Conjunctivitis (Pinkeye)

You are being provided with this fact sheet:

☐ because you or your child may have been exposed pinkeye (conjunctivitis). If you believe your child has developed pinkeye, contact your health care provider. Notify your child care provider or preschool if a diagnosis of pinkeye is made.

☐ for informational purposes only.

What is pinkeye (conjunctivitis)?
Conjunctivitis is inflammation of the eye. It is commonly called pinkeye. It is commonly caused by bacteria or viruses, but may also be caused by allergens, foreign bodies in the eye, or other irritants.

What are the symptoms of pinkeye?
Symptoms of pinkeye depend on the cause, but commonly include redness and irritation of the eye. As a result, the eye may be itchy, sensitive to light, or water excessively. If pinkeye is caused by a bacteria, there is often green or yellow discharge that results in eyes being crusted shut after sleep.

How is pinkeye spread?
Pinkeye is very contagious and can be caused by bacteria or viruses. Pinkeye can be spread directly or indirectly through contact with discharge from the eye or upper respiratory tract of an infected individual. Touching one’s eye with unwashed hands is a common route for viruses and bacteria to enter the eye. Sharing personal items that come in close contact with the eye, such as makeup or swimming goggles, can spread the infection. Coughing and sneezing may also spread the discharge.

Who is at risk for pinkeye?
Any person who comes in contact with the discharge from an infected eye is at risk for pinkeye. Infections occur at any age. People living in close quarters may be more likely to become exposed. Bacterial conjunctivitis is more common in children than adults.

How is pinkeye diagnosed?
The diagnosis of pinkeye is based on symptoms observed by a health care provider.

How is pinkeye treated?
It is important to know the cause of the pinkeye to provide the correct treatment. Bacterial conjunctivitis is treated with antibiotics. Symptoms generally improve 2-3 days after starting treatment. Viral conjunctivitis does not respond to antibiotics. The difference between the two can only be determined by a health care provider.
How is the spread of pinkeye reduced?

- Using good handwashing techniques can reduce transmission of pinkeye.
- Avoid sharing towels and personal items, such as makeup, with a person who has pinkeye.
- Use a sanitizing solution on toys and surfaces.
- Teach children to cough or sneeze into their upper sleeve or a tissue, not their hands. Dispose of facial tissues properly and wash hands after throwing it away.

Handwashing

Handwashing is one of the primary ways to stop the spread of disease. Management of pinkeye should include frequent hand hygiene to prevent the spread. Ensure that the towels used to dry hands are disposable and not re-used by others.

Exclude from group setting?

Conjunctivitis (pinkeye) is considered a “nuisance” illness. Children and staff with pinkeye should not be excluded from child care unless:

- they are unable to participate in activities;
- care for other children would be compromised because of the care required by the child with pinkeye;
- they meet other exclusion criteria, such as fever* with behavior change;
- a health care provider or health department recommends exclusion of the person with pinkeye.

Child care facilities may choose to include pinkeye as a criterion for exclusion, but it is not required by law and it is not considered best practice. It is recommended that individuals with eye discharge be excluded from school or child care at the end of the day until the drainage is gone or until the child has been evaluated by a health care provider.

Children and staff in close contact with a person with pinkeye should be observed for symptoms and referred for evaluation, if necessary. If two or more children in a group care setting develop pinkeye in the same period, seek advice from the program’s child care health consultant or local health department about how to prevent further spread. Children who have severe prolonged symptoms should be evaluated by their health care provider. If the cause of pinkeye is determined to be bacterial and requires antibiotics, then the child or staff member should be on antibiotics for at least 24 hours before returning to the child care or school setting.

* 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 younger than 2 months old.

References:

American Academy of Pediatrics
- Managing Infectious Diseases in Child Care and Schools, 4th ed.

Caring for Our Children, 3rd Edition
- Standard 7.5.1.1: Conjunctivitis (Pinkeye)

Centers for Disease Control and Prevention (Website)