

Pertussis (Whooping Cough)

in School Settings

Guidance on how to identify who is considered exposed to pertussis, recommendations for exposed individuals, exclusion criteria, reporting of outbreaks, and other additional steps to consider in school settings only.

When a student with pertussis is identified:

- Those who have been diagnosed with pertussis should be excluded until five full days of appropriate antibiotics or until 21 days have passed since cough onset.
- Exclude students only when necessary.
 - Exclude from any sort of work, social activities, sports, or in person classroom.

Reporting Outbreaks:

- Two or more cases of pertussis, from separate households, with evidence of transmission in the school setting.
- Outbreaks should be reported to your local health department immediately.

Identifying who is exposed (close contacts):

- It is important that schools assist in identifying close contacts to monitor and identify potential additional cases.
- Close contacts are defined as a person(s) that had any of the following:
 - Are within three feet of someone with pertussis for at least 10 hours a week.
 - Have direct face-to-face contact with someone with pertussis while they are coughing.
 - Have been in a small, confined space with someone for more than an hour while they were coughing (long car ride, small conference room, piano lessons, etc.).
- In school settings, this usually means that close contacts are identified in small to mid-sized classrooms, an activity, a lab, a sports team, or a club. Sometimes the exposure may be considered broader if there are a lot of cases across multiple different grades.
- Examples of close contacts may include best friends, desk buddies, carpool friends, lunch buddies, shared items (such as lipstick, vapes, or cigarettes) and sports teammates with close interaction.

Recommendations for those exposed (close contacts):

- Close contacts should be monitored for respiratory symptoms for 21 days after last contact with the infected person.
- Students or staff who are exposed to pertussis but do not have any symptoms do not need to be excluded.
 - If symptoms develop, they should be excluded until they can be evaluated by a healthcare provider and receive antibiotics if necessary.
- Preventive antibiotics (or post-exposure prophylaxis) in the school setting are limited to those who are household like contacts, overnight guests of a case while they were infectious, or those either at high risk of developing severe pertussis infection or living with someone at who is considered high risk.
 - Those at high risk of developing severe pertussis infections are infants under 12 months of age and people with certain pre-existing health conditions (such as asthma or immunocompromised).
- The use of antibiotics for large groups of students is usually not recommended, especially in the setting of widespread community transmission.

Other steps to consider:

- Public health has template letters for notifying parents and healthcare providers that can be utilized.
- Maintain a line list to track case trends in your school.
- Check school vaccination records for pertussis.
- Encourage students and staff to discuss prevention method options with their healthcare provider.
- Provide education to students and staff on hand hygiene, cough etiquette (covering coughs and sneezes), and staying home when sick.

For additional information, please visit: [OEPS Pertussis Toolkit](#) | [CDC Pertussis Guidance](#)