



Lexington Public Schools

146 Maple Street ♦ Lexington, Massachusetts 02420

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FALL 2009 INFLUENZA GUIDANCE FOR PARENTS OF SCHOOL-AGED CHILDREN

<http://lps.lexingtonma.org/health.html>

As the 2009-2010 school year begins, we are providing you with updated guidance concerning H1N1 influenza, seasonal influenza, and influenza-like illness (ILI). The Massachusetts Department of Public Health expects that both seasonal and H1N1 influenza will be circulating in the fall and is preparing for an increased number of cases. The main changes in the guidance since the spring of 2009 are: 1) the importance of **early seasonal flu vaccination**; 2) the **availability of H1N1 influenza vaccine**; and 3) the **shorter isolation period for those with influenza-like illness (ILI)**. The information provided is based on the most recent guidance from the Centers for Disease Control and Prevention (CDC). *Our goal for the school year is to limit transmission in our schools and to keep schools open and functioning as usual.*

Guidance is provided in four areas:

1. **Seasonal Influenza Vaccination:** As was the case last year, annual seasonal influenza vaccination is recommended for all children aged 6 months through 18 years. For more information concerning seasonal influenza vaccination please go to the Lexington Department of Public Health <http://www.lexingtonma.gov/health/division-2008.cfm>. Public Clinic: October 16 & 17 2009 at Cary Hall. See web site for details.
2. **H1N1 Influenza Vaccination:** H1N1 vaccine is expected to be available in October. For more information on vaccinations please consult your primary care physician or go to the Lexington Department of Public Health website <http://www.lexingtonma.gov/health/division-2008.cfm>. Public Clinic: October 30 & 31, 2009 at Cary Hall. See web site for details.
3. **Control and Surveillance Measures for ALL Schools:** The following recommendations are designed to help prevent the spread of ILI in schools and should be followed all the times, not only during a flu outbreak.
 - **Parents should assess children for symptoms of influenza before sending them to school.** ILI symptoms include fever plus cough and/or sore throat. . It may also include other symptoms, such as vomiting or diarrhea. **All sick students should stay home for at least 24 hours after they no longer have a fever. This fever-free period *must* be without the use of fever-reducing medicines**, like Motrin (ibuprofen) or Tylenol (acetaminophen). They should stay home until at least 24 hours after they no longer have a fever even if they are taking antiviral medicines. Staying at home while a fever is present will reduce the spread of infection. Teachers and staff will send students with symptoms to the school nurse for evaluation. The school nurse will send children home if they have ILI symptoms, and students will not be allowed to return to school until they are fever free for 24 hours. Parents should work with school administrators concerning any extended absences or missed assignments.
 - **The public health and school department's exclusion of a child with ILI symptoms cannot be overridden by a doctor's note.**
4. **Prevention and Education:** Schools can act as a "point of spread" of flu cases, and students can easily spread flu to other students and their families. The primary steps for prevention and decreasing transmission of flu cases are listed below:
 - **Make sure all school-aged children are vaccinated against both types of flu.**
 - Children can get a **seasonal flu shot** as soon as possible, starting in early September
 - Children will be able to get an **H1N1 flu shot** in October. www.mass.gov/dph/swineflu.
 - **Parents should teach, emphasize, and remind their children about the importance of proper hand washing and cough etiquette in preventing the spread of diseases** and to explain why it's important. The Department of Public Facilities is providing to each school hand sanitizer pump stations in cafeterias, libraries, and computer labs.
 - **Lexington Department of Public Facilities' cleaning protocols are in place** for surfaces and items that are more likely to have frequent hand contact using "green" cleaning agents according to their routine schedule. Once respiratory secretions containing the virus dry out, the virus is no longer effectively infectious. There is no need for special disinfection or decontamination efforts, and the main focus should be on hand washing and cough and respiratory etiquette. Please do not send children to school with products that contain bleach or other non-hypoallergenic cleaning agents. We have students with nut and chemical sensitivities that can have adverse reactions to many common household cleaning products on the market.