



Chickenpox (varicella)

Chickenpox (also known as varicella) is an acute viral illness. It is a common childhood infection that may be prevented by vaccination. It is highly contagious, but rarely serious for most children.

Schools and childcares should report all suspected and confirmed cases of chickenpox in their facility to the Minnesota Department of Health (MDH), even if cases have not been diagnosed by a health care provider. Report cases using the below links. If the beginning of an outbreak is suspected, call MDH at 651-201-5414 or 1-877-676-5414.

- Online with REDCap using the [Vaccine Preventable Disease \(VPD\) Reporting Form](#).
- For other ways to report visit [Reporting Varicella \(Chickenpox\)](#).

Consult the health department before posting or distributing the Parent/Guardian fact sheet.

School health and childcare provider information

Cause

Varicella-zoster virus (VZV), a member of the herpesvirus family

Symptoms

Mild fever and generalized skin rash that begins on the chest, back, underarms, neck, and face. Rash starts out as red bumps and within several hours, the bumps turn into small blisters (fluid-filled bumps), and then scabs after a few days. The sores commonly occur in batches with different stages (bumps, blisters, and sores) present at the same time.

Chickenpox can be severe in newborns, those with weakened immune systems, and susceptible pregnant people (have not had chickenpox in the past or varicella vaccine). Complications that commonly lead to hospitalization include severe skin and soft tissue infections, pneumonia, encephalitis, and dehydration.

Spread

Chickenpox is spread when an infected person coughs or sneezes tiny droplets with virus into the air and another person breathes them in. It is also spread from person to person by touching the blister fluid or secretions from the nose or mouth of a person with chickenpox. It can be spread by contact with the lesions of someone with uncovered shingles (see shingles fact sheet).

Incubation

It takes from 10 to 21 days, usually 14 to 16 days, after being exposed until symptoms develop.

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Contagious period

From 1 to 2 days before the rash begins and until all blisters have become scabs (generally within 5 days, but with a range of 4 to 7 days after the appearance of the first blisters in an otherwise healthy child). Persons who have progressive varicella (development of new lesions greater than 7 days) might be contagious longer.

Chickenpox can occur even if someone has had the varicella vaccine. These are referred to as breakthrough infections. They develop more than 42 days after vaccination, are usually less severe, have an atypical presentation (low or no fever, less than 50 skin lesions), and are shorter in duration (4 to 6 days). Bumps, rather than blisters, may develop; therefore, scabs may not present. **Breakthrough cases should be considered infectious** and are contagious until all sores (bumps/blisters/scabs) have faded, or no new sores have occurred within a 24-hour period, whichever is later.

Exclusion

Childcare and school

Individuals who are not vaccinated

- Until all blisters have dried into scabs; usually by day 6 after the rash began.

Vaccinated (have received 2 doses of varicella vaccine) individuals:

- Until all sores (bumps/blisters/scabs) have faded, or no new sores have occurred within a 24-hour period, whichever is later. Sores do not need to be completely resolved before the individual is allowed to return to school.

Exposed children without symptoms do not need to stay home unless chickenpox develops.

Diagnosis

Based on typical symptoms and the characteristic rash. Lab tests can be done to confirm chickenpox.

Treatment

Recommend parents/guardians call their health care provider. In some cases, antivirals may be given to high-risk individuals.

Do not give aspirin or other salicylate-containing medications to any child or adolescent under 18 years of age.

Prevention

- Minnesota state law requires two doses of varicella vaccine by kindergarten and 7th grade, unless the parent/guardian provides documentation of exemption or medical contraindication.
 - Dose 1 between 12 to 15 months of age
 - Dose 2 between 4 to 6 years old

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Dose 2 may be given earlier, as long as it is 3 months or more since receiving the first dose.

- Susceptible persons (those who have not had chickenpox disease or varicella vaccine in the past) who have been exposed to someone with chickenpox should call their health care provider immediately. This is especially important for pregnant people and persons with a weakened immune system. A health care provider may recommend post-exposure prophylaxis based on the timeframe for exposure and other factors.
- If you think a child has chickenpox, have the parent/guardian call their health care provider before taking the child in.
- Cover nose and mouth with a tissue when coughing or sneezing or cough/sneeze into your sleeve. Dispose of used tissues in the trash.
- Wash hands thoroughly with soap and warm running water after contact with secretions from the nose, mouth, or blister fluid. **Thorough handwashing is the best way to prevent the spread of communicable diseases.**
- Clean and disinfect objects and surfaces contaminated with secretions from the nose, mouth, or blister fluid at least daily and when soiled (see Section 2).
- Clean and sanitize mouthed toys, objects, and surfaces at least daily and when soiled (see Section 2).

For more information, call Hennepin County HSPHD-Epidemiology at (612) 543-5230 or call your local health department.

Hennepin County Public Health
Epidemiology
612-543-5230
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