COVID-19 HEALTH SCREENING REMINDER

As our school year progresses, it remains important that we are diligent in our health and safety practices both in school and at home. Parents and guardians are reminded to review the following chart closely when monitoring your child for symptoms:

GROUP A (1 OR MORE SYMPTOMS)

- Cough
- Shortness of Breath
- Difficulty Breathing
- New Olfactory Disorder Loss of smell or way odors are perceived
- New Taste Disorder Loss of taste or food does not taste the way it normally does

GROUP B (2 OR MORE SYMPTOMS)

- Fever
- Chills
- Rigors Episode in which one's temperature rises quickly and is accompanied by severe shivering and coldness.
- Myalgia Muscle pains or muscle aches
- Headache
- Sore throat
- Nausea or vomiting
- Diarrhea
- Extreme fatigue
- Congestion/runny nose

If your child is experiencing **one** symptom from the column on the left or **two** symptoms from the column on the right (that are not due to a pre-existing condition), we are requiring that one of the following occur:

- 1. Quarantine from school for at least 10 school days
- 2. Provide the school nurse a doctor's note that states an alternate diagnosis for the COVID-19-like symptoms
- 3. Providing the school nurse with a negative COVID-19 test result

Keep in mind that the child experiencing these COVID-19-like symptoms <u>and their siblings</u> must be held out of school until one of these requirements are satisfied. In addition, if any member of the household has a suspected or confirmed case of COVID-19, all students in the home must remain home from school.

<u>Please note that the point of contact for any COVID-19 related questions or reporting of symptoms should be the school nurse. Our nurses have received training to ask the necessary questions so that we can consult with the PA Department of Health for guidance.</u>

Thank you for your continued partnership in keeping our school community safe and healthy!