

EXPOSURE TO PERTUSSIS

Information for managers

- **Summary for Immediate action:**
 - **Begin the process for appropriate droplet isolation procedures and the use of a mask to enter the room.**
 - **Notify your Infection Control Practitioner if you have a patient who is newly diagnosed with Pertussis**
 - **Compile a list of names, social security numbers, and phone numbers of faculty/staff who had direct face to face contact with this patient without wearing a mask.**
 - **The ICP will provide coordination and consultation to guide the identification process.**
 - **Pertussis is transmitted via respiratory droplets. Persons most at risk have had direct contact, within 3 feet of the patient, without wearing a mask.**
 - **Faculty/Staff may continue to work as usual, and will be evaluated by an Occupational Health Nurse for appropriate preventive treatment.**
 - **Faculty/Staff who are on the exposure list must contact the Occupational Health Clinic if they develop a cough during the incubation period (6-20 days).**

Frequently Asked Questions

- **What is pertussis and how is it spread?**

Pertussis is a bacterial infection of the respiratory tract which generally begins with mild upper respiratory symptoms and can progress to severe attacks of coughing (paroxysmal stage), often with a characteristic inspiratory whoop. It is caused by Bordetella pertussis. Transmission occurs by close contact with respiratory secretions from an infected person.

- **What is considered to be an exposure to pertussis?**

A person is considered to be exposed if there is inhalation of droplets and discharges from the respiratory tract of an infected person. This can occur if you are within 3 feet of a patient and you are not wearing a mask. Patients are most contagious during the early stage of the disease, before the onset of the cough. Staff who wear a mask for all contacts are not exposed.

- **What should I do if a staff member is exposed?**

If a staff member is exposed to someone with pertussis, he/she should be evaluated to see if chemoprophylaxis would be right for him/her.

- **What is chemoprophylaxis?**

Chemoprophylaxis is antibiotic therapy given to prevent infection and secondary spread of the disease. Chemoprophylaxis should be given as soon as possible after exposure, preferably within 24 hours. It is recommended for household and other close contacts. There are several options for adults with pertussis exposures: antibiotics will be chosen based on the exposed person's medical history and the current CDC guidelines.

- **What is the incubation period?**

The incubation period (the time between exposure to infection and the appearance of the first symptom) is 6-20 days, usually 7-10 days.

- **What if the exposure occurs at work?**

In the event of an exposure within the Medical Center, Infection Control will notify the VOHC (Vanderbilt Occupational Health Clinic, Room 640 Medical Arts Building, phone 936-0955) of the faculty/staff members who have been exposed. The Infection Control Practitioner will assist the manager to develop a list of the full names, social security numbers, and, in some instances, phone numbers of all exposed personnel; you (the manager) may be asked to provide or confirm this information for the ICP.

The VOHC will then contact the faculty/staff members to discuss chemoprophylaxis. You (the manager) will need to complete a Tennessee First Report of Work Injury and forward this to the Office of Risk Management (Room 610 Oxford House, phone 936-0660).

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