Rotavirus

You are being provided with this fact sheet:

☐ because you or your child may have been exposed to rotavirus. If you believe your child has developed rotavirus, contact your medical provider. Notify your child care provider or preschool immediately after the diagnosis has been made.

☐ for informational purposes only.

What is rotavirus?
Rotavirus is a virus that is easily spread among people, especially children, worldwide. Nearly all children have been infected by rotavirus by age 3. Rotavirus causes gastroenteritis (commonly called “stomach flu”) and usually affects children between 6 and 24 months of age. Adults can also get the rotavirus, but often times the virus does not make an adult very ill, as it would a child.

What are the symptoms of rotavirus?
Symptoms of illness appear 2 to 4 days after an individual is exposed to rotavirus. Symptoms primarily include vomiting and watery diarrhea, often with fever* and abdominal pain. Symptoms usually last for 3 to 8 days.

How is rotavirus spread?
The virus is spread by a fecal-oral route, usually through poor handwashing practices after using the toilet or diapering a child. Because the virus is stable in the environment, transmission can occur through ingestion of contaminated water or food and contact with contaminated surfaces. The virus is present in the stool of infected individuals before diarrhea begins and can persist for up to 3 weeks after the diarrhea stops.

Who is at risk for rotavirus?
Anyone can get rotavirus, but children are definitely more at risk of having symptoms of diarrhea and fever. Repeat infections are common, but tend to be less severe than the initial infection. People can easily be exposed to rotavirus in group settings, such as schools and child cares. Household members of a person who has rotavirus are also at increased risk of getting the virus.

How is rotavirus diagnosed?
Rotavirus is very difficult to diagnose and requires extensive lab testing to gain accurate results.

How is rotavirus treated?
No specific medication is available for the rotavirus. General comfort measures should be followed and provide plenty of fluids to prevent dehydration. Fever reducing medication, such as acetaminophen, may be given if the child has a fever. NEVER GIVE ASPIRIN TO A CHILD WITH FEVER, as this has been associated with Reye Syndrome.

* Fever is defined as: temperatures above 100°F (37.8°C) under the arm or 101°F (38.3°C) orally.
How is the spread of rotavirus reduced?

- Wash hands well with soap and warm water after using the bathroom or changing diapers. Make sure children also wash their hands well.
- Wash hands before and after preparing food and bottles.
- Toys and hard surfaces should be washed with soapy water, rinsed, and then thoroughly sanitized according to product instructions. Toys that may go in the mouth and food contact surfaces should be rinsed after sanitizing.
- If a hard surface (such as counter tops, toilets, floors) is contaminated with vomit or stool, wipe up as much as possible with paper towels. Wear disposable gloves, clean the surface with soapy water, and then sanitize the area according to product instructions. Carpets can be sanitized by steam cleaning.
- Child care staff should consult with the Child Care Health Outreach Program at (425.339-5278) for additional recommendations on cleaning and sanitizing.
- The U.S. Food and Drug Administration has approved a vaccine to prevent rotavirus illness in children. Parents can discuss this vaccine with their child’s pediatrician.

Exclude from group setting?
Children with symptoms should be excluded from child care or school until the symptoms stop.

Handwashing
Handwashing is one of the primary ways to stop the spread of disease. The following steps are recommended for good handwashing:

1. Turn on warm water.
2. Apply soap to hands.
3. Rub soap over tops and palms of hands and around fingernails. Scrub hands for approximately 20 seconds.
4. Rinse hands with running water.
5. Dry hands with a clean, disposable towel.
6. Repeat the process when preparing foods.

Reference:
American Academy of Pediatrics
- Managing Infectious Diseases in Child Care and Schools page 145.

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