Cerro Gordo County experienced a significant pertussis outbreak in 2012. To lessen the effects of future outbreaks, several community partners worked together to improve our area’s current processes and develop helpful tools for the medical providers to utilize during the event of another pertussis outbreak.

Enclosed you will find the following documents for your use:

- Provider Pertussis Algorithm
  - Please note this algorithm provides guidance for standard cases of pertussis. There may be cases that deviate from the algorithm due to a patient’s unique circumstances.

- Release to Return to School/Childcare Form Pertussis Fact Sheet
  - School and Childcare Centers are requesting this form to be completed by the medical provider if a child is coughing in order for them to return to their facility.

- Health Alert Example
  - Example of a revised health alert that Public Health will send out during the event of a pertussis outbreak.

Please feel free to contact the Cerro Gordo County Department of Public Health if you have any questions or need assistance @ 641-421-9323. You may access a copy of this toolkit at www.cghealth.com under the Disease A-Z section: Pertussis-Medical Provider Pertussis Toolkit.
Vaccine Recommendations: **DTaP:** Children should receive 5 doses of DTaP, one dose at each of the following ages: 2, 4, 6, 15-18 months, and 4-6 years of age. **Tdap:** Adolescents 11 through 18 years of age (preferably at age 11-12 years) and **Adults** 19 and older should receive a single dose of Tdap, especially if in close contact with infants. **Expectant mothers** should receive Tdap during each pregnancy, preferably at 27 through 36 weeks gestation.
Release to Return to School/Childcare

Child’s Name: ______________________________

☐ I have examined said child and he/she is free from communicable diseases and may return to school and/or childcare without exclusions.

☐ I have examined said child and he/she may not return to school and/or childcare until ____________________.

(Please note a child tested or prescribed medication for pertussis shall not attend school or childcare until five (5) full days of antibiotics are completed (e.g.: child began antibiotics on Friday may return on Wednesday)).

Medical Provider’s Signature: ______________________________

Date: _____________________
Pertussis Health Alert

Date: May XX, 20XX
To: All Cerro Gordo County Providers, Clinics, & Lab Directors
From: Karen Crimmings, RN, Disease Prevention & Investigation Service Manager
Phone: 641-421-9323 Fax: 641-421-9350
Re: Pertussis in Cerro Gordo County

BACKGROUND:
A case of pertussis (whooping cough) recently occurred in Cerro Gordo County. The Cerro Gordo County Department of Public Health is conducting an outbreak investigation to identify further cases and others who may have been exposed. At this point, we have identified four cases, three school-aged children that attend public schools and an adult, all from the same household.

The Cerro Gordo County Department of Public Health has sent letters home with students to notify the parents that their child has been in close contact with a case of pertussis. Only those students that have been indentified as having close contact with a case received the letter. The letter advises the parents to contact their physician for preventative antibiotic treatment.

Because pertussis has now been identified in the area we ask that you begin evaluating patients for symptoms of pertussis. Symptoms compatible with pertussis are a prolonged cough, paroxysmal cough or post-tussive cough with vomiting. In adolescents and adults, pertussis often presents as an illness with a long lasting cough. Please refer to your Provider Pertussis Algorithm for further information.

<table>
<thead>
<tr>
<th>Age group</th>
<th>Azithromycin</th>
<th>Erythromycin</th>
<th>Clarithromycin</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt;1 month</td>
<td>Recommended agent. 10 mg/kg per day in a single dose for 5 days (only limited safety data available)</td>
<td>Not preferred. Erythromycin is associated with infantile pyloric stenosis. Use if azithromycin is unavailable. 40-50 mg/kg per day in 4 divided doses for 14 days</td>
<td>Not recommended (safety data unavailable)</td>
</tr>
<tr>
<td>1-5 months</td>
<td>10 mg/kg per day in a single dose for 5 days</td>
<td>40-50 mg/kg per day in 4 divided doses for 14 days</td>
<td>15 mg/kg per day in 2 divided doses for 7 days</td>
</tr>
<tr>
<td>Infants (aged ≥6 months) and children</td>
<td>10 mg/kg in a single dose on day 1, then 5 mg/kg per day (maximum: 500 mg) on days 2-5</td>
<td>40-50 mg/kg per day (maximum: 2 g per day) in 4 divided doses for 14 days</td>
<td>15 mg/kg per day in 2 divided doses (maximum: 1 g per day) for 7 days</td>
</tr>
<tr>
<td>Adults</td>
<td>500 mg in a single dose on day 1, then 250 mg per day on days 2-5</td>
<td>2 g per day in 4 divided doses for 14 days</td>
<td>1 g per day in 2 divided doses for 7 days.</td>
</tr>
</tbody>
</table>