<Local Health Department of Facility letterhead>

TO: Parents of Children at <insert school/childcare name>

FROM: <Insert>

RE: Case of Pertussis (Whooping Cough)

An individual attending the <school/daycare> was diagnosed with pertussis (whooping cough).

We are notifying you because your child has potentially been exposed to pertussis. We recommend that you take your child to their pediatrician. The pediatrician may prescribe antibiotics to reduce their chance of becoming sick (post exposure prophylaxis).

Pertussis is spread by face-to-face contact with a person who has the disease. When a child is diagnosed with pertussis, the physician notifies the local health department. The local health department works to identify all people who have come in contact with an ill child. These individuals are referred to as “contacts,” and the local health department works to ensure they are treated with antibiotics and are brought up to date on the pertussis vaccine. Children who have not had face-to-face contact with a person who has pertussis do not need to take antibiotics.

More detailed information on signs and symptoms of pertussis can be found on the attached information sheet. If you have any questions, you may contact the \_\_\_\_\_ County Health Department directly at\_\_\_\_\_.

**Information for the Public on Pertussis (Whooping cough)**

**What is pertussis (whooping cough)?**

Pertussis, also known as whooping cough, is a contagious illness caused by bacteria. It occurs in children more often than in adults, but adults with milder, undiagnosed symptoms can transmit the disease to infants and children.

**What are the symptoms of pertussis (whooping cough)?**

Pertussis can be divided into three stages:

1. During the first stage, cold-like symptoms may occur and include a slight fever, sneezing, runny nose, dry cough, loss of appetite, and irritability.

2. During the second stage (about 1 to 2 weeks later), the cough becomes more intense. There may be short, intense coughing spells followed by a long gasp for air (this is when the “whoop” is heard). The face may turn blue, the nose may bleed, and vomiting may occur following a coughing spell.

3. During the third stage, the cough is less intense and less frequent, and appetite begins to increase. Eventually, maybe many weeks later, the cough stops.

Adults may have a mild form of pertussis, with prolonged cough as the only symptom.

**How is pertussis spread?**

Pertussis is usually spread by contact with an infected person’s nose or throat secretions. This can happen by touching an infected person’s nose or throat drainage, or it can be spread when an infected person coughs or sneezes.

**How is pertussis treated?**

Antibiotics are given to make the illness less contagious, but they do not reduce the symptoms unless given very early in illness.

**How can pertussis be prevented?**

Be sure that children are up to date on their shots, especially the diphtheria, tetanus, and pertussis (DTaP) series. There is a pertussis-containing vaccine (Tdap) available for adolescents and older adults to boost their pertussis immunity. Please ask your doctor for the booster vaccine. Persons who have been in very close contact with a person with pertussis should take antibiotics to prevent illness.

**Recommendations:**

1. **If your child develops symptoms:**
	* Keep your child home from school and activities until whooping cough is ruled out.
	* Make an appointment with your child’s doctor as soon as possible and tell the doctor your child may have been exposed to whooping cough.
2. **If your child has been diagnosed with whooping cough by their doctor:**
	* Tell your child’s school that a doctor diagnosed your child with whooping cough.
	* Keep your child home until they have been on appropriate antibiotics for five full days to treat whooping cough.
	* The school may ask your child for a note that states your child has whooping cough.
3. **If your child has NOT been diagnosed with whooping cough but has symptoms:**
	* Your school may require a note stating that your child does not have whooping cough.
	* Your child can return to school and activities based on the facility’s infectious disease policy.
4. **If your child does NOT develop symptoms but has been exposed:**
	* Ask your doctor if antibiotics are right for your child. Usually, antibiotics are appropriate if your child is immunocompromised or lives with the following people:

a. A woman who is pregnant

b. A baby younger than 12 months old

c. Anyone with health conditions that may be worse with whooping cough.

* + Watch for the development of symptoms for 21 days after last exposure.
1. Please make sure your family’s whooping cough vaccinations are up to date. Vaccination is the best way to prevent getting whooping cough; however, protection from the vaccine decreases over time. If you need the vaccine, please contact your doctor or local health department.
2. If you do take your child to the doctor, please show them the attached physician letter.