

PARENT SCREENING TOOL

Start here

Is your child ill with ONE of the following?

Cough
Shortness of breath
Difficulty breathing
Change in taste or smell

OR

has taken fever reducing medication in the last 24 hours?

YES

NO

Is your child ill with any TWO of the following?

*Fever (measured or subjective)**
Chills
Rigors
Myalgia
Headache
Sore throat
Nausea or vomiting
Diarrhea
Fatigue
Congestion or runny nose

YES

NO

Has your child had direct contact with someone who has Covid19?

YES

NO

Follow traditional guidelines for illness.

Otherwise report to school as normal.

**Students with fever should be kept home until fever free without medication.*

Stay home.
Notify the school.
Consult your physician.
Rest and recover if ill.
Access home learning.

Return to school when:

If not tested, or tests positive, stay home for 10 days from symptom onset **AND** at least 24 hours after fever resolution **AND** respiratory symptoms have improved

OR

If clinically cleared by primary medical doctor or other health care provider stay home until fever free for 24 hours **AND** symptoms have improved

OR

If a COVID19 test is negative, stay home until fever free for 24 hours **AND** respiratory symptoms have improved

Student should report directly to nurse.

Stay home.
Notify the school.
Consult your physician.

Access home learning.
Await additional guidance.

For questions or concerns please contact the school nurse.

Created by the Beaver County School Nurse Association. Decision chart based on CDC and PA DOH guidelines.