



# POLICY

Category	Approval		
Series 500: Support Services	Effective	Administration	Board
	2/22/10	12/4/09	2/22/10
	Revised		For Review
	8/26/2024		2028

## **STUDENT COMMUNICABLE DISEASES**

**MTC 514**

Students who are afflicted with a communicable, contagious, and/or infectious disease or who are infected with communicable parasites or who are liable to transmit such a disease or parasite may be excluded from school attendance.

A determination of whether an infected student be excluded from the classroom or school activities shall be made on a case-by-case basis, under the direction of the Director of Student Success or designee.

In situations where the decision requires additional expertise and knowledge, the Director of Student Success will refer the case to an advisory committee for assistance in the decision making.

The advisory committee may be composed of:

- 1) a representative from the State Health Department
- 2) the student's physician
- 3) the student's parents or guardian(s)
- 4) the Director of Student Success or designee.

In making the determination, the advisory committee shall consider:

- 1) the medical condition of the student
- 2) the expected type(s) of interaction with others in the school setting
- 3) the impact on both the infected student and others in that setting
- 4) the South Dakota Department of Health guidelines and policies
- 5) the recommendation of the Davison County Health Officer, which may be controlling

The advisory committee may officially request assistance from the State Department of Health.

Public information will not be revealed about the student who may be infected. If the student is permitted to remain in the school setting, the following procedure will be followed by the Director of Student Success:

Information will be provided, as appropriate, to school employees who have regular contact with the student as to the student's medical condition and other factors needed for consideration in carrying out job responsibilities.

Health guidelines for school attendance are established and interpreted within the context of the case. The guidelines are not inclusive but are available to be used as a resource.

Instruction in appropriate handling of blood and body fluids will be provided. Hand washing after contamination, food preparation and health/hygiene care performed in different sink and work areas, maintenance cleaning and other personal hygiene measures are part of creating a healthy environment.

REFERENCE: Control of Communicable Diseases, 14<sup>th</sup> Ed., 1985--Abram S. Benenson, Editor.

**STUDENT COMMUNICABLE DISEASE GUIDELINES**

Numerous communicable diseases may affect a college-age population and/or school staff. Some of these have a high degree of communicability. Some are life threatening in nature. Some are both.

<b>Disease and Incubation* Period</b>	<b>Rules for School Attendance</b>
Acquired Immune Deficiency Syndrome (AIDS) 6 months-five years	Determination will be made by the Advisory Committee as outlined in the Communicable Disease policy.
Chicken Pox 14-21 days	The student may attend school after all pox are dry and scabbed. Adults may get 'shingles' with exposure. Persons who are immunosuppressed – e.g. leukemia or HIV – are at risk for potentially fatal disease.
Cytomegalovirus (CMV) Salivary Gland Viruses	The student may attend school. Precautions should be taken by contacts with immunosuppression anti-cancer or organ transplants as well as anyone with suspected or known pregnancy. (May cause interuterine death or severe problems in newborns.) Good hand washing in all cases should eliminate risk of transfer of infection.
Fifth Disease (Erythema Infectiosum) 6-14 days	The student may attend school with physician's permission.
Giardiasis (Intestinal Protozoan Infection) 5-25 days or longer	The student may attend school after the third day of drug treatment. Good hand washing in all cases should eliminate risk of transfer of infection.
Herpes Simplex 2-12 days	The student may attend school during an active case if the area of lesion is covered.
Impetigo Variable 4-10 days	The student may attend school if treatment is verified and covered or dry.
Infectious Hepatitis 15-40 days Average 25 days	The student may attend school with physician's written permission.
Measles (Red, Hard, Rubeola, 7-day) 8-14 days	The student may attend school after a minimum of 7 days. Students who have had contact with measles may attend school if immunization is up to date.
Infectious Mononucleosis (Glandular Fever) 2-6 weeks	The student may attend school with physician's permission. The student may need adjusted school days and activities.
Mumps 12-21 days	The student may attend school after swelling has disappeared.
Pediculosis (Lice, Crabs)	Students are sent home for treatment if live lice are observed. Students are encouraged to comb out all nits. Students may be checked before returning to school. After repeated infestation of the same students, the student may be excused until all nits are removed.
Rubella (3-day German measles) 14-21 days	The student may attend school after a minimum of 4 days. Prevent exposure of pregnant students and staff.
Scabies (7-year itch, Mites)	The student may attend school after treatment.
Streptococcal Infections (Scarlet Fever, Scarletina, Strep Throat) 1-3 days	The student may attend school 24 hours after initiating oral antibiotic therapy, and clinically well.
Other – as declared by health officials	Determination for return to classes will be made by the Advisory Committee as outlined in the Communicable Disease policy. Guidelines from the Center for Disease Control and the South Dakota Department of Health will be applied.

\*Time interval between initial contact with an infectious agent and the first sign or symptom of the disease.

All communicable and chronic disease should be reported to the Director of Student Success.

LEGAL REF.: SDCL 13-28-7.3

6/27/2016 – Responsible personnel updated to align with MTI's organizational structure. Language regarding students' ability to practice personal hygiene was removed.

6/8/2020 – Added a contingency category for how MTI will handle other communicable diseases not specifically listed in the policy. Responsible personnel updated to align with MTI's organizational structure.

8/26/2024 - Responsible personnel updated to align with MTC's organizational structure.