

Summary of CDPHE Recommendations for Disease Control for Enteric Pathogens*

Organism	Typical incubation period (range)	Infective dose	Shedding duration	Antimicrobials	Food handler exclusion	Child care attendee/worker exclusion	Health care worker exclusion	Comments
Campylobacter	2-5 days (range 1-10 days)	Small (~500 organisms)	2-7 weeks without antibiotics	Antibiotics can shorten shedding to 2-3 days	No diarrhea x 24 hours [^]			Food handler outbreaks rare
Cryptosporidium	7 days (range 1-12 days)	Very small (10-100 oocysts)	Several weeks	Yes (antiparasitic medication)	No diarrhea x 24 hours [^]			No swimming x 2 weeks; infection can be severe in persons with compromised immune systems
Giardia	7-10 days (range 3-25 days)	Very small (one or more cysts)	Variable, can be months	Yes (antiparasitic medication)	No diarrhea x 24 hours [^]			No swimming x 2 weeks
Hepatitis A	~28 days (range 15-50 days)	Very small (<100 viral particles)	2 weeks before onset to 7-10 days after jaundice onset	None	7 days after jaundice onset; 14 days if jaundice does not develop			Children < 5 yrs rarely symptomatic; vaccine very effective
Listeria	3 weeks (range 3-70 days)	Not known (varies widely)	NA	Yes	NA	NA	NA	Not spread person to person
Norovirus	12-48 hours	Very small (<20 viral particles)	Can shed at least 3 weeks; can transmit at least 2 days after recovery	None	48 hours after last episode of vomiting/diarrhea			Rare for single cases to be diagnosed; disease control usually in setting of an outbreak
Salmonella	12-36 hours (range 6-72 hours)	Very small (1 organism can cause illness)	Variable, days to months	Antibiotics are used for severe illness; May prolong shedding	No diarrhea x 24 hours [^]			Antimicrobial resistant-strains are becoming increasingly prevalent
Shigella	1-3 days (range 12-96 hours)	Very small (10-200 organisms)	<4 weeks without antibiotics	Effective antibiotics may shorten shedding	2 consecutive negative stools 24 hours apart and no diarrhea x 24 hours	(2 consecutive negative stools 24 hours apart OR effective antibiotics x 3 days) AND no diarrhea x 24 hours	2 consecutive negative stools 24 hours apart and no diarrhea x 24 hours	Significant antibiotic resistance – ensure that prescribed antibiotics will be effective based on antimicrobial susceptibility testing results on the isolate from the patient
STEC (Shiga toxin-producing E. coli) O157	3-4 days (range 2-10 days)	Very small (10-100 organisms)	<1 week for adults; several weeks or longer for children	Not recommended	2 consecutive negative stools 24 hours apart and no diarrhea x 24 hours			Antibiotics may be associated with HUS
STEC (Shiga toxin-producing E. coli) non-O157	3-4 days (range 2-10 days)	Very small (10-100 organisms)	Unclear-likely similar to O157	Not recommended	2 consecutive negative stools 24 hours apart and no diarrhea x 24 hours	<u>Worker</u> : see STEC O157 <u>Attendee Shiga toxin 1+ only</u> : no diarrhea x 24 hours [^] <u>Attendee Shiga toxin 2+, 1 and 2+, or unknown</u> : see STEC O157	2 consecutive negative stools 24 hours apart and no diarrhea x 24 hours	Antibiotics may be associated with HUS; Less is known about the duration of shedding of non-O157 STEC
Typhoid Fever (Salmonella Typhi)	1-2 weeks (range 3 days-2 months)	Moderate (<1,000 organisms)	Variable, chronic carrier state exists	Antibiotics may shorten shedding; Carriage may be eliminated with antibiotics	3 consecutive negative stools collected 48 hours after antibiotics are completed AND specimen collected no sooner than 1 month after onset			Antimicrobial resistant-strains are becoming increasingly prevalent
Vibrio	Species-dependent	Not known	NA	Yes	NA	NA	NA	Not spread person to person

*As of August 2014; please consult Communicable Disease Program's CD manual for specifics on each disease

(<https://www.colorado.gov/pacific/cdphe/communicable-disease-manual>)

[^]Some circumstances including outbreaks may require additional stool testing before patient can return

*Food worker exclusions may vary by state