



Dear Parent or Guardian:

A student at OPRF who has at least one class period in common with your student has been diagnosed with pertussis (whooping cough). The infectious period for this case is January 12, 2015 to February 13, 2015.

Pertussis is a highly infectious illness that is easily transmitted through coughing and sneezing and may last for several months. Symptoms of pertussis may appear 5 to 10 days following exposure but can take up to 21 days. The first symptoms of pertussis are similar to those of a common cold: a runny nose, low-grade fever and a mild occasional cough. In pertussis, unlike the common cold, the cough can become severe – and may include a distinctive “whooping” sound - and progress to vomiting. Although most people recover completely from pertussis, complications from the disease can be severe. The most serious consequences of pertussis occur among infants, the aged and those with a weakened immune system. The Illinois Department of Public Health has recommended that all close contacts to a person with pertussis receive antibiotic treatment for pertussis even if they have been vaccinated against it.

#### Recommendations

1. If your student has a severe cough:
  - Keep your student home from school and activities, such as sports.
  - Make an appointment with your child’s doctor as soon as possible and tell the doctor that your child may have been exposed to pertussis.
  - If your child is diagnosed with pertussis, let the school know and keep the child away from school and other group activities until after receiving 5 days of antibiotics. Request doctor’s note for the school.
  - If the doctor determines your child does not have pertussis, please request a note from the doctor to that effect before the child returns to school.
2. If your child has been told by a doctor that they have a weakened immune system, your child’s doctor may choose to prescribe antibiotics to prevent pertussis even if the child is not coughing.
3. If your child lives with any of the following people and may have been exposed to pertussis, ask your child’s doctor to prescribe antibiotics as soon as possible to your child, even if he or she is not coughing.
  - A woman who is pregnant,
  - An infant younger than 12 months old, or
  - Anyone with a weakened immune system.

Please make sure your family’s vaccinations are up-to-date. Protection against pertussis from the childhood vaccine, DTaP, decreases over time. Older children and adults, including pregnant women, should get a pertussis booster shot called “Tdap” to protect themselves and infants near or around them. If you need the Tdap vaccine, contact your doctor or call to find a vaccine provider near you.

If you bring your child to a doctor for pertussis, please show the reverse side of this letter to him or her. If you have any questions or concerns, please call.

Sincerely,

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Dear Colleague:

Your patient may have been exposed to pertussis.

**For Exposed Patients without Symptoms:**

As a precaution to protect vulnerable individuals, we are recommending antibiotic prophylaxis for this patient if he or she shares a household with a woman who is pregnant or an infant less than 12 months old. Alternatively, this patient is being referred to you because he or she has an immunodeficiency or lives with a person with an immunodeficiency and may require antibiotic prophylaxis to help prevent pertussis.

**For Exposed Patients with Symptoms:**

As the Oak Park Health Dept. continues to work with the Centers for Disease Control and Prevention (CDC), we have developed the following guidelines for assessing and treating patients at this time:

**For patients coughing <21 days:**

1. Collect nasopharyngeal swabs or aspirate for pertussis PCR testing and/or culture.
2. Do not delay treatment with appropriate antibiotics while waiting for laboratory results if there is no alternative diagnosis.
3. Document and communicate all clinical decisions related to pertussis to the school (this includes children for whom pertussis has been ruled out).
4. Strongly consider antibiotic prophylaxis for all household members if a pregnant woman, an infant less than 12 months old, or anyone with a weakened immune system lives in the household.

**For patients coughing ≥21 days:**

1. Testing for pertussis is not recommended. Testing after 3 weeks of cough is of limited benefit since PCR and culture are only sensitive during the first 2-3 weeks of cough when bacterial DNA is still present in the nasopharynx.
2. Treatment is no longer necessary after 21 days, with the following exception: infants and pregnant women in their third trimester should be treated up through 6 weeks after cough onset.
3. The patient is no longer infectious and can return to school.

**For all households:** Administer Tdap vaccine to contacts 11 years and older who have not been previously vaccinated with Tdap, or refer for vaccination].

Additional clinical and laboratory guidance may be found on the CDC website: [www.cdc.gov/pertussis](http://www.cdc.gov/pertussis). Should you have any questions or concerns, please call.

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