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 health care provider. Notify your child care provider or preschool if a diagnosis of rotavirus is 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 diarrhea and vomiting, and usually affects children under 24 months of age. Adults can also get rotavirus, but typically the illness for adults is much more mild. Rotavirus was the most common cause of diarrhea in infants until a vaccine became available in 2006.

What are the symptoms of rotavirus?
Symptoms of illness appear 1 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. Some cases are mild, but some are severe enough to require hospitalization due to severe dehydration.

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, or from a child contaminating their hands and then touching objects that other children touch. Because the virus survives a long time in the environment, transmission can occur through drinking contaminated water, eating contaminated food, or contact with contaminated surfaces. The virus is present in the stool of infected individuals before diarrhea begins. Individuals are most contagious while symptomatic and for several days after, and can sometimes continue to shed the virus for over a week.

Who is at risk for rotavirus?
Anyone can get rotavirus, but children are at a higher risk of severe symptoms. The first infection is usually the most severe. Repeat infections are common, but tend to be less severe than the initial infection. Although vaccination has significantly decreased the number of hospitalizations from rotavirus, it is still possible to get rotavirus even if you are immunized. 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 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*, as this has been associated with Reye Syndrome.

Vaccines are available to help prevent rotavirus infection. These vaccines are typically available starting at 6 weeks of age, should be started before reaching 15 weeks of age, and must be completed before reaching 8 months of age.

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.
- Child care staff should consult with the Child Care Health Outreach Program at 425.252.5415 or (their own health department if not located in Snohomish County) 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. It can only be given between 4 and 8 months of age.

Exclude from group setting?
Children with symptoms should be excluded from child care or school until stool is fully contained within a diaper (or no accidents for toilet-trained children), and the number of daily stools does not exceed more than 2 stools above the child’s typical pattern.

* Fever is defined as a temperature above 101°F (38.3°C) by any method; or above 100.4°F (38.0°C) for infants less than 2 months old.

References:
- American Academy of Pediatrics
  - Managing Infectious Diseases in Child Care and Schools, 4th ed.
- American Academy of Pediatrics
- Centers for Disease Control and Prevention (Website)
- Marshall, Gary M, MD
- American Academy of Pediatrics, American Public Health Association, National Resource Center for Health and Safety in Child Care and Early Education
  - Caring for Our Children, 3rd ed.