

# Guidelines for Acute Respiratory Illness (ARI) Outbreaks in Schools and Healthy Populations

These guidelines are designed to assist with outbreaks in congregate settings with a generally healthy population, e.g., schools, daycares, and workplaces.

## Define the outbreak:

<p><b>Acute Respiratory Illness:</b> *Including RSV, COVID-19, parainfluenza, and other non-influenza respiratory viruses.</p> <p><b>Case Definition:</b> At least two of the following symptoms:</p> <ul style="list-style-type: none"> <li>• sneezing</li> <li>• runny nose</li> <li>• stuffy nose</li> <li>• dry cough</li> <li>• swollen or tender glands in the neck</li> <li>• sore throat, hoarseness, or difficulty in swallowing</li> </ul>	<p><b>Influenza-like Illness (ILI):</b></p> <p><b>Case Definition:</b> Fever <math>\geq 100^{\circ}\text{F}</math> (oral or equivalent) AND a cough and/or sore throat.</p>		
<p style="text-align: center;"><b>Outbreak Definitions: ARI, including COVID-19 and ILI</b></p> <p><b>Small congregate settings (e.g., classrooms, daycare rooms, sports teams, dormitories, workplace floor/unit/department):</b></p> <table border="0" style="width: 100%;"> <tr> <td style="width: 50%; vertical-align: top;"> <p style="text-align: center;">Acute Respiratory Illness:</p> <ul style="list-style-type: none"> <li>• Five or more cases of ARI were identified within 7 days <u>OR</u></li> <li>• Three or more cases of the same laboratory-confirmed respiratory pathogen identified within 7 days. Confirmation can be by any testing method, including rapid tests.</li> </ul> </td><td style="width: 50%; vertical-align: top;"> <p style="text-align: center;">Influenza-like illness</p> <ul style="list-style-type: none"> <li>• Five or more cases of ILI were identified within 72 hours <u>OR</u></li> <li>• Three or more cases of influenza identified within 72 hours. Confirmation can be by any testing method, including rapid tests.</li> </ul> </td></tr> </table> <p><b>Large congregate settings (e.g., entire schools, daycares, or workplaces):</b></p> <ul style="list-style-type: none"> <li>• Increased school absenteeism (above 15% or otherwise determined baseline) associated with reported ARI/ILI or laboratory-confirmed respiratory pathogens.</li> </ul> <p><b>A community-wide outbreak:</b></p> <ul style="list-style-type: none"> <li>• <math>\geq</math>three congregate settings within a jurisdiction are experiencing outbreaks simultaneously.</li> </ul>		<p style="text-align: center;">Acute Respiratory Illness:</p> <ul style="list-style-type: none"> <li>• Five or more cases of ARI were identified within 7 days <u>OR</u></li> <li>• Three or more cases of the same laboratory-confirmed respiratory pathogen identified within 7 days. Confirmation can be by any testing method, including rapid tests.</li> </ul>	<p style="text-align: center;">Influenza-like illness</p> <ul style="list-style-type: none"> <li>• Five or more cases of ILI were identified within 72 hours <u>OR</u></li> <li>• Three or more cases of influenza identified within 72 hours. Confirmation can be by any testing method, including rapid tests.</li> </ul>
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## Respond to the outbreak:

1. Establish the existence of an outbreak and confirm the diagnosis.
  - Small congregate settings: Develop and maintain a line list of ill persons. *See line list template included in this toolkit.*
  - Large congregate settings: Use the call down tool included in this toolkit and call a sample of 15 to 20 absentees to estimate the proportion of those absent with ARI/ILI. If ARI/ILI is a major cause of absenteeism, track percent absenteeism daily until it returns to baseline.
2. Report the outbreak to your local health department immediately and maintain regular contact.
3. Implement appropriate control measures. *See below.*
4. Follow the course of the outbreak to ensure that control measures are adequate and maintain line list or track percent absenteeism daily until the outbreak is over.

## Guidelines for Acute Respiratory Illness (ARI) Outbreaks in Schools and Healthy Populations Continued

### **Control the outbreak (additional Influenza and COVID-19 specific recommendations below):**

1. Ill persons should be isolated until they can be sent home and then should stay home until 24 hours after fever has ceased without use of fever reducing medications and other symptoms have improved.
  - \*Individuals with RSV generally do not need to be excluded from group settings unless they have a fever AND/OR staff determine they cannot care for the child without compromising their ability to care for the other children in the group.
- *Childcare Facilities COVID-19 specific recommendations:*
  - Symptomatic or positive cases should be excluded until they are without fever for  $\geq 24$  hours without the use of fever reducing medication, and all other symptoms have improved. They can return to the childcare or school setting and wear a mask for an additional 5 days. If a child cannot wear a mask, they should remain out of the childcare setting for a minimum of 5 days (and meet exclusion criteria mentioned above).
  - Facilities may consider closing for a five-day period to slow transmission if recommended by the local health department or if the facility is unable to maintain a safe environment.
- *Youth Residential Facilities COVID-19 specific recommendations:*
  - Facilities are encouraged to perform focused testing based on known close contacts at least five days after exposure.
  - Rapid antigen tests are acceptable and preferred. Rapid antigen tests will provide test results quickly.
2. Wash hands frequently and practice respiratory etiquette.
3. Maintain routine general cleaning procedures during ARI outbreaks and clean frequently touched surfaces.
4. Share additional CDC guidelines and resources specific to the situation:
  - Schools and daycares: [Preventing Spread of Infections in K-12 Schools](#)
  - Workplaces: [Flu Resources for Businesses](#) , [About Respiratory Infections in the Workplace](#)
  - General: <http://www.cdc.gov/flu>  
<https://www.cdc.gov/coronavirus/2019-nCoV/index.html>
5. Additional control measures may be recommended for outbreaks with widespread transmission.