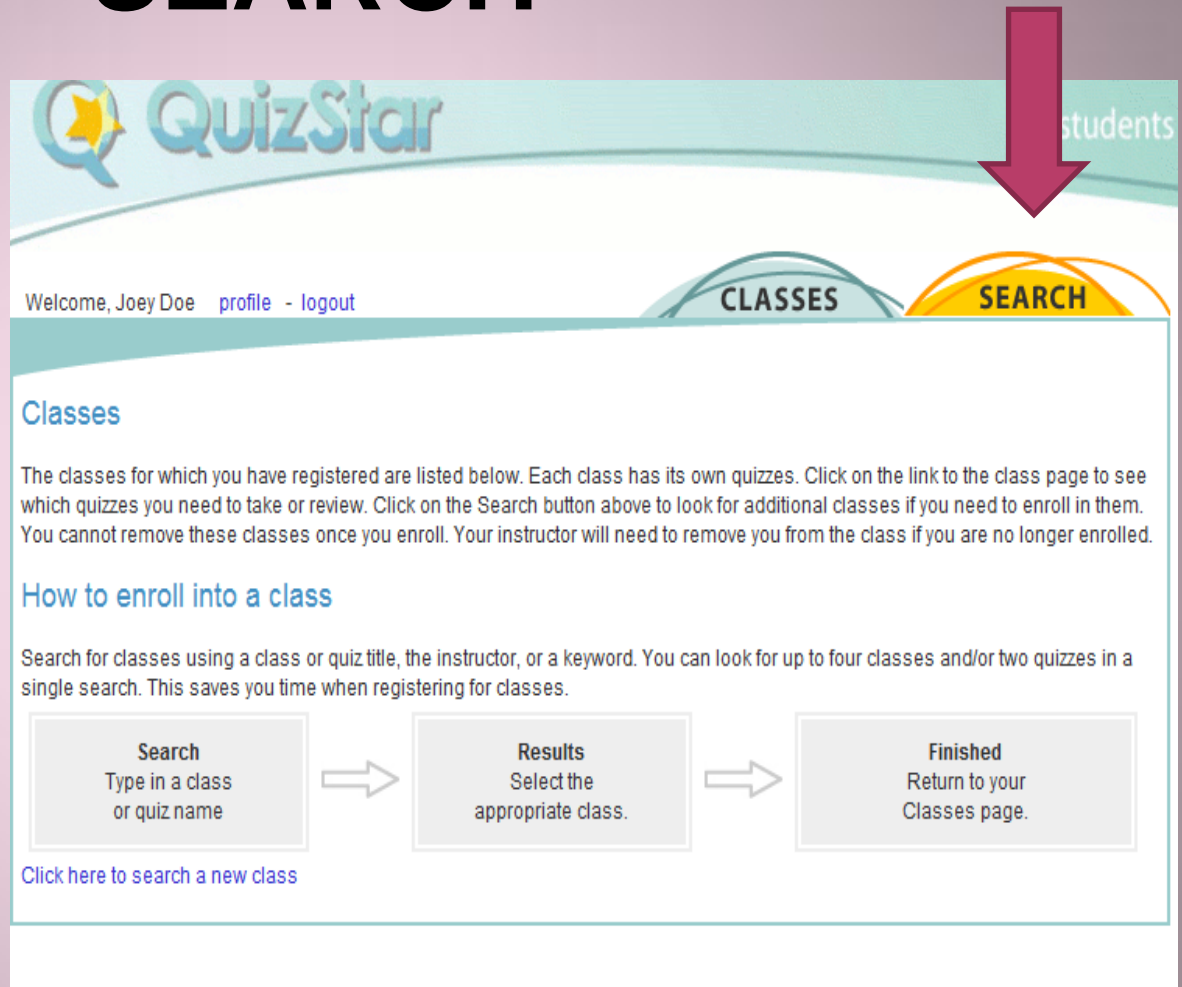
Register Cancel

4teachers.org TrackStar | RubiStar | NoteStar | Profiler Pro | More Tools Privacy Policy | Terms of Use | Contact Us | ALTEC

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Center for Research on Learning at The University of Kansas

SEARCH

- Click “Search”



The screenshot shows the QuizStar website interface. At the top, there is a navigation bar with the QuizStar logo on the left and a 'students' link on the right. Below the logo, there is a welcome message: 'Welcome, Joey Doe' followed by links for 'profile' and 'logout'. In the center of the navigation bar, there are two buttons: 'CLASSES' and 'SEARCH'. The 'SEARCH' button is highlighted with a yellow circle, and a large red arrow points down to it from the top right. Below the navigation bar, the main content area is titled 'Classes'. It contains a paragraph explaining that classes are listed below and that users can search for additional classes. Below this, there is a section titled 'How to enroll into a class' which provides instructions on how to search for classes. At the bottom of this section, there is a flowchart with three steps: 'Search' (Type in a class or quiz name), 'Results' (Select the appropriate class), and 'Finished' (Return to your Classes page). Below the flowchart, there is a link: 'Click here to search a new class'.

students

Welcome, Joey Doe [profile](#) - [logout](#)

[CLASSES](#) [SEARCH](#)

Classes

The classes for which you have registered are listed below. Each class has its own quizzes. Click on the link to the class page to see which quizzes you need to take or review. Click on the Search button above to look for additional classes if you need to enroll in them. You cannot remove these classes once you enroll. Your instructor will need to remove you from the class if you are no longer enrolled.

How to enroll into a class

Search for classes using a class or quiz title, the instructor, or a keyword. You can look for up to four classes and/or two quizzes in a single search. This saves you time when registering for classes.

Search
Type in a class
or quiz name

⇒

Results
Select the
appropriate class.

⇒

Finished
Return to your
Classes page.

[Click here to search a new class](#)

FINDING THE QUIZ

- Look under “Quiz Search”
- Enter “CYSS Communicable Disease Test”
- Then Click Exact Match

Welcome, Joey Doe [profile](#) - [logout](#)

CLASSES **SEARCH**

Class & Quiz Search

The classes for which you have registered are listed below. Each class has its own quizzes. Click on the link to the class page to see which quizzes you need to take or may review. Click on the Search button above to look for additional classes to register for. You cannot remove these classes once you enroll. Your instructor will need to remove you from the class if you are to no longer take its quizzes.

Search
Type in a class or a quiz to look for

Results
Select the class you want to register for

Finished
Find out what you have been registered for, then go to Classes

Class Search

Class #1:	Class Title	▼	→		→
Class #2:	Class Title	▼	→		→
Class #3:	Class Title	▼	→		→
Class #4:	Class Title	▼	→		→

Search for up to four classes at the same time, then click Search.

Exact Match Keyword Search

Quiz Search

Quiz #1:	Quiz Title	▼	--	CYSS Communicable Disease Test	
Quiz #2:	Quiz Title	▼	--->		--->

Search for up to two quizzes at the same time, then click search.

Exact Match Keyword Search

REGISTERING FOR THE QUIZ

- Check Box beside “CYSS Communicable Disease Test”
- Click “Register”

Welcome, [profile](#) - [logout](#) **CLASSES** **SEARCH**

[Search for Classes/Quizzes](#) > Results

Search Results
Select the classes you wish to register for then click the Register button. The next screen will confirm your registration status for those classes. If you are not satisfied with these results, click the New Search button to perform a new search.

Search
Type in a class or a quiz to look for

Results
Select the class you want to register for

Finished
Find out what you have been registered for, then go to Class

[← New Search](#) [Register](#) [Cancel](#)

Select the class, then click Register

Quiz #1 Results
Searched: **CYSS Communicable Disease Test**

<input type="checkbox"/>	Quiz Title	Class Title	Instructor Name Email	Time Class Type
<input type="checkbox"/>	CYSS Communicable Disease Test	CYSS Fort Riley: Preventative Medicine	QS_RESEARVED_NULL_VALUE QS_RESEARVED_NULL_VALUE	Public course

1 result(s)
[Register \(to top\)](#)

[← New Search](#) [Register](#) [Cancel](#)

Select the class, then click

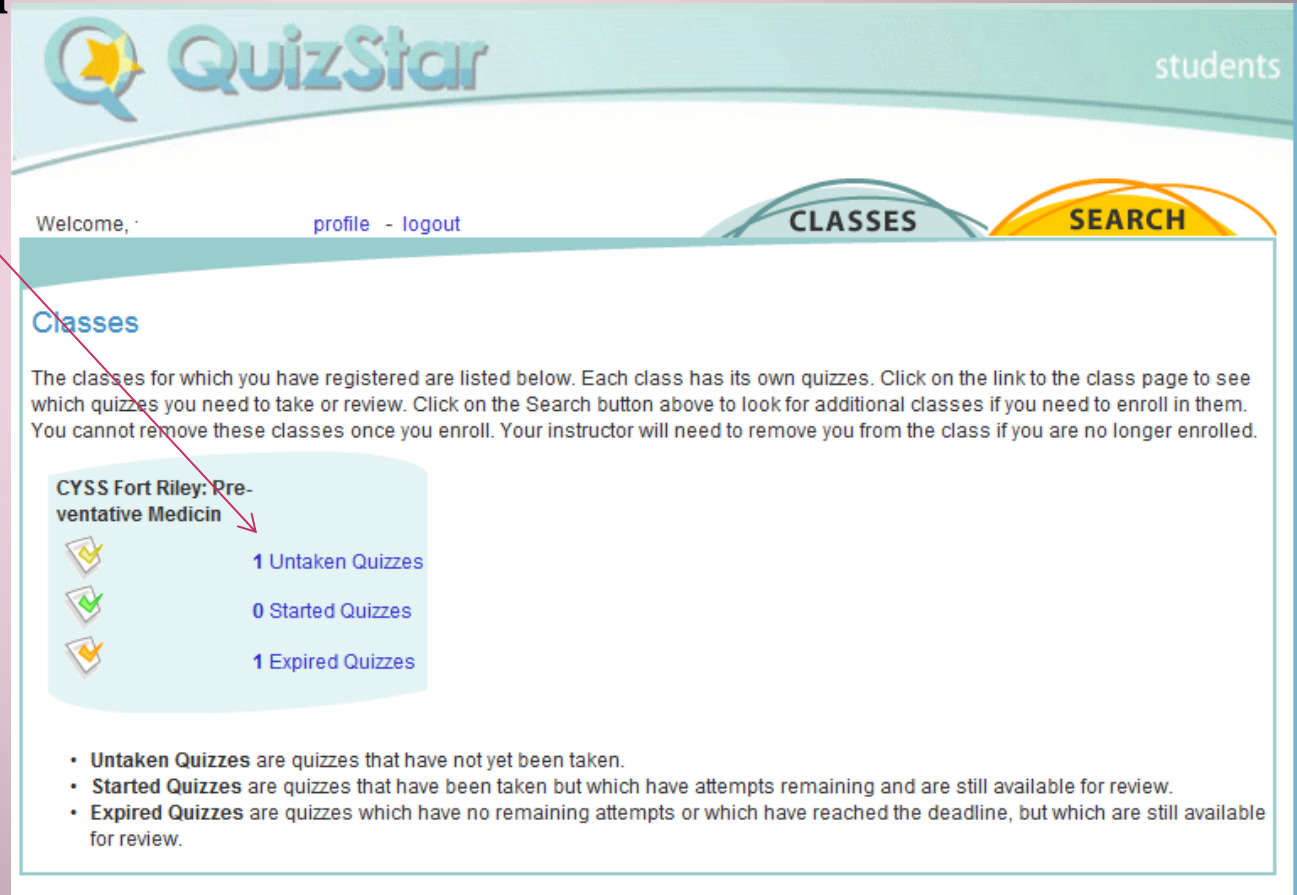
NOW YOU'RE REGISTERED

- Click
Classes

The screenshot shows the QuizStar website interface for students. At the top, the QuizStar logo is on the left and the word 'students' is on the right. Below the logo, there is a navigation bar with 'Welcome, | : profile - logout' and two buttons: 'CLASSES' and 'SEARCH'. A red arrow points from the 'Click Classes' text in the list to the 'CLASSES' button. Below the navigation bar, a yellow box contains a 'Finished' message: 'You have successfully registered for the classes you selected. Some classes require additional validation from the instructor before you can take their quizzes. Proceed to [My Classes](#) to view all of your classes together.' Below this message is a flowchart with three steps: 'Search' (Type in a class or a quiz to look for), 'Results' (Select the class you want to register for), and 'Finished' (Find out what you have been registered for, then go to Classes). The 'Finished' step is highlighted in yellow. Below the flowchart, another 'Finished' message states: 'Finished: You have not selected any class for registration. If you want to register for any class, please select the particular class(es) and register. Some classes require additional validation from the instructor before you can take their quizzes. Proceed to [My Classes](#) to view all of your classes together.'

ALMOST THERE

- Click Untaken Quizzes



The screenshot shows the QuizStar student interface. At the top, there is a teal header with the QuizStar logo on the left and the word "students" on the right. Below the header, there is a navigation bar with "Welcome, profile - logout" on the left and "CLASSES" and "SEARCH" buttons on the right. The main content area is titled "Classes" and contains a paragraph of text. Below the text, there is a light blue rounded rectangle containing the class name "CYSS Fort Riley: Preventative Medicin" and three icons representing quiz status: a yellow checkmark in a box (1 Untaken Quiz), a green checkmark in a box (0 Started Quizzes), and a red checkmark in a box (1 Expired Quiz). A red arrow points from the text "Click Untaken Quizzes" to the yellow checkmark icon. At the bottom, there is a legend defining the quiz status icons.

students

Welcome, profile - logout

CLASSES SEARCH

Classes

The classes for which you have registered are listed below. Each class has its own quizzes. Click on the link to the class page to see which quizzes you need to take or review. Click on the Search button above to look for additional classes if you need to enroll in them. You cannot remove these classes once you enroll. Your instructor will need to remove you from the class if you are no longer enrolled.

CYSS Fort Riley: Preventative Medicin

- 1 Untaken Quizzes
- 0 Started Quizzes
- 1 Expired Quizzes

- **Untaken Quizzes** are quizzes that have not yet been taken.
- **Started Quizzes** are quizzes that have been taken but which have attempts remaining and are still available for review.
- **Expired Quizzes** are quizzes which have no remaining attempts or which have reached the deadline, but which are still available for review.

CLICK TAKE



- Click Take

Welcome, I : [profile](#) - [logout](#) **CLASSES** **SEARCH**




CYSS Fort Riley: Preventative Medicine's Quizzes

Make a selection from the list of [Untaken](#), [Started](#) or [Expired](#) Quizzes to **Take** or **Review** a quiz. If you want further instructions about using this page, go to the [Directions](#) at the bottom of this page.

Untaken Quizzes [Help](#)

Quiz Title (with attempts left)	Start Date	Due Date	Points	Scores	Take Quiz	Review Quiz
CYSS Communicable Disease Test (1)	Always Active	Always Active	100	-	 Take	 Review

Started Quizzes [Help](#)

Quiz Title (with attempts left)	Start Date	Due Date	Points	Scores	Take Quiz	Review Quiz
 There are no Started Quizzes to take.					 Take	 Review

START THE QUIZ

- **You may now start the Quiz**
- **If you receive a score of 80% or higher, print your results page (see next slide) and bring it with you to your Preventative Medicine class you are enrolled in with CYSS.**
- **If you receive less than an 80% please contact the CYSS Administrator and/or the CYSS Nurse for further guidance.**

RESULTS PAGE EXAMPLE

CYSS Fort Riley: Preventative
Medicine

QuizStar

CYSS Communicable Disease Test

Your Score : 100 out of 100 (100%)

CYSS Communicable Disease Test

has been submitted at
Apr 16, 2014 11:40:26 AM

?

[Return to this Class' page](#)

[Review this quiz](#)

[Logout of QuizStar](#)