

# GET THE FACTS

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## Hand Foot and

### **What is Hand, Foot, and Mouth Disease (HFMD)?**

Hand Foot and Mouth Disease (HFMD) is a viral illness that commonly affects children and typically is not serious. Children under 5 years of age are most affected, though it can occasionally occur in adults. HFMD occurs most often during summer and fall.

### **What are the symptoms?**

HFMD can cause fever, blister-like mouth sores, sore throat, loss of appetite, and a skin rash that may occur on the fingers and palms of the hands, on the buttocks, or on the soles of the feet. Dehydration may occur in young children if they cannot swallow adequate liquids due to painful mouth sores.

### **How long does this disease last?**

A person usually gets sick within three to six days of becoming infected. The rash can last for about seven to ten days.

### **How is HFMD disease spread?**

The viruses that cause HFMD are often spread through close personal contact with an infected individual's saliva, nasal mucus, fluid from blisters or scabs, feces, and contaminated surfaces. It can also be transmitted through the air while an infected individual coughs or sneezes.

### **Who is at risk for HFMD infection?**

Infants and children less than 5 years of age are at highest risk for contracting HFMD, but older children and adults can be infected, especially when they live or work with infants.

### **What preventive measures and treatments are available?**

- To lower the risk of infection, wash your hands with soap and water for at least 20 seconds, especially after using the toilet and changing diapers.
- Teach children to cover their mouths with tissue when sneezing or coughing. Clean and disinfect soiled items such as toys and high-touch surfaces.
- Avoid close contact and sharing cups and utensils with those infected with HFMD. HFMD is not a vaccine-preventable disease.
- Treatment for HFMD is mostly supportive care and should involve increased fluid intake to prevent dehydration and the use of over-the-counter medication, such as acetaminophen (Tylenol), to reduce fever and pain associated with mouth sores.

### **What should schools do?**



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- Notify exposed families about HFMD and advise them to monitor for symptoms.
- Encourage parents to seek medical advice if a child is unwilling to eat or drink due to mouth sores

### What are the recommendations for exclusion?

Students who are drooling and cannot maintain hygiene should be excluded.

Infected individuals who come to school and early childcare centers with a fever of 100.4F (38 C) should be excluded. Schools and early childcare centers should consider whether affected individuals require additional care that exceeds the facility's staffing abilities.

For more information, visit [Symptoms and Diagnosis of Hand, Foot, and Mouth Disease | CDC](#) or [Hand, Foot and Mouth Disease - Symptoms and Causes | Mayo Clinic](#).



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HFMD on dark skin may appear as small, flat, red spots or blisters that can look brown, grey, purple, red, and pink. These sores usually start as small red spots, often on the tongue and insides of the mouth.



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HFMD on light skin can present with tiny red bumps, blisters on the palms of the hands, and blisters on the soles of the feet and fingers. These sores usually start as small red spots, often on the tongue and insides of the mouth.

