

Common Indicators of Infectious Diseases in Children

Introduction

Since classroom teachers spend several continuous hours a day with their students, they are often in an excellent position to detect early physical and behavioral changes in students at school. Teachers may observe differences in the usual pattern for a particular student, and deviation from a developmental “norm” for students of a given age.

The physical and behavioral “indicators” listed below are nonspecific and do not in themselves suggest the presence of an infection.

Appetite

Often, a student who is ill or becoming ill with an infection will exhibit changes in eating habits. He/she may “pick at” solid foods, eat lightly, want only certain foods, and/or prefer liquids.

Behavior

Irritability may be associated with illnesses, often because of the accompanying fatigue, fever, and discomfort. Play activities may diminish and the student may become lethargic (drowsy or indifferent).

Fever

Parent/guardian and school staff may exhibit a great deal of anxiety about fever, and yet fever does not automatically require therapy. It rarely causes harmful effects in itself, according to several scientific studies. Repeated low-grade fever may occur as the result of physiological changes in the body and may not cause any discomfort to the student.

Students with fever over 100.4°F (38°C) may need to be sent home from school, especially if other symptoms are apparent. The student’s parent/guardian should be notified.

Symptomatic treatment of any illness in the school setting should be avoided unless the parent/guardian has complied with school policy on the administration of oral medications for symptomatic treatment of illness or injury. Aspirin should not be administered for viral illnesses because of the possible association with Reye syndrome.

Skin Color

A pasty, pale appearance may signal an illness, especially if it is a change from a student's normal skin color. A new yellow tinge to the eyes or skin, or a flushed appearance with rosy cheeks and glassy or red eyes, may also indicate an illness.

Rash

The diagnosis of rashes can be very difficult and even a licensed health care provider may require lab tests to confirm whether a certain disease is present. If a referral to a licensed health care provider is made, advise the student's parent/guardian to inform their licensed health care provider's office staff of the presence of a rash illness so that appropriate medical isolation can be arranged during the visit.

Itchiness of the rash is not a signal of infectiousness or noninfectiousness, however, itching should also be evaluated. A rash can be a symptom of a serious or nonserious condition.

Change in Bowel Habit

Diarrhea may accompany a number of infectious diseases. Conversely, sluggishness of the bowels and constipation may occur, sometimes with abdominal cramps. Cramps can be due to the inactivity of the ill student and the dehydration that often occurs during infections.

Nasal Discharge and Obstruction

Clear nasal discharge may signal a cold or it may indicate an allergic reaction, especially if accompanied by watery eyes. Yellow or green discharge may indicate an infection (usually viral) or obstruction by a foreign body. Breathing may be noisy. If breathing is labored, immediate medical referral is indicated.

Sore Throat

A sore throat can be a minor problem. However, it may also accompany potentially more significant infections such as streptococcal pharyngitis, infectious mononucleosis, or even serious generalized illnesses. Check for accompanying fever and notify the parent/guardian. Recommend medical evaluation if the sore throat is accompanied by fever, difficulty swallowing, and/or swollen lymph nodes (glands).

Cough

Coughs accompany some chronic conditions, allergic conditions, and many infectious diseases. Persistent coughs (lasting 3 weeks or more), especially with other symptoms such as fever, loss of appetite, and weight loss, need medical evaluation.