

Hand, Foot, & Mouth Disease (HFMD)

Dear Parent or Guardian,

You are being provided with this fact sheet:

- Because you or your child may have been exposed to hand, foot, and mouth disease (HFMD).
 - For informational purposes only.
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General Information about Hand, Foot, and Mouth Disease (HFMD)

What is HFMD?

- It is caused by viruses that belong to the “enterovirus group”.
- It is a common illness among infants and children younger than 5 years of age.
- It can spread easily.
- It is usually not serious.
- It is most common in the summer and early fall.
- Although they sound similar, “hand, foot, and mouth disease (HFMD)” is different than “foot-and-mouth disease” which is found in cattle, sheep, goats, and pigs.

Who can get it?

- Anyone can get HFMD, even if they’ve had it before.
- Most cases occur in children under 5 years old.
- If you are pregnant, contact your healthcare provider if you think you’ve been exposed to, or have, HFMD.

What are the symptoms?

- Fever (American Academy of Pediatrics defines fever as a temperature of 100.4°F [38° C] or higher)
- Mouth sores that can lead to pain with swallowing.
- Skin rash that begins as red spots and often develops into fluid filled blisters.
 - Blisters usually appear on the palms of the hands, fingers, and soles of the feet.
 - Blisters can appear on other parts of the body.
- Most symptoms go away in 7 to 10 days.
- Some people may show no symptoms at all, but they can still pass the virus to others.

How is it spread?

- The virus is found in:
 - Droplets from coughs, sneezes, and runny noses
 - Fluid from blisters or scabs
 - Fluid or drool from mouth sores
 - Stool (poop)
- The virus can spread when a person who has HFMD coughs or sneezes and another person breathes in the droplets.
- It can also spread by:

- touching an object or surface that has the virus on it and then touching the mouth, eyes, or nose.
- sharing utensils or cups with someone who has HFMD.
- Animals and pets cannot get or spread HFMD.
- A person can spread HFMD for weeks, even after symptoms go away.

How Do I Know If My Child Has HFMD?

- A healthcare provider can typically diagnose HFMD based on a person's symptoms.
- A healthcare provider can test for HFMD with a throat swab or stool (poop) sample. Because it can take 2 to 4 weeks to get the test results, this test is usually not done.

If you have additional questions or believe your child has HFMD, contact your healthcare provider. This fact sheet provides general information only.

What If My Child Has HFMD?

Notify your child care provider or preschool immediately if your child has HFMD.

How is it treated?

- There is not a specific medication for HFMD, but you can treat some of the symptoms to make your child more comfortable. Talk with your healthcare provider about treatment options.
- Infants 3 months or younger with a fever of 100.4° F (38° C) or higher should be seen by their healthcare provider.
- Since the mouth sores can be painful, children might not want to eat and drink. It is important that children get enough fluids to prevent dehydration.
- Talk with your child's healthcare provider if you have any concerns about your child's symptoms. **If your child is showing signs of dehydration (fewer wet diapers or less urine than usual, more tired than normal, dizziness, dry tongue or lips, fewer tears), or have a severe headache or stiff neck, they need to be seen by a healthcare provider immediately.**

How can I help prevent HFMD from spreading?

- The virus is easily removed with soap and water.
- Wash hands often, especially after diaper changing, using the toilet, sneezing, coughing, or wiping noses.
- Cover your nose and mouth when coughing or sneezing.
- Avoid touching your eyes, nose, and mouth.
- Avoid sharing cups, eating utensils, food, and drinks with anyone who has HFMD.
- Thoroughly clean toys and other objects children put into their mouths with soap and water.
- Clean and disinfect household surfaces.

Does My Child Need to Stay Home from Child Care?

No. Children who have been exposed to, or have been diagnosed with, HFMD can continue to attend child care **unless**:

- They have mouth sores with drooling.
- They have a fever (temperature of 100.4°F [38° C] or higher) along with other HFMD symptoms.
- They have oozing, fluid-filled blisters.
- They do not feel well enough to participate in classroom activities (for example: unusually tired; cranky or fussy; or crying more than normal).

Please follow your child care program's sickness policy.

References:

American Academy of Pediatrics

- *Caring for our Children, Chapter 3 Health Promotion and Protection, 3.6 Management of Illness, 3.6.1 Inclusion/Exclusion Due to Illness*
- *Managing Infectious Diseases in Child Care and Schools, 5th Edition. Pages 101-102*

Centers for Disease Control & Prevention

- *Hand, Foot, and Mouth Disease (HFMD). <https://www.cdc.gov/hand-foot-mouth/>*

Child Care Health Program – Public Health Seattle & King County

- *<https://kingcounty.gov/depts/health/child-teen-health/child-care-health/disease-prevention.aspx>.
Disease Prevention Website*

U.S. Department of Agriculture (USDA)

- *Foot and Mouth Disease website
<https://www.aphis.usda.gov/aphis/ourfocus/animalhealth/animal-disease-information/fmd/index>*