

## COMMON CONCERNS PEOPLE HAVE ABOUT THEIR HEALTH AND GOING TO WORK (cont.)

People are frequently concerned about when to stay home from work when they are sick. The following information is intended to help you with this decision.

General practice:

- If you have a fever of 100.3° or more, stay home for 24 hours after your temperature returns to normal.
- If you have vomiting or diarrhea, you should stay home until 24 hours after the last episode.
- If you have any rash that may be disease-related or you do not know the cause, check with your health care provider before going to work.
- If you are taking a medication that could impair your ability to think, work, operate machinery or drive you may need to stay home.

Staying home when you're sick helps curb the spread of germs at work and in the community. You will get well faster if you take the needed time to rest at home and let your body fight the infection.

If you have any questions regarding the above information please contact your health care provider.

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DISEASE	SIGNS & SYMPTOMS	CONTAGIOUS PERIOD	WORKPLACE RESPONSE & COMMENTS ON PREVENTION
Cold Sores (Herpes Simplex)	Blister-like lesions on lips, mouth, skin, or in mucous membranes.	Should be considered infectious whenever lesions are present.	<ol style="list-style-type: none"> <li>1. No exclusion from work.</li> <li>2. Good hygiene; thorough hand washing.</li> <li>3. Antiviral treatment may modify acute illness.</li> </ol>
Common Cold	Acute upper respiratory signs, including watery eyes, sneezing, running nose, general feeling of illness.	24 hours before onset and five days after nasal involvement.	<ol style="list-style-type: none"> <li>1. No exclusion from work unless ill with fever.</li> <li>2. Good handwashing and cough etiquette</li> </ol>
Impetigo	Lesions (blisters) on skin may contain pus covered by honey-colored crusts.	No longer contagious at least 24 hours after antibiotic treatment has started.	<ol style="list-style-type: none"> <li>1. Exclude from work until lesions are dry and person has been on antibiotic therapy for 24 hours.</li> <li>2. See health care provider for treatment.</li> <li>3. Thorough hand washing.</li> </ol>
Lice (Pediculosis)	Itching of scalp (head lice) or body (body lice). Scratching causes reddened, rash-like area. The eggs, called nits, are tiny and white and stick firmly to the hair.	As long as lice or eggs remain alive on the infested person or clothing. No longer contagious after the first treatment when the egg-laying lice are eliminated.	<ol style="list-style-type: none"> <li>1. No exclusion from work</li> <li>2. Should be treated with an effective lice killing product, such as Nix.</li> <li>3. Examine close contacts for evidence of lice infestation.</li> <li>4. Contact the Wood County Health Dept. for the Lice Control Brochure or your health care provider for further instructions.</li> </ol>
Acute Sinus Infection	Yellow or green nasal discharge, nasal stuffiness, facial pain or pressure, headache, aching in the upper jaw or teeth, sore throat, or bad breath.	If it is caused by a virus, you will be contagious with the virus 24 hours before onset and for five or more days after nasal involvement.	<ol style="list-style-type: none"> <li>1. No exclusion from work unless ill with fever</li> </ol>
Pink-eye (Conjunctivitis bacterial or viral)	Redness of conjunctivae (lining of eye and eyelid); may have pus drainage from eye, sometimes swelling of eyelids. Eye irritation.	Usually while inflammation or drainage is present. Allergic conjunctivitis is <u>not</u> contagious.	<ol style="list-style-type: none"> <li>1. Thorough hand washing.</li> <li>2. Refer to health care provider for diagnosis and treatment.</li> <li>3. A person with allergic conjunctivitis is <u>not</u> restricted from work.</li> </ol>
MRSA (methicillin resistant Staphylococcus aureus)	<p>May appear as boils or abscesses, with pus or drainage present. There may be redness, swelling, pain, or warmth at the site of the infection. There maybe a fever.</p> <p>Colonization with MRSA means a person carries the infection in the nose or on the skin but is not sick with a MRSA infection.</p>	As long as lesions continue to drain or the carrier state persists. The risk of transmitting colonized MRSA is much less than if a person has an active infection	<ol style="list-style-type: none"> <li>1. Persons who carry MRSA but do not have signs or symptoms are not excluded from work.</li> <li>2. Persons with active MRSA skin infections may be at work if: <ul style="list-style-type: none"> <li>• The infection can be covered with a bandage or dressing.</li> <li>• Restrict from work if it is likely that others will contact the affected skin, until the infection has healed.</li> <li>• All wound drainage can be contained throughout the day without having to change the dressing at work.</li> <li>• The infected person follows good hand washing and personal hygiene.</li> </ul> </li> </ol>
Whooping Cough (pertussis)	Runny nose, low-grade fever and cough progressing to explosive severe coughing that can interrupt breathing, eating and sleeping. A whooping or crowing sound as they struggle to inhale.	From the onset of symptoms until 2 weeks after the cough begins. Contagious until on antibiotics for 5 days.	<ol style="list-style-type: none"> <li>1. Exclude while infectious (up to 21 days or until 5 days after effective antimicrobial therapy for pertussis begins).</li> <li>2. Determine if pertussis vaccine is up to date.</li> </ol>