[DATE]

Insert School or Health Department Name or Logo Here

[ORGANIZATIONAL ADDRESS, CITY, STATE, ZIP]

[ORGANIZATIONAL PHONE NUMBER]

Dear Parent/Guardian:

We have become aware of a possible viral gastroenteritis outbreak among students [AND/OR STAFF] at [SCHOOL NAME]. We are working closely with the [SCHOOL OR HEALTH DEPARTMENT NAME] in response to this increase in illness. [ENTER INFORMATION HERE IF SCHOOL IS INTENDING TO CLOSE.]

Norovirus is the most common virus that causes gastroenteritis. These viruses are easily transmitted through food, by person-to-person contact, or through contaminated surfaces. The virus spreads easily in the home as well. Norovirus is sometimes called the “stomach flu” but is not related to influenza (the flu).

Norovirus symptoms include nausea, vomiting, diarrhea, and stomach cramping. People may also experience low-grade fever, headache, weakness, and muscle aches. Symptoms can begin as early as 12 hours after exposure to the virus or as late as 48 hours. The symptoms of norovirus usually last 1 to 2 days.

People with norovirus usually fully recover without medical attention. Those with severe diarrhea should drink lots of liquids. If your child has bloody diarrhea or high fever, please contact your doctor. These are not symptoms of norovirus.

Children and staff with symptoms of viral gastroenteritis should be excluded from school or other group activities until 48 hours after their symptoms have stopped.

The best way to limit the spread of these viruses is frequent hand washing for at least 20 seconds using soap and warm running water, being sure to completely clean all areas of hands and under fingernails. Household cleaners are ineffective against norovirus. Bleach is the only reliable means of disinfection. Please refer CDC’s website (<https://www.cdc.gov/norovirus/index.html>) on Norovirus for information on cleaning and disinfection guidelines.

Further information about norovirus and how to limit its spread can be found at [LHD WEBSITE URL] or you can contact [CONTACT NAME] at [CONTACT INFORMATION, I.E. PHONE/E-MAIL].

Sincerely,

[HEALTH OFFICER, HEALTH DEPARTMENT NAME or PRINCIPAL, SCHOOL NAME]