

## List of Re-admission after illness

Illness A - Z	Re-admission after illness	Doctor's note	Exclusion of contact person	Vaccination available	Notify health department
<b>Conjunctivitis</b>	Bacterial: 24 h after starting the antibiotic therapy, otherwise after symptoms have subsided. Viral: Only once the virus is no longer detectable in secretions (usually no earlier than 2 weeks after onset of illness).	no	not necessary		x (if several children are infected)
<b>Impetigo</b>	24 h after antibiotic therapy and no signs of illness, otherwise after the the symptoms of the illness have subsided (healing of affected skin areas)	yes	not necessary		x
<b>Cholera, Vibrions</b>	After clinical recovery, including three negative consecutive stool test results at intervals of one to two days apart	yes	Up to 5 days after the last contact with the infected person, after which 1 negative stool sample must be provided. Written medical certificate required		x
<b>Diphtheria</b>	Re-admission possible if the result of a smear test (taken before the start of specific antibiotic therapy) shows no evidence of bacteria or shows only evidence of a non-toxicogenic Corynebacteria-strain or if 2 negative smear test results are obtained.	yes	For close contact persons: nasal/throat swab, preventive antibiotic therapy, medical supervision, checking vaccination status & if necessary completion of vaccination status	x	x
<b>EHEC</b>	for non-HUS-associated: 48 hours after resolution of symptoms without stool sample control  for HUS-associated: 48 hours after resolution of symptoms and after providing proof of 2 negative stool sample controls. This also applies to people who are excreting the virus without having symptoms.	yes	EHEC infected persons or those who are suspected to be infected are not allowed to visit or work in community facilities. This also applies to contact persons in whose household an illness or a suspected case of EHEC has occurred (§ 34 IfSG).		x
<b>Fever (from 38°C)</b>	24 h after being symptom-free	no	not necessary		
<b>Haemophilus influenza/ Type B meningitis</b>	Readmission after clinical recovery, at the earliest after a minimum of 24 h since an effective antibiotic therapy has been administered	no	Not required if implementation of Chemoprophylaxis	x	x
<b>Hand-Foot -Mouth-Disease</b>	Clinical recovery and healing (drying up) of the blisters	no	not necessary		
<b>Hepatitis A/ Hepatitis (virus-related)</b>	2 weeks after the onset of first symptoms or 1 week after appearance of icterus/jaundice. Re-admission of an infected person back to community facilities is possible if, according to medical opinion, a spread of the disease is no longer a concern.	no	Admission only after consultation with health department. Vaccination of contact persons and the exclusion from visiting facilities for people without immune protection against hepatitis A may be required. Exclusion not necessary: after previous exposure to the disease and after valid vaccination protection	Only for Type A	x
<b>Hepatitis B/C/D</b>	As soon as general well-being allows it. For children with unusually aggressive behavior (e.g., biting, scratching), bleeding tendencies, or acute, extensive skin diseases, an individual decision must be made by the health department.	no	not necessary	Only for Type B, successful Hep-B vaccination protects against Hep-D-virus infection as well	x

<b>Whooping cough (pertussis)</b>	5 days after the start of antibiotic therapy, otherwise 3 weeks after onset of first symptoms	no	not necessary as long as none of the respective symptoms occur	x	x
<b>Polio (poliomyelitis)</b>	Re-admission after consultation with professional experts and the responsible health department	yes	Re-admission after consultation with professional experts and the responsible health department	x	x
<b>Head Lice</b>	Re-admission possible after proper use of a product suitable for eradicating head lice infestation; additionally: carefully combing out hair with a lice comb	no	Contact persons must be examined for infestation. Exclusion is not possible if no infestation is detected. If lice or nits are detected, see "re-admission after illness"		x
<b>Scabies (seven-year itch)</b>	After proper application of medicine, clinical healing and proof of absence of living mites by a physician	yes	The health department decides on the criteria to be defined for the admission of contact persons		x
<b>Gastrointestinal Disease (stomach flu)</b>	After 48h of being symptom free, and only after formation of solid stool	no	not necessary		In case of acute accumulation (from 2 persons)
<b>Measles</b>	Re-admission after medical evaluation, no earlier than on the 5th day after exanthema onset	no	Without documented vaccination 14 days. Exclusion not necessary in case of: Documented vaccination protection, Post-exposure performed vaccination, confirmed immunity via antibody test/ or a previously undergone measles disease	x	x
<b>Meningococcal Diseases</b>	Possible after clinical symptoms have subsided, at the earliest after 24 h of starting effective antibiotic therapy	no	Exclusion of contact persons in whose household, according to medical judgment, an illness with or a suspicion of meningococcal infection has occurred. As a preventive measure, antibiotics are recommended for close contacts of infected persons.	x	x
<b>Mumps</b>	After clinical symptoms have subsided, at the earliest on the 5th day after the onset of the disease.	no	Without documented vaccination 14 days. Exclusion not applicable in case of: Documented proof of vaccination, post-exposure vaccination, confirmed immunity via antibody test	x	x
<b>Stomatitis / Herpes-simplex virus type 1</b>	Recommendation to keep children with pronounced stomatitis at home. No legal ban on visiting community facilities for children. Special attention regarding hygiene measures! After about a week, blisters will dry up and heal without scarring. Only then can the virus no longer be transmitted	no	not necessary		
<b>Paratyphoid fever</b>	After clinical recovery and 3 consecutive negative stool samples	yes	The health department decides on the criteria to be defined for the admission of contact persons		x
<b>Plague</b>	Readmission exclusively after consultation with professional experts and the responsible health authorities.	yes	Re-admission 72 hours after the start of appropriate post-exposure prophylaxis. And after consultation with experts and the responsible health authorities.		x

<b>Rubella</b>	After all symptoms have subsided, at the earliest on the 8th day after the onset of exanthema. In case of absence of fever and with medical certificate also possible with rash	no	Not required. Pregnant women should avoid the community facilities	x	x
<b>Noro Virus</b>	48 hours after clinical symptoms have subsided	no	Not required. Stool tests via the health department only in case of group illness (for more than 2 persons)		x
<b>Rotavirus infection</b>	48 hours after clinical symptoms have subsided	no	Children under the age of 6 who have, or are suspected of having, contagious vomiting or diarrhea are temporarily prohibited from attending community facilities such as schools or day care facilities	x (oral vaccination for toddlers)	x
<b>Erythema infectiosum (fifth disease)</b>	After all symptoms have subsided. In case of absence of fever and with medical certificate also possible with rash	no	Not required. Pregnant women should avoid the community facilities		x
<b>Scarlet fever or other Streptococcus pyogenes Infection</b>	Readmission 24 h after the start of an effective antibiotic therapy and no symptoms. Without antibiotic therapy at the earliest 2 weeks after the resolution of all symptoms.	no	Not required. Education about risk of infection and possible symptoms of disease.		x
<b>Shigellosis</b>	After all symptoms have subsided and with proof of 2 consecutive negative stool samples (first stool sample no earlier than 24 hours after resolution of diarrhea symptoms or 48 hours after the end of the antibiotic therapy).	yes	The health department decides on the criteria to be defined for the admission of contact persons		x
<b>Tuberculosis</b>	Re-admission is always a case-by-case decision and possible with no evidence of drug resistance, in case of positive clinical response to therapy and therapy adherence usually 3 weeks after the start of treatment. In the case of positive samples, 3 microscopically negative sputums are serve as reference and in the case of children, a positive clinical response to therapy and a minimum of 21 days of appropriate therapy . In case of MDR-TB, at least one negative culture is recommended.	yes	Not required unless symptoms suspicious of tuberculosis are present. Required for symptomatic contacts who resist necessary examination of surrounding areas		x
<b>Viral hemorrhagic Fever</b>	Only after consultation with professional experts and the responsible health authority.	yes	Required for the duration of the maximum incubation period. Re-admission takes place in coordination with the responsible health authority. Outpatient health control check		x
<b>Chickenpox</b>	One week after onset of an uncomplicated course of illness. If no more blisters are active (meaning filled with viral fluids). If any blisters remain they have to be dried out or encrusted.	yes	Yes, appr. 1 week	x	x