

# COVID-19 School Health Screening Agreement

## Instructions for Parents and/or Guardians

For the health and safety of our students, the local public health department requires students be screened for symptoms of COVID-19 before entering the school. Due to the time and interruption to education doing this on site prior to school entry this would cause, the health department and the CDC do not recommend these screenings be done by the schools.

We ask that you complete the steps of the student screening below, prior to sending your child to school or any school activities or sports. We ask that you complete the form below indicating your understanding and agreement to perform symptom screenings on your child.

By signing this form, I am committing to screening my child daily for the 2020-2021 school year, unless otherwise directed. I also understand that it is my responsibility to call Hopkins Public Schools as soon as possible to let them know if my child is not going to school for potential COVID-19 symptoms.

*I commit to screening my child \_\_\_\_\_ for COVID-19 symptoms and exposure.*

*Parent(s)/ Guardian(s) Name:* \_\_\_\_\_

*Address:* \_\_\_\_\_

*Phone Number:* \_\_\_\_\_

*Parent or Guardian Signature:* \_\_\_\_\_

*Date:* \_\_\_\_\_

## Student Screening

### Student Screening

- Student guardians should let the school know if they have been exposed to COVID-19 or if they have been diagnosed or have symptoms of COVID-19.

**Parents/families:** Before leaving for school, please do the following screening. Your child having any of the symptoms indicates a possible illness that may decrease the student's ability to learn and put them at risk for spreading illness to others.

### Section One: Symptoms

- Temperature 100.4 degrees Fahrenheit or higher when taken by mouth or forehead with a non-contact thermometer
- Sore throat
- New** uncontrolled cough that causes difficulty breathing (for students with chronic allergic/asthmatic cough, a change in their cough from baseline)
- Diarrhea, vomiting, or abdominal pain
- New onset of severe headache, especially with a fever

### Section Two: Close Contact/Potential Exposure

In the past 14 days has your child:

- A. Had close contact (within 6 feet of an infected person for at least 15 minutes including brief encounters totaling at least 15 minutes in 24 hours) with a person with confirmed COVID-19: OR
- B. Had close contact (within 6 feet of an infected person for at least 15 minutes including brief encounters totaling at least 15 minutes in 24 hours) with person under quarantine for possible exposure to COVID-19

**DISCLAIMER: This screening tool is subject to change based on the latest information on COVID-19.**

Source: Centers for Disease Control and Prevention; [Screening K-12 Students for Symptoms of COVID-19: Limitations and Considerations](#)

**If child answers YES to any screener questions, use this chart to determine appropriate action to take.**

Response	YES to any symptoms in Section 1	YES to Section 2A	YES to Section 2B
<b>Next Steps</b>	Keep child home from school (isolate). Contact your healthcare provider to determine cause and consider getting tested for COVID-19. If also yes to 2A, <b>strongly</b> consider having your child tested for COVID-19.	Keep child home from school (quarantine) for 14 days from their last exposure.	Child may continue to attend school, but monitor for symptoms.
<b>Return To School</b>	<p>If child tests negative for COVID-19, <b>or</b>, If a healthcare provider provides an alternate diagnosis,</p> <p><b>They may return to school in accordance with <a href="#">Managing Communicable Diseases in Schools</a>:</b></p> <p><b>Fever:</b> at least 24 hours have passed with no fever, without the use of fever-reducing medications</p> <p><b>Sore throat:</b> improvement (if strep throat: do not return until at least 2 doses of antibiotic have been taken)</p> <p><b>Cough/shortness of breath:</b> Improvement</p> <p><b>Diarrhea, vomiting, abdominal pain:</b> no diarrhea or vomiting for 24 hours</p> <p><b>Severe headache:</b> improvement</p>	<p>If child tests positive for COVID-19, <b>or</b> Child is not tested for COVID-19 and an alternate diagnosis is not provided,</p> <p><b>They may return to school when:</b></p> <ul style="list-style-type: none"> <li>- 10 days have passed since symptoms began, and</li> <li>- At least 24 hours have passed with no fever, without the use of fever-reducing medications, and</li> <li>- Symptoms have improved.</li> </ul>	<p>If after 10 days child does not develop symptoms, they may end quarantine and return to school, but continue to monitor for an additional four days.</p> <p>If child does develop symptoms, they must stay home and isolate.</p>