



Respiratory syncytial virus (RSV)

RSV infection is a common respiratory illness that can affect persons of any age. It is the most common cause of bronchiolitis (infection of the small air passages in the lungs) and pneumonia in infants and children under 2 years of age. RSV infection spreads quickly to adults and children alike. Outbreaks of RSV occur almost every year during the winter and early spring

School health and childcare provider information

Cause

Respiratory syncytial virus

Symptoms

Symptoms can be similar to a mild cold with low-grade or no fever, cough, watery eyes, runny nose, nasal stuffiness, and sneezing. However, the more severe form includes wheezing, as seen in bronchiolitis, and lung congestion, as seen in pneumonia. Infants infected during the first few weeks of life may only show tiredness, irritability, and loss of appetite and may have episodes where they stop breathing for short time periods (apnea) with few other respiratory signs.

RSV infection can be especially serious in infants who were born prematurely or those with heart, lung, or immune system problems. However, severe lower respiratory tract disease may occur at any age, especially in the elderly or those with heart, lung, or immune system problems. People usually have moderate to severe cold-like symptoms. A person may have more than one RSV infection during their lifetime.

Spread

The virus is spread when a person with RSV coughs or sneezes tiny droplets into the air, and another person breathes them in. It can also be spread by touching the secretions from the nose and mouth of an infected person or by touching hands, tissues, or other items soiled with these secretions and then touching one's eyes, nose, or mouth. The virus can live on hands for 30 minutes or more and on environmental surfaces for several hours.

Incubation

It takes 2 to 8 days, usually 4 to 6 days, from the time a person is exposed until symptoms start.

Contagious period

Shortly before signs and symptoms of illness appear. The virus is also usually found in respiratory secretions for 3 to 8 days, although some infants can spread RSV for as long as 3 to 4 weeks.

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Exclusion

Childcare

Until fever is gone without the use of fever reducing medication and the child is well enough to participate in routine activities.

Diagnosis

Recommend parents/guardians call their health care provider if their child has symptoms of RSV. There are various laboratory tests to detect RSV including a nose or throat swab or blood tests.

Treatment

There is no specific treatment for RSV. **Do not give aspirin or salicylate-containing medications to any child or adolescent under 18 years of age.**

Prevention

- Infants younger than 8 months of age who are born during, or are entering, their first RSV season can receive an RSV preventive antibody product (Nirsevimab). This may also be recommended for other young children who are at increased risk for severe RSV disease. Recommend that parents/guardians speak with their health care provider.
- Pregnant women are recommended to receive an RSV vaccine during weeks 32 through 36 of pregnancy to protect their infant.
- 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 or mouth or handling used tissues. Thorough handwashing is the best way to prevent the spread of communicable diseases. If soap and water are not available, use an alcohol-based hand sanitizer.
- Clean and disinfect commonly touched surfaces (doorknobs, refrigerator handle, crib rails, water faucets, cupboard handles) at least daily (see Section 2).
- Clean and sanitize mouthed toys, objects, and surfaces at least daily and when soiled (see Section 2).
- Do not allow sharing of anything that goes into the mouth such as drinking cups, straws, water bottles, and eating utensils.

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

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