



MCHEMRY COUNTY DEPARTMENT OF HEALTH
DIVISION OF ENVIRONMENTAL HEALTH
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Food Handler Illness Guidelines

This document contains guidance for McHenry County retail food establishments regarding food handler illness. The guidance reflects regulations outlined in the Illinois Food Code and Control of Communicable Diseases Code.

This document gives guidance on the following conditions:

- Responsibility of permit holder, Person-in-Charge, employee
- Exclusion, restriction, and reinstatement requirements for listed symptoms and diagnoses
- Skin wounds
- Sore throat with fever

Contact the McHenry County Department of Health if you have questions or if you suspect an outbreak in your facility:

- Communicable Disease Program: 815-334-4500
- Food Protection Program: 815-334-4585

Description:

***Exclusion:** means preventing a person from working as a food employee in a food establishment or entering a food establishment.

****Restriction:** means limiting the activities of a food employee so that there is no risk of transmitting a disease that is transmissible through food; also ensuring that the food employee does not work with exposed food, clean equipment, utensils, linens, or unwrapped single-service or single-use articles.

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Diagnosis	Exclusion*, Restriction**, and Reinstatement Requirements	Person-in-Charge (report illness to MCDH)	Employee (report illness to Person-in-Charge)
Norovirus (Diagnosed by testing vomit or stool)	Active Symptoms: EXCLUDE until 48 hour after last episode of vomiting or diarrhea and the Person-in-Charge obtains approval to reinstate from MCDH.	Yes	Yes
Hepatitis A (Diagnosed by having a positive blood test)	<ul style="list-style-type: none"> • Active Symptoms with Jaundice: EXCLUDE until the Person-in-Charge obtains approval to reinstate from MCDH. Exclude until 7 days after onset of jaundice. • Active Symptoms without Jaundice: EXCLUDE until the Person-in-Charge obtains MCDH approval. Exclude for 14 days after onset of symptoms if there is no jaundice. • No Symptoms: EXCLUDE diagnosed employees in all cases until the Person-in-Charge obtains reinstatement approval from MCDH. 	Yes	Yes
Shigella, or Shiga Toxin-Producing E. coli, and Salmonellosis (non-typhoidal) (Typically diagnosed by a stool sample)	<ul style="list-style-type: none"> • Active Symptoms: EXCLUDE until the Person-in-Charge obtains MCDH approval. Employees are excluded until they have 2 consecutive negative stool samples collected at least 24 hours apart. If employees were treated with antibiotics, stool specimens should not be collected until at least 48 hours after they took their last dose of antibiotics. • No Symptoms: EXCLUDE until the Person-in-Charge obtains approval to reinstate from MCDH. Employees are excluded until they have 2 consecutive negative stool samples collected at least 24 hours apart. If employees were treated with antibiotics, stool specimens should not be collected until at least 48 hours after they took their last dose of antibiotics. 	Yes	Yes
Salmonella Typhi (Typhoid Fever)	Active Symptoms or No Symptoms: EXCLUDE until the Person-in-Charge obtains MCDH reinstatement approval. Exclude until the employee's symptoms have resolved and employee has 3 consecutive negative stool samples, each collected at least 24 hours apart, at least 48 hours after the last dose of antibiotics and no sooner than one month after illness onset.	Yes (Also report if illness occurred in last 3 months)	Yes

Symptoms	Exclusion*, Restriction**, and Reinstatement Requirements	Person-in-Charge (report illness to MCDH)	Employee (report illness to Person-in-Charge)
Vomiting or Diarrhea	EXCLUDE until 48 hours after the last episode of vomiting or diarrhea.	No	Yes
Jaundice	EXCLUDE if onset of jaundice occurred within the last 7 days, unless documentation is provided from a health practitioner specifying the jaundice is not caused by the Hepatitis A virus.	Yes	Yes
Sore throat with fever	REINSTATEMENT REQUIREMENTS: Employees are restricted until they provide written documentation from a health practitioner to the Person-in-Charge stating that the employee meets one of the following conditions: <ul style="list-style-type: none"> • Has received antibiotic therapy for strep throat infection for more than 24 hours; • Has at least one negative test for strep throat; OR • Is otherwise determined by a health practitioner to be free of strep throat infection. 	No	Yes
Open lesion containing pus on body	RESTRICT until the lesion is properly covered with one of the following: <ul style="list-style-type: none"> • Hand, finger, or wrist lesions: an impermeable cover, such as a finger cot or stall, and the use of a single-use glove over that covers the hand/wrist. • Arm: an impermeable cover. • Other parts of the body: a dry, durable, well-fitted bandage. 	No	Yes