

Department of Education

Date: ___

Dear Parent or Guardian:

Your child may have been exposed to pertussis (whooping cough) at on the following date(s): . It is very important to identify pertussis *right away* to start treatment and avoid making others sick.

Pertussis, also known as whooping cough, is a highly contagious bacterial illness. It causes a severe cough that can last weeks, even months, sometimes leading to coughing fits and/or vomiting. Pertussis is easily spread from person to person by coughing or sneezing. Anyone can get pertussis, but it can be very dangerous for infants, pregnant women, and people with weakened immune systems. Family members with pertussis, especially mothers, can spread pertussis to newborns. People are at risk for getting sick up to 21 days after being exposed.

The Health Department recommends the following for children who may have been exposed to pertussis in the past 21 days:

- 1. If your child has a cough:
 - Keep your child home from child care, school, and activities such as sports or play groups. See • point 3 below for information about when your child can return to these activities.
 - Make an appointment with your child's doctor as soon as possible and tell the doctor that your child may have been exposed to pertussis. Show the reverse side of this letter to your doctor.
- 2. Ask your child's doctor to prescribe your child antibiotics, even if they are not coughing, if:
 - The doctor said that your child has a weakened immune system.
 - Your child is pregnant.
 - Your child is younger than 12 months old.
 - Your child lives with any of the following people: a woman who is pregnant, an infant who is younger than 12 months old, or a person with a weakened immune system
- 3. If your child is diagnosed with pertussis:
 - Ask your child's doctor for a note for school/child care that states your child has pertussis.
 - Tell the school/child care that your child has been diagnosed with pertussis.
 - Keep your child home from school and activities, such as sports or play groups, until your child has been on antibiotics for five days or until the doctor says your child is no longer contagious.
- 4. If your child's doctor says your child does NOT have pertussis:
 - Ask for a note from the doctor telling the school/child care that your child's cough is NOT pertussis or another contagious disease.

Exposed children whose pertussis immunizations are not up-to-date must stay home for 21 days after the last exposure. Please make sure your family's vaccinations are up-to-date, including DTaP vaccine for children, and Tdap vaccine (a pertussis booster shot) for children who are 11 years or older, adults and pregnant women. If you need a Tdap vaccine, contact your doctor to find a vaccine provider near you.

Visit nyc.gov/health and search "pertussis" for more information. If you have any questions or concerns, please call 347-396-2402.

Supervising Medical Doctor:	Phone:
Supervising Nurse:	Phone:



Dear Provider:

Your patient may have been exposed to pertussis. Pertussis is characterized by a cough lasting ≥ 2 weeks with paroxysms, posttussive vomiting, whoop or apnea.

For Patients Without Symptoms and Exposed to Pertussis <21 Days Ago:

To protect vulnerable individuals, the Department of Health and Mental Hygiene (DOHMH) recommends antibiotic prophylaxis for patients who are younger than 12 months old, immune compromised, or pregnant or who live with an infant younger than 12 months old or someone who is immune compromised or pregnant.

For Patients with Symptoms and Exposed to Pertussis <21 Days Ago:

For patients coughing <21 days:

- 1. Collect nasopharyngeal swabs or aspirate for pertussis PCR testing. Culture testing may be considered in addition to PCR.
- 2. Do not delay treatment with appropriate antibiotics while waiting for laboratory results if there is no alternative diagnosis.
- 3. Remind people with pertussis to stay home until they have completed five days of appropriate antibiotics.
- 4. Document and communicate all clinical decisions related to pertussis to the school/child care (this includes children for whom pertussis has been ruled out).
- 5. Strongly consider giving antibiotic prophylaxis for all household members if a pregnant woman, an infant younger than 12 months old, or anyone with a weakened immune system lives in the household.

For patients coughing ≥ 21 days:

- 1. Testing for pertussis is not recommended. Testing after three weeks of cough is of limited benefit since PCR and culture are most sensitive during the first two to three weeks of cough when bacterial DNA is still present in the nasopharynx.
- 2. Treatment for pertussis is no longer necessary after 21 days of cough, with the following exception: infants and pregnant women in their third trimester should be treated up through six weeks after cough onset.
- 3. Patients with pertussis are no longer infectious 21 days after cough onset and can return to school/child care.

For all households: Ensure household members are up-to-date with pertussis-containing vaccine. DTaP vaccine should be given to children younger than 7 years. Children ages 7 through 10 years who are not fully immunized with the DTaP series should receive Tdap as the first dose in the catch-up series. Administer a single dose of Tdap vaccine to people aged 11 years and older who have not been previously vaccinated with Tdap and a dose of Tdap to pregnant women between 27 to 36 weeks of each pregnancy, or refer for vaccination.

For additional clinical and laboratory guidance, visit cdc.gov/pertussis. Please report all suspected cases of pertussis to 888-692-3641 at the time of initial clinical suspicion. If you have questions, call 347-396-2402.

Sincerely,

Bureau of Immunization New York City Department of Health and Mental Hygiene