

## FAQs for Schools: Varicella (Chickenpox) and Shingles

### **We have a case of chickenpox in our school. Do we need to send a letter to notify parents?**

The final decision regarding any public communication is ultimately between the school and local health department. In general, however, school-wide letters are not recommended when only a single case has occurred. Instead, any exposed immunocompromised individuals or pregnant women should be notified of the potential exposure on a case-by-case basis. The school may also consider notifying parents of exposed, unvaccinated students (e.g., students in the same classroom or with shared lunch or recess periods) of the potential exposure on a case-by-case basis so that they can seek vaccination.

### **I have a student recently diagnosed with chickenpox. How long do they need to be excluded from school?**

People with chickenpox must remain excluded from school, daycare, work or other public settings until all of the chickenpox lesions have crusted or, if they do not have vesicular lesions, until no new lesions appear in a 24-hour period.

### **We've had a few cases of chickenpox in our school. How do we know if it's an outbreak?**

Your local health department will make a formal determination regarding whether an outbreak is occurring. Per the Indiana Communicable Disease Rule, an outbreak of varicella is defined as five or more cases if the cases are under 13 years old or three or more cases if the cases are 13 years old or older. The cases must reside in at least two separate households. In suspected outbreaks, lab confirmation of as many cases as possible is preferred but not required.

### **We have unvaccinated students in school who were recently exposed to another child with chickenpox. Do they need to be excluded?**

Exclusions for unvaccinated students are required only when an outbreak has been formally declared by the local health department. If an outbreak has not been declared, unvaccinated students, even if they are siblings or household contacts of a case, do not need to be excluded unless they develop symptoms. If symptoms develop, they should be evaluated by a healthcare provider and, if diagnosed with chickenpox, stay home from school until all lesions have crusted or, if they do not develop vesicles, until no new lesions appear in a 24-hour period.

### **Whom should I contact to report cases of chickenpox in our school?**

You should report suspected cases of chickenpox to your local health department. If your local health department cannot be reached, you may report cases to the Indiana State Department of Health (ISDH) at 317-233-7125. Please include the child's name, date of birth, parent contact information and contact information for the diagnosing provider (if known) so that the local health department can follow up appropriately.

### **Aren't doctors supposed to report cases of chickenpox?**

Yes, per the Indiana Communicable Disease Rule, healthcare providers are required to report cases of chickenpox. Sometimes, however, providers may fail to report cases, so reports from school nurses are often a health department's first notification that cases have occurred.

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### **What is “breakthrough” varicella, and how is it different from typical varicella?**

Breakthrough varicella is chickenpox that occurs in a previously vaccinated person more than 42 days after vaccination. Cases of breakthrough varicella usually have fewer lesions than a typical varicella case, often fewer than 50. The rash may also be maculopapular without progressing to vesicles. Breakthrough varicella can be difficult to distinguish from other conditions, such as insect bites, allergic reactions or other skin conditions, so students suspected of having breakthrough varicella should be evaluated by a healthcare provider and, if possible, should have lab testing conducted to confirm a diagnosis of varicella.

### **Is there any special cleaning we need to do if we’ve had a case or outbreak of chickenpox?**

No. The varicella-zoster virus does not live long outside the body, so no additional cleaning beyond your school’s routine cleaning protocol is required.

### **Do students or staff with shingles (herpes zoster) need to be excluded from school?**

In general, people with shingles do not need to be excluded as long as the lesions can remain completely covered. People with shingles should also avoid touching the lesions, practice good handwashing and avoid close contact with individuals who are not immune to varicella. If the shingles lesions cannot be covered, they should consider staying home until all of the lesions crust over.

### **We had a student/staff member recently diagnosed with shingles. Do we need to notify people that they were potentially exposed?**

While communication decisions are always at the discretion of the local health department, school-wide notification is generally not recommended for shingles. Transmission of the varicella-zoster virus from someone with localized shingles requires direct contact with the lesion fluid of an infected person, so typical interactions that would occur in a school setting usually would not result in significant exposure. Coming into contact with someone with shingles will not cause shingles, as shingles is a reactivation of the varicella-zoster virus. People who are not immune to varicella, however, may develop chickenpox if exposed to someone with shingles. If any pregnant or immunocompromised individuals were known to have direct, close contact with someone with shingles, they should be notified of the possible exposure on a case-by-case basis. Consult your local health department or ISDH if additional guidance is needed.

### **Whom can I contact if I have additional questions about chickenpox or shingles?**

You may contact your local health department or the ISDH Epidemiology Resource Center at 317-233-7125. Additional information can be found at the resources listed below:

- ISDH [Communicable Disease Guide for Schools](#)
- ISDH [Chickenpox](#) and [Shingles](#) websites
- Centers for Disease Control and Prevention (CDC) [Chickenpox](#) and [Shingles](#) websites