



Dear Parent or Guardian:

Your child may have been exposed to pertussis (whooping cough). Pertussis is an infection that affects the airways and is easily spread from person-to-person by coughing or sneezing. Its severe cough can last for weeks or months, sometimes leading to coughing fits and/or vomiting.

Anyone can get pertussis, but it can be very dangerous for certain groups, including infants and those with other health problems. Infants can become seriously ill if they get pertussis. They are often exposed by family members, especially mothers and caregivers. People with cystic fibrosis, asthma or any condition that weakens the immune system are also at a higher risk for complications from pertussis.

Therefore, the Northern Kentucky Health Department recommends that:

1. If your child has a cough:
 - Keep your child home from school and activities, such as sports or play groups. See items 4 and 5 about when your child can return to these activities.
 - Contact your child's health care provider as soon as possible, and tell the provider that your child may have been exposed to pertussis. If you bring your child to a provider for pertussis, please show the reverse side of this letter to him or her.
2. If you or your child has been told by a health care provider that you/he/she has pre-existing health conditions that may be aggravated or made worse by pertussis, ask a health care provider to prescribe antibiotics as soon as possible to prevent pertussis. Antibiotics should be given to a child with those pre-existing health conditions if they may have been exposed to pertussis, even if he or she 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 health care provider to prescribe antibiotics to your child as soon as possible, even if he or she is not coughing:
 - A woman who is pregnant
 - An infant younger than 12 months old
 - Anyone with pre-existing health conditions that may be aggravated or made worse if he/she develops pertussis.
4. If your child has been diagnosed with pertussis by his or her health care provider:
 - Ask your child's doctor for a note that states your child has pertussis.
 - Ask your doctor about post-exposure antibiotic prophylaxis for other family members.
 - Tell the school or child care provider that your child has been diagnosed with pertussis. School officials will require that you keep your child home from school and activities, such as sports or play groups, until your child has been on antibiotics to treat pertussis for five days.
5. If your child's health care provider says your child does NOT have pertussis:
 - Ask for a note from the doctor telling the school that your child's cough is NOT caused by pertussis and that your child can return to school and other activities at any time.

In addition, **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, Tdap, to protect themselves and infants near or around them. If you need the Tdap vaccine, contact your health care provider or call the Health Department 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 us at 859.363.2071.

Sincerely,

Carolyn Swisshelm, RN
Communicable Disease Nurse
Northern Kentucky Health Department



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 only if he or she:

- Shares a household with a woman who is pregnant or an infant less than 12 months old.
- Has a pre-existing health condition that may be exacerbated by a pertussis infection (for example, cystic fibrosis, asthma or immunocompromised persons).
- Lives with individuals with pre-existing health conditions at risk of severe illness or complications if they develop pertussis.

For exposed patients with symptoms:

As the Northern Kentucky Health Department continues to work with the Kentucky Department for Public Health and the Centers for Disease Control and Prevention, we have developed the following guidelines for assessing and treating patients for pertussis:

For patients coughing less than 21 days:

1. Collect nasopharyngeal swabs or aspirate for pertussis PCR testing and/or culture. Please **DO NOT order pertussis antibody testing**, as those antibody test results are not used for pertussis case classification by the local or state health department in Kentucky.
2. Do not delay treatment with appropriate antibiotics while waiting for laboratory results if there is if no alternative diagnosis for the patient's cough illness.
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 any of the following persons live in the household:
 - A pregnant woman
 - An infant less than 12 months old
 - Anyone with pre-existing health conditions at risk of severe illness or complications if they develop pertussis.

For patients coughing 21 days or longer:

1. Testing for pertussis is not recommended. Testing after three weeks of cough is of limited benefit since PCR and culture are only sensitive during the first two to three 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, aged 10 years and older, who have not been previously vaccinated with Tdap, or refer for vaccination. **Make sure that children have had recommended DTaP vaccinations for their age.**

Additional clinical and laboratory guidance may be found on the CDC web site: <http://www.cdc.gov/pertussis>

Should you have any questions or concerns, please call Carolyn Swisshelm, RN, at 859.363.2071.

Sincerely,

Joyce Rice, RN, MSPH
Epidemiology Manager
Northern Kentucky Health Department