November 26, 2014

Dear Colleague:

Your patient may have been exposed to pertussis at Childcare Network on Sweeten Creek Road.

For Exposed Patients without Symptoms:
If your patient has a pre-existing health condition that may be exacerbated by a pertussis infection (including, but not limited to, immunocompromising conditions or moderate to severe asthma), he or she is considered to be at risk of severe illness or complications from pertussis and CDC recommends antibiotic prophylaxis. As a precaution to protect vulnerable individuals, CDC also recommends antibiotic prophylaxis for your patient if he or she shares a household or has close contact with an individual at risk of severe illness or complications, a woman who is in her third trimester of pregnancy or an infant less than 12 months old. If more than 21 days have passed since your patient’s last exposure to pertussis, prophylaxis is NOT recommended. Centers for Disease Control and Prevention (CDC) guidance can be found at http://www.cdc.gov/pertussis/outbreaks/PEP.html.

Exposed patients who do not meet the criteria for prophylaxis should self-monitor for symptoms for 21 days following their last exposure. Instruct these patients to call if they develop symptoms.

For Exposed Patients with Symptoms:
Anyone with pertussis should not attend childcare, school, work, group activities, or visit public places until they have completed five days of an appropriate antibiotic treatment. Guidance can be found on the CDC website, http://www.cdc.gov/pertussis/clinical/treatment.html.

We recommend the following steps for assessing and treating patients with possible pertussis infection:

- **For patients coughing <21 days:**
  1. Collect nasopharyngeal swabs or aspirate for pertussis PCR and culture.
  2. If you suspect your patient might have pertussis, do not delay treatment with appropriate antibiotics while waiting for laboratory results.
  3. Instruct your patient to remain at home until he or she has completed five days of antibiotic treatment or has been coughing for 21 days, whichever comes first.
  4. **Please notify your local health department of any suspected cases of pertussis.**
  5. If pertussis is suspected, the local health department will likely recommend antibiotic prophylaxis for all household members. Prophylaxis might also be recommended for other close contacts who are at risk for severe illness or close contacts who live in households that include someone else at risk for severe illness, a woman who is in her third trimester of pregnancy or an infant less than 12 months old.

- **For patients coughing ≥21 days:**
  1. Testing for pertussis is not recommended. Testing after 21 days of cough is of limited benefit since PCR and culture are not likely to detect pertussis. Commercially available serology tests for pertussis can yield false negative or false positive results.
  2. Generally, treatment is no longer necessary after 21 days. Infants and pregnant women in their third trimester should be treated if antibiotics can be started within 6 weeks after cough onset.
  3. Patients are no longer considered to be infectious after 21 days of cough and can return to school, childcare, and extracurricular activities.
• **For all households:** Administer Tdap vaccine to contacts 11 years and older who have not been previously vaccinated with Tdap, or refer for vaccination to another provider or the local health department.

Additional clinical and laboratory guidance may be found on the CDC website: [http://www.cdc.gov/pertussis](http://www.cdc.gov/pertussis). Should you have any questions or concerns, please Buncombe County Disease Control at 828-250-5109.

Sincerely,

Dr. Jennifer Mullendore  
Medical Director  
Buncombe County Health and Human Services