

SUBJECT: VARICELLA (CHICKENPOX) GUIDANCE	APPLICABLE TO: STAFF IN ALL DIRECTLY OPERATED AND DHS FUNDED FACILITIES AND PROGRAMS	ISSUED: March 20, 2023
ADMINISTERED BY: DHS OFFICE OF THE MEDICAL DIRECTOR	APPROVED BY: Joslyn Carter, Administrator Department of Social Services/ Department of Homeless Services	

■ PURPOSE

The purpose of this bulletin is to provide guidelines to staff in the Department of Homeless Services’ (DHS) directly operated and funded facilities in response to a case of varicella at their facility. The following content does not substitute for professional medical advice, diagnosis, or treatment rendered to an individual.

■ BACKGROUND

Varicella, commonly known as chickenpox, is a highly contagious disease caused by the varicella-zoster virus. [\(CDC\)](#)

A. Symptoms

Symptoms in an unvaccinated person include an itchy, blister-like rash that usually first appears on the face, chest, and back and then spreads to the rest of the body. Other common symptoms like fever, fatigue, loss of appetite, and headache may appear one to two days before the onset of the rash. Varicella infection is usually mild in children but can cause more serious complications in infants, adults, pregnant people, and people who are immunocompromised. Severe complications can lead to hospitalization or even death.

B. Transmission

Varicella spreads easily from people who are infected to those who have never had it, or to those who are not vaccinated against it. If one person is infected, up to 60-90% of people close to that person who are not immune will also become infected. The virus is spread through contact with the rash of someone who has varicella or by being in the same room as someone with varicella and breathing respiratory droplets or aerosolized virus. A person with varicella is considered contagious beginning one (1) to two (2) days before their rash begins, and they remain contagious until their lesions have crusted or scabbed over. It takes around (two) 2 weeks (from 10 to 21 days) after exposure to someone with varicella to develop varicella.

C. Vaccination

Most adults are immune to varicella because most have had chickenpox as children. Varicella vaccine became part of routine vaccines for children in the U.S. in 1995 and is required for students attending childcare and school in New York. As a result, varicella is rare among adults and among children who have been attending childcare and school in New York over the past year.

The most effective way to prevent varicella in people who are not immune is to get the varicella vaccine. Everyone - including children, adolescents, and adults – should get two doses of the varicella vaccine, if they have never had varicella or have never been vaccinated. Most vaccinated people will never get varicella, and when breakthrough (cases in persons who were vaccinated) cases occur they are usually very mild. The varicella vaccine prevents almost all cases of severe illness, and since the varicella vaccine was introduced in the U.S. hospitalizations and deaths from varicella have become rare.

■ DEFINITIONS

- A. **Varicella = chickenpox:** acute illness with fever and vesicular rash
- B. **Infectious period:** begins 2 days before rash appears and lasts until all fluid filled lesions (if present) have fully crusted and until there are no new rash lesions for 24 hours.
- C. **Client:** A homeless person receiving services in a DHS operated or funded facility.
- D. **Facility (DHS or provider facility):** DHS operated or funded facility or program which provides services to clients.
- E. **Patient:** A person confirmed or suspected of having varicella.

- F. Contacts:** A person who was with a person with varicella during their infectious period either:
- Within 5 feet for at least 5 minutes; OR
 - In the same room for at least 1 hour (if room is larger than a standard classroom **and** people stayed in one place for duration, could limit to within ~20 feet of the case for at least 1 hour)
- G. Varicella immunity:** Presumptive evidence of varicella immunity includes any of the following criteria (CDC):
- Documentation of age-appropriate varicella vaccination
 - Children ages 12 months through 3 years: one dose
 - Children 4 years and older and adults: two doses
 - Laboratory test results showing that a person is immune (positive varicella titers¹ or positive test results from infection); note that 2 doses of varicella vaccine are considered immunity regardless of the results of any blood test
 - Birth in the United States before 1980
 - Having had varicella (chickenpox) infection or herpes zoster (ideally this would have been diagnosed by a medical provider, but adults may not have this documentation)
- H. Persons at higher risk for complications from varicella:** include pregnant persons and those who are immunocompromised.

■ PROCEDURE

A. Prevention

- Refer clients to neighborhood health centers for vaccinations if they are not up to date.
- Provide clients with the Department of Health and Mental Hygiene (DOHMH) flyer “Get Your Child Vaccinated Now to Prevent Them From Being Excluded from Child Care and School” (**Appendix A**) to help them understand the benefits of receiving the varicella vaccine.

B. Case Identification, notification, and reporting

- Any DHS facility that becomes aware of a client with varicella must report the case to their Program Administrator (PA) immediately. The PA will report the case to the DHS Office of the Medical Director (OMD).
- DOHMH might become aware of a case before DHS and will notify OMD. OMD will email the Program Administrator and the shelter provider.
- If a provider has a client with a rash, the provider should send the client to the on-site medical provider, community clinic, urgent care, or nearest hospital. If the client is acutely ill, the provider must call 911 or the Health and Hospitals express care number at 718-737-9272.

¹ Titers – the concentration of an antibody, as determined by finding the highest dilution at which it is still able to cause agglutination of the antigen.

- Staff will complete the DOHMH Varicella Reporting form (**Appendix B**) with the client and fax the form to the DOHMH Bureau of Immunization at 347-396-8851 and call to confirm receipt at 347-396-2402. The reporting form can also be sent by encrypted email to DOHMH. This information should be sent to DOHMH within 24 hours.

C. Isolation

- If a single adult client with varicella is in a shared room and needs to be isolated:
 - Place the affected individual in an enclosed office/room and provide a surgical or KN95 mask while alerting your site director and PA.
 - Request transfer to a single room, with a private bath, if possible, for the duration of the infectious period.
 - Do not transfer clients with varicella for other reasons.
 - If the bathroom is shared, only clients who have documented immunity to varicella can share the bathroom or designate a specific time for the varicella case to use the bathroom, and the client or caregiver must disinfect after each use.
 - Provide cleaning products and instruct clients to disinfect between uses.
- Varicella cases in adult families and families with children can isolate in their unit.
- The clients with varicella may leave the facility for medical care and must use a tight-fitting mask provided by the shelter when entering and leaving the facility to do so.
- Meals should be brought to the individual in his/her room by staff who have documented immunity.
- The resident with chickenpox should be asked to remain in his/her unit and made as comfortable as possible there; he/she cannot spend time in any common areas, including dining halls, recreation rooms, hallways, etc.
- Facility staff must call in a Priority 1 to the serious incident unit for cases of Varicella that require isolation or quarantine. See the Incident Reporting Procedure for DHS Funded Programs (DHS-PB-2022-001) for more information.

D. Contact investigation

- The contact investigation is performed by DOHMH. DOHMH will request that shelters assist in obtaining the necessary information, including:
 - Compiling a list of clients and staff (contacts) who spent time in the same room as the affected client two days before the first client developed the rash, up until the affected client is isolated and/or transferred. These contacts will be identified by DOHMH through interviewing the case, and the site will assist by providing the contact's full name, DOB, CARES ID, and room number to DOHMH.

- Identifying persons at high risk for complications from varicella by asking each contact if they are pregnant or have a weakened immune system (immunocompromised persons)
- Asking each contact if they have ever had chickenpox, been vaccinated against chickenpox, or have ever had a positive test in the past indicating that they had varicella.
- Shelter staff will provide all contacts with the *DOHMH varicella exposure* letter. See **Appendix C** for letters for adults and **Appendix D** for letters for children.

E. Quarantine

- Contacts that have documented immunity do not need to quarantine.
- For contacts without documented evidence of immunity:
 - For families: quarantine in their unit
 - For singles: transfer to a private room for 21 days.

F. Management of contacts who do not have immunity

- Provide contacts with information on how to identify varicella symptoms (See **Appendices C and D**).
- Provide contacts with information regarding vaccinations². See *Get Vaccinated Now If You Have Not Had Varicella (Chickenpox) Or If You Are Not Sure* (**Appendix E**).
- Contacts who are NOT pregnant or immunocompromised should receive the varicella vaccine within 3-5 days after their first exposure date to decrease their chance of developing varicella. If the person was completely unvaccinated before exposure and does not get their first shot within this time frame, DOHMH's guidance is that they need to remain out of school and work during the 21 days while at risk for getting sick with varicella. These contacts/clients should be encouraged to get vaccinated against varicella to protect against future exposures.
- Pregnant and immunocompromised persons need to be tested for immunity by their medical provider. They cannot receive the varicella vaccine. Please refer them to their medical provider or neighboring clinic with a note indicating that they were exposed to varicella and remind them to take page 2 of the DOHMH Adult exposure letter (**Appendix C**) for their provider.

² Varicella fact sheet: www.cdc.gov/vaccines/parents/diseases/varicella.html

G. Multiple cases of varicella in a shelter

If there have been several cases of varicella in a shelter, as determined by DOHMH, then DOHMH will provide a general notice (See sample in **Appendix F**) that must be posted in common areas to inform all residents that there have been cases. This is separate from the exposure letters provided to people identified as contacts.

If there is a need to vaccinate many clients at the shelter because of multiple cases of varicella and many unvaccinated persons, then DHS and DOHMH will work to facilitate vaccination for shelter residents. Logistics, including a flyer to advertise the event (if vaccination on-site will occur), will be coordinated with the shelter.

- For shelters with dedicated medical providers, OMD will contact the provider when varicella cases and/or exposures occur and discuss their capacity to offer onsite vaccinations. If they can vaccinate, OMD will put the provider in contact with NYC DOHMH to arrange logistics for the vaccination sessions.
- For shelters with no on-site medical providers, OMD and NYC DOHMH will work collaboratively to facilitate access to vaccinations.

New clients who are pregnant or immunocompromised without documentation of two (2) doses of varicella vaccine or positive titers should not be placed in the facility with multiple cases if the risk of transmission is still present as per guidance from DOHMH. OMD will reach out to Vacancy Control if there are more than two (2) cases at a shelter so that these clients may be placed at another shelter. If possible, existing pregnant or immunocompromised clients should be transferred to another facility.

■ RELATED PROCEDURE

[DHS-PB-2022-001](#)

[DHS-PB-2023-001](#)

**Incident Reporting Procedure for DHS Funded Programs
Facility Transfer, Reassignment, and Referral Procedure**

■ ATTACHMENTS

APPENDIX A
APPENDIX B
APPENDIX C
APPENDIX D
APPENDIX E
APPENDIX F

Get Your Child Vaccinated Now
Varicella Reporting Form
Adult Varicella Exposure Letter
Child Varicella Exposure Letter
Get Vaccinated Now
General Varicella Exposure Letter



Get Your Child Vaccinated Now to Prevent Them From Being Excluded From Child Care and School

There is an outbreak of varicella (chickenpox), a contagious infection that causes an itchy rash with blisters that scab. Chickenpox can cause severe illness, especially in babies, adults, pregnant people and people with weakened immune systems.

All children in child care and school are required to show proof of varicella vaccine and other vaccines to attend school. Two doses of varicella vaccine are required for children attending grades kindergarten and higher.

Adults who do not know if they had varicella infection should get vaccinated too. People who are pregnant or have a weakened immune system cannot get varicella vaccine.

For more information about varicella or to find locations in New York City that provide no-cost or low-cost vaccination services for children and adults, regardless of immigration or insurance status, call **311**.

Is Your Child Ready for Child Care or School?

2022-2023 School Year

Learn about required vaccinations in New York City.

All students ages 2 months to 18 years in New York City must get the following vaccinations to go to childcare or school. Review your child's vaccine needs based on their grade level this school year. The number of vaccine doses your child needs may vary based on age and previous vaccine doses received. Your child may need additional vaccines or vaccine doses if they have certain health conditions or if previous doses were given too early.

VACCINATIONS	CHILD CARE, HEAD START, NURSERY, 3K OR PRE-KINDERGARTEN	KINDERGARTEN - Grade 5	GRADES 6 -11	GRADE12
Diphtheria , tetanus, and pertussis (DTaP)	4 doses	5 doses or 4 doses ONLY if the fourth dose was received at age 4 years or older or 3 doses ONLY if the child is age 7 years or older and the series was started at age 1 year or older	3 doses	
Tetanus, diphtheria and pertussis booster (Tdap)			1 dose (at or after age 11 years)	
Polio (IPV or OPV)	3 doses	4 doses or 3 doses if the third dose was received at age 4 years or older		
Measles, mumps and rubella (MMR)	1 dose	2 doses		
Hepatitis B	3 doses	3 doses	3 doses or 2 doses of adult hepatitis B vaccine (Recombivax HB®) if the doses at least 4 months apart between ages of 11 through 15 years	
Varicella (chickenpox)	1 dose	2 doses		
Meningococcal conjugate (MenACWY)			Grade 6: Not applicable Grades 7-11: 1 dose	Grade 12: 2 doses or 1 dose if the first dose was received at age 16 years or older
<i>Haemophilus influenzae</i> type b conjugate (Hib)	1 to 4 doses Depends on child's age and doses previously received			
Pneumococcal conjugate (PCV)	1 to 4 doses Depends on child's age and doses previously received			
Influenza	1 dose			

Talk to your health care provider if you have questions.
For more information call **311** or visit nyc.gov/health and search for **student vaccines**.



Department of Health
& Mental Hygiene

Department of
Education

VARICELLA

DOH Intake Name: _____ Date/Time of Report _____

PATIENT: Patient Name _____ DOB _____ Gender _____

Patient Phone _____ Patient Email _____

Patient Address _____

Does patient reside in a shelter or humanitarian response site: Yes/ No, if yes:

Facility name/room number/Client ID: _____

Resides in private room: Yes/ No Has private bathroom: Yes/ No

Does facility have shared/common spaces: Yes/No, If yes, specify: _____

Did patient recently arrive to NYC: Yes/ No, if yes:

Date of arrival: _____ Arriving from which city/country: _____

If known, arrived by: Bus / Train / Plane

REPORTER: Reporter Name: _____ Reporter Email: _____

Facility Name: _____ Facility Phone: _____

Facility Address _____ Fax: _____

CLINICAL: (circle Yes or No)Rash? (YES / NO) If yes: Day rash first appeared: _____

Was rash Generalized? (YES / NO)

Where on body did rash start? _____

Where on body did rash spread? _____

Was rash Itchy? (YES / NO)

Was rash Vesicular? (YES / NO)

Was rash Maculopapular? (YES / NO)

Were lesions in different stages? (YES / NO)

Fever? (YES / NO) If yes: Max temp of fever: _____Does patient have prior Varicella vaccinations? (YES / NO) If yes: Date 1: _____

Date 2: _____

Was varicella diagnosed by a physician? (YES / NO)

Medical Care: Where did patient go for medical care? _____

Date of medical visit? _____

LAB TESTING:

Were swabs of skin lesions collected for varicella PCR testing? (YES / NO)

Was blood sent for varicella IgM testing? (YES / NO)

SCHOOL / DAYCARE:Does patient attend Daycare/School? (YES / NO) If yes: Name/Address: _____

HOUSEHOLD MEMBERS:Is any household member **PREGNANT** or **IMMUNOCOMPROMISED*** (YES/NO) *specify condition _____

Name, DOB, Relation to Patient: _____

Varicella IgG result: _____ If unknown, reporting provider should call household member's obstetrician/
oncologist/specialist NOW for results or should draw blood themselves for IgG immediately

Plan for follow-up? _____



Date: _____

To Whom It May Concern:

You may have been exposed to varicella (chickenpox) at _____ on the following date(s):
_____.

Varicella, also known as chickenpox, is a contagious viral infection that causes a rash. The rash can be itchy and may include spots and blisters that scab. Chickenpox can occasionally cause complications, especially in babies, pregnant women and people with weakened immune systems. Chickenpox is easily spread from person to person by touching or breathing in virus particles. People are at risk for getting sick for up to 21 days after being exposed.

The Health Department recommends the following for people who may have been exposed to chickenpox in the past 21 days:

1. If you have a weakened immune system or are pregnant:
 - Make an appointment with your doctor right away. Show them the reverse side of this letter so they can make sure you are immune to varicella.
2. If you have not had chickenpox and have not received the varicella vaccine:
 - Make an appointment with your doctor right away and show them the reverse side of this letter.
 - You are less likely to get sick if you get the varicella vaccine within three days of being exposed. If you have not been vaccinated within this time frame, you must stay home for 21 days after being exposed.
3. If you received one dose of varicella vaccine more than four weeks ago:
 - Make an appointment with your doctor right away to get the second dose.
4. If you have a rash:
 - Stay home from work, school and other activities. See point 5 below for information about when you can return to these activities.
 - Make an appointment with your doctor right away and tell the doctor that you may have been exposed to chickenpox. Show the reverse side of this letter to your doctor.
5. If your doctor diagnoses you with chickenpox:
 - Ask your doctor for a note for school/work that states you have chickenpox.
 - Tell the school/workplace that you have been diagnosed with chickenpox.
 - Stay home from school/work and other activities until all the blisters have dried and scabbed over and no new spots have appeared for 24 hours.
6. If your doctor does NOT diagnose you with chickenpox:
 - Ask your doctor for a note telling the school/workplace that your rash is NOT from chickenpox or another contagious disease.

People who have not had chickenpox should receive two doses of the varicella vaccine to reduce the chance of getting sick. The varicella vaccine is usually given to children at 12 months of age with a second dose at 4 to 6 years of age. All children who go to child care or school are required to have the varicella vaccine. Please make sure your family's vaccinations are up-to-date, including the varicella vaccine. If you need a varicella vaccine, contact your doctor to find a vaccine provider near you.

Visit nyc.gov/health and search "chickenpox" for more information. If you have any questions or concerns, please call 347-396-2402 or _____

Sincerely,



Dear Provider:

Your patient may have been exposed to varicella. Varicella is characterized by a generalized, pruritic rash. People who are not fully vaccinated against varicella are at the highest risk for varicella infection. People who were previously vaccinated may develop varicella, but symptoms are often mild with a non-vesicular rash.

For Patients Without Symptoms Who Are Exposed to Varicella and Are Not Immune:

- The varicella vaccine should be administered within three days of initial exposure as post-exposure prophylaxis to people 12 months of age and older who lack evidence of immunity to varicella. Vaccination beyond this time frame is important for protecting these people from future exposures, but may not protect them from exposures that have already occurred; they still need to be excluded from their school or workplace.
- Varicella zoster immune globulin (VariZIG) post-exposure prophylaxis is reserved for people at high risk for severe disease who lack evidence of immunity to varicella and for whom the varicella vaccine is contraindicated. This includes immunocompromised or pregnant people without evidence of immunity, newborn infants whose mothers have symptoms of varicella around the time of delivery, and certain hospitalized premature infants. VariZIG should be administered as soon as possible after, but within 10 days of, exposure. People should not receive measles- or varicella-containing vaccine for at least five months after receiving VariZIG. VariZIG can be ordered from FFF Enterprises at 800-843-7477. For additional information about VariZIG indications and dosing, visit cdc.gov/mmwr/preview/mmwrhtml/mm6228a4.htmhht.
- People exposed to varicella who do not have evidence of immunity should stay home for 21 days after exposure. Because VariZIG may prolong the incubation period, people who receive VariZIG should stay at home for 28 days after exposure.

For Patients With Symptoms and Exposed to Varicella:

- People with varicella are contagious two days before rash onset until all lesions have crusted and no new lesions have appeared for 24 hours. They must stay home during this time frame.
- The preferred diagnostic test is polymerase chain reaction (PCR) of skin lesions (vesicles, scabs, maculopapular lesions). PCR testing can be performed at commercial laboratories. For additional information on specimen collection, visit cdc.gov/chickenpox/hcp/lab-tests.html. IgM serologic testing is less sensitive than PCR.
- Document and communicate all clinical decisions related to varicella to the school or child care.

For all households: Ensure household members are immune to varicella to protect against future exposures. The varicella vaccine should be given to children routinely at 12 months of age with a second dose at 4 to 6 years of age.

Visit nyc.gov/health and search “chickenpox” to find information for providers. If you have questions, call 347-396-2402.

Sincerely,

Bureau of Immunization
New York City Department of Health and Mental Hygiene



Date: _____

Dear Parent or Guardian,

Your child may have been exposed to varicella (chickenpox) at _____ on the following date(s): _____.

Varicella, also known as chickenpox, is a contagious viral infection that causes a rash. The rash can be itchy and may include spots and blisters that scab. Chickenpox can occasionally cause complications, especially in babies, pregnant women and people with weakened immune systems. Chickenpox is easily spread from person to person by touching or breathing in virus particles. People are at risk for getting sick for up to 21 days after being exposed.

The Health Department recommends the following for children who may have been exposed to chickenpox in the past 21 days:

1. If your child has a weakened immune system or is pregnant:
 - Make an appointment with your child's doctor right away. Show them the reverse side of this letter so they can make sure your child is immune to varicella.
2. If your child is less than 12 months of age and has not had chickenpox:
 - Your child is too young to get the varicella vaccine and must stay home for 21 days after being exposed.
3. If your child is 12 months of age or older, has not had chickenpox and has not received the varicella vaccine:
 - Make an appointment with your child's doctor right away and show them the reverse side of this letter.
 - Your child is less likely to get sick if they get the varicella vaccine within three days of being exposed. If your child is not vaccinated within this time frame, they must stay home for 21 days after being exposed.
4. If your child received one dose of varicella vaccine more than four weeks ago:
 - Make an appointment with your child's doctor right away to get the second dose.
5. If your child has a rash:
 - Keep your child home from child care, school and activities such as sports or play groups. See point 6 below for information about when your child can return to these activities.
 - Make an appointment with your child's doctor right away and tell the doctor that your child may have been exposed to chickenpox. Show the reverse side of this letter to your doctor.
6. If the doctor diagnoses your child with chickenpox:
 - Ask your child's doctor for a note for school/child care that states your child has chickenpox.
 - Tell the school/child care that your child has been diagnosed with chickenpox.
 - Keep your child home from school/child care and activities such as sports or play groups until all the blisters have dried and scabbed over and no new spots have appeared for 24 hours.
7. If the doctor does NOT diagnose your child with chickenpox:
 - Ask for a note from the doctor telling the school/child care that your child's rash is NOT from chickenpox or another contagious disease.

People who have not had chickenpox should receive two doses of the varicella vaccine to reduce the chance of getting sick. The varicella vaccine is usually given to children at 12 months of age with a second dose at 4 to 6 years of age. All children who go to child care or school are required to have the varicella vaccine. Please make sure your family's vaccinations are up-to-date, including the varicella vaccine. If you need a varicella vaccine, contact your doctor to find a vaccine provider near you.

Visit nyc.gov/health and search "chickenpox" for more information. If you have any questions or concerns, please call 347-396-2402 or _____

Sincerely,



Dear Provider:

Your patient may have been exposed to varicella. Varicella is characterized by a generalized, pruritic rash. People who are not fully vaccinated against varicella are at the highest risk for varicella infection. People who were previously vaccinated may develop varicella, but symptoms are often mild with a non-vesicular rash.

For Patients Without Symptoms Who Are Exposed to Varicella and Are Not Immune:

- The varicella vaccine should be administered within three days of initial exposure as post-exposure prophylaxis to people 12 months of age and older who lack evidence of immunity to varicella. Vaccination beyond this time frame is important for protecting these people from future exposures, but may not protect against exposures that have already occurred; they still need to be excluded from their school or workplace.
- Varicella zoster immune globulin (VariZIG) post-exposure prophylaxis is reserved for people at high risk for severe disease who lack evidence of immunity to varicella and for whom the varicella vaccine is contraindicated. This includes immunocompromised or pregnant people without evidence of immunity, newborn infants whose mothers have symptoms of varicella around the time of delivery, and certain hospitalized premature infants. VariZIG should be administered as soon as possible after, but within 10 days of, exposure. People should not receive measles- or varicella-containing vaccine for at least five months after receiving VariZIG. VariZIG can be ordered from FFF Enterprises at 800-843-7477. For additional information about VariZIG indications and dosing, visit cdc.gov/mmwr/preview/mmwrhtml/mm6228a4.htmhht.
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For Patients With Symptoms and Exposed to Varicella:

- People with varicella are contagious two days before rash onset until all lesions have crusted and no new lesions have appeared for 24 hours. They must stay home during this time frame.
- The preferred diagnostic test is polymerase chain reaction (PCR) of skin lesions (vesicles, scabs, maculopapular lesions). PCR testing can be performed at commercial laboratories. For additional information on specimen collection, visit cdc.gov/chickenpox/hcp/lab-tests.html. IgM serologic testing is less sensitive than PCR.
- Document and communicate all clinical decisions related to varicella to the school or child care.

For all households: Ensure household members are immune to varicella to protect against future exposures. The varicella vaccine should be given to children routinely at 12 months of age with a second dose at 4 to 6 years of age.

Visit nyc.gov/health and search “chickenpox” to find information for providers. If you have questions, call 347-396-2402.

Sincerely,

Bureau of Immunization
New York City Department of Health and Mental Hygiene



Get Vaccinated Now If You Have Not Had Varicella (Chickenpox) Or If You Are Not Sure

There is an outbreak of varicella (chickenpox), a contagious infection that causes an itchy rash with blisters that scab. Chickenpox can cause severe illness, especially in babies, adults, pregnant people and people with weakened immune systems.

Adults who do not know if they had varicella infection should get vaccinated now. People who are pregnant or have a weakened immune system cannot get varicella vaccine.

For more information about varicella or finding vaccination services regardless of immigration or insurance status, call **311**.

Vacúnese ahora si no ha tenido la varicela o si no está seguro

Hay un brote de varicela, una infección contagiosa que provoca una erupción en la piel con picazón y ampollas que forman costras. La varicela puede causar enfermedades graves, especialmente entre bebés, adultos, personas embarazadas y personas con el sistema inmunitario débil.

Los adultos que no sepan si han padecido una infección por varicela también deberían vacunarse ahora. Las personas embarazadas o con el sistema inmunitario débil no pueden vacunarse contra la varicela.

Para obtener más información sobre la varicela o servicios de vacunación, sin importar el estado migratorio o si tienen o no seguro médico, llame al **311**.



**NEW YORK CITY DEPARTMENT OF
HEALTH AND MENTAL HYGIENE**

Ashwin Vasani, MD, PhD
Commissioner

Date: _____

This is to inform you that there have been recent cases of varicella (also known as chickenpox) in the shelter.

Varicella is a contagious viral infection that causes a rash. The rash can be itchy and may include spots and blisters that scab. Chickenpox can occasionally cause complications, especially in babies, pregnant persons and people with weakened immune systems. Chickenpox is easily spread from person to person by touching or breathing in virus particles. People are at risk for getting sick for up to 21 days after being exposed. Those at risk for getting sick include those who are unvaccinated or have not completed their varicella vaccine series.

People who have not had chickenpox should receive two doses of the varicella vaccine to reduce the chance of getting sick. The varicella vaccine is usually given to children at 12 months of age with a second dose at 4 to 6 years of age. All children who go to child care or school are required to have the varicella vaccine. **Please make sure your family's vaccinations are up-to-date, including the varicella vaccine.**

People who are pregnant or have a weakened immune system cannot get varicella vaccine. If they had not received varicella vaccine in the past, they should speak with a medical provider to see if they need a blood test to check if they are immune to varicella.

If you or your child has a rash:

- Stay in the unit and do not attend childcare, school, work, and activities such as sports or play groups.
- Make an appointment with a doctor right away and tell the doctor that there have been students with chickenpox at your shelter.

If the doctor diagnoses you or your child with chickenpox:

- People with chickenpox should remain inside in their unit and away from work, school/child care and activities such as sports or play groups until all the blisters have dried and scabbed over and no new spots have appeared for 24 hours
- For children with chickenpox: Ask your child's doctor for a note for school/child care that states your child has chickenpox and tell the school/child care that your child has been diagnosed with chickenpox.