**Impetigo**

Dear Parent or Guardian,

You are being provided with this fact sheet:

- because you or your child may have been exposed to impetigo If you believe your child has developed impetigo, contact your medical provider. Notify your child care provider or preschool immediately after the diagnosis has been made.

- for informational purposes only.

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**What is impetigo?**

Impetigo is a skin infection caused by bacteria. Two types of bacteria can cause impetigo, group A streptococci and Staphylococcus aureus. The bacteria that cause impetigo can also cause other infections.

**What are the symptoms of impetigo?**

Impetigo begins as small red spots that progress into tiny blisters. When the blisters open, they produce a thick, honey-colored discharge that dries, crusts, and sticks to the skin. The blisters are painful and itch. Scratching can spread the infection. The infection most often appears on the face, especially around the mouth and the nose, but may also appear on other areas of the body. Symptoms of impetigo may appear 7 to 10 days after exposure to the bacteria.

**How is impetigo spread?**

Impetigo is easily spread by direct contact with the discharge from the blisters or by coming in contact with items contaminated with the bacteria, such as toys, towels, or pillowcases. The bacteria invade through cuts, cold sores, eczema, or other areas of damaged or sensitive skin.

**Who is at risk for impetigo?**

Impetigo infections often occur in children, but can also affect adults.

**How is impetigo diagnosed?**

Impetigo is often diagnosed based on the appearance of the sores on the skin. A laboratory culture of the affected area usually grows the bacteria.

**How is impetigo treated?**

Impetigo may be treated with an ointment applied to the skin or with an oral antibiotic. Contact your health care provider for information on treatment options.

**How can the spread of impetigo be reduced?**

1. Infected areas should be kept covered with clean dressing.
2. Always practice frequent and thorough handwashing.
3. Infected areas should be washed with mild soap and running water.
4. Individuals with open sores should not prepare food.
5. Never allow children in child care to share bedding or clothing.
Exclude from group setting?
Children and staff with impetigo need to be excluded from child care or school settings until at least a full 24 hours after antibiotic treatment has begun and there is no discharge.

Reference:
American Academy of Pediatrics
• Managing Infectious Diseases in Child Care and Schools pages 109-110