

To Parents and Guardian

School Name 鈴鹿市立白子中学校
Principal Name 三浦 洋子

Request for Submission of School Infectious Disease Notification Form

To maintain school health and safety, you should record any absences and attendance. Children who exhibit the following must be noted and see a physician for diagnosis. In order to decrease any anxiety surrounding infection when a student returns to school, a guardian/parents must record and submit necessary information in accordance with the following.

To prevent the spread of disease within the school, please understand these fundamental precautionary measures.

Infectious Diseases To Prevent From School	
Type 1	①Ebola ②Crimean - Congo hemorrhagic fever ③Smallpox ④South American hemorrhagic fever ⑤Plague ⑥Marburg virus ⑦Lassa fever ⑧Acute poliomyelitis ⑨Diphtheria ⑩Severe Acute Respiratory Syndrome (limited to beta coronavirus genus SARS coronavirus) ⑪Middle East Respiratory Syndrome (limited to beta coronavirus genus MERS coronavirus) ⑫Avian Influenza (limited to subtype H5N1 and H7N9)
Type 2	①Influenza (excluding bird flu) ②Whooping cough ③Measles ④Mumps ⑤Rubella ⑥Chicken pox ⑦Pharyngoconjunctival fever ⑧COVID - 19 ⑨Tuberculosis and meningococcal meningitis
Type 3	①Cholera ②Shigellosis ③E. Coli ④Typhoid ⑤Paratyphoid Fever ⑥Epidemic keratoconjunctivitis ⑦Acute Hemorrhagic Conjunctivitis ⑧Other Infectious Diseases

R5.5.8 enforcement

【Potential Dates of Attendance】

Day 0	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7	Day 8
Date of Infection (1 st fever day)	Fever Period							

(The away period will be enforced based on school health protocols)

School Infectious Disease Notification Form

鈴鹿市立白子中学校 School Director

(Year in school) _____ (class) _____ Name _____

(In the case of influenza)

【Disease】 _____ [A ・ B Type] ※Please have it verified by a medical institution

【Medical Treatment Period】 Year _____ Month _____ Day _____ ~
Year _____ Month _____ Day _____

【Medical Institution】 _____

Year _____ Month _____ Day _____

Parent name _____

Types of diseases that require suspension of attendance

	Disease	Criteria for the period of suspension of attendance
Type 1	Ebola Crimean - Congo hemorrhagic fever Smallpox South American hemorrhagic fever Plague Marburg virus Lassa fever Acute poliomyelitis Diphtheria Severe Acute Respiratory Syndrome (SARS) Middle East Respiratory Syndrome (MERS) Avian Influenza	Until recovery.
Type 2	Influenza (Excluding Bird Flu)	Until 5 days have passed since onset symptoms and 2 days (3 days for infants) after the fever has disappeared.
	Whooping Cough	Until cough no longer persists or until the end of the 5 day treatment with the appropriate antibacterial agent.
	Measles	Until 3 days have passed after the fever no longer persists.
	Mumps	Until 5 days after discovery of swelling of the glands or until complete recovery.
	Rubella	Until the rash disappears.
	Chicken pox	Until all the scabs become crusted.
	Pharyngoconjunctival Fever	Until 2 days have passed since major symptoms no longer persist.
	COVID-19	After five days have elapsed since onset of symptoms and until one day has passed since symptoms have improved.
	Tuberculosis and Meningococcal Meningitis	
Type 3	Cholera Shigellosis Enterohemorrhagic Escherichia coli Typhoid Paratyphoid fever Epidemic keratoconjunctivitis Acute hemorrhagic conjunctivitis Other infectious diseases	Until the school doctor or other doctor finds that there is no risk of infection due to the medical condition.

- * For severe acute respiratory syndrome, the pathogen is limited to the Beta Corona Virus Genus Sars Virus
- * For Middle Eastern Respiratory infection, the pathogens are limited to Beta Corona Virus Genus MERS Corona Virus
- * In regards to Avian Influenza, the serum subtypes are H5N1 and H7N9
- * Regarding COVID-19, the infectious agent is limited to the coronavirus belonging to the genus Beta Corona Virus (which was newly reported in January 2020 to the World Health Organization by the People's Republic of China to have the ability to infect humans). The same applies in Article 4, item 2.