

medications

**AND** 10 days since first symptoms

**AND** symptoms improving



## **Public Health**

## Flowchart for Recommendations on COVID-19 School Exclusion

Last Revised 8/14/2020 START HERE **QUARANTINE AT HOME** Return to school after: Were you within 6 feet of that person for 15 **EXPOSURE:** Within the last 14 days, have 14 days from last contact unless Yes Yes minutes or longer? you been in contact with a person who symptoms develop tested positive for COVID-19 (nasal swab)? If symptoms develop, contact a healthcare provider No No SYMPTOMS: Within the last 24 hours, have you had any of the following sign and symptoms of illness? **HIGH RISK SYMPTOMS** LOW RISK SYMPTOMS New cough ☐ Fever (>100.4°F)/Chills Shortness of breath/difficulty breathing □ Congestion/runny nose No Change or loss of taste/smell □ Nausea/vomiting Return to class Diarrhea Sore throat Headache ☐ Muscle weakness/body aches/fatigue Only one **LOW RISK** symptom Any one **HIGH RISK** symptom AND/OR two or more **LOW RISK** symptoms Recommend isolation at home - Return to school after: Seek evaluation by a healthcare provider & based on results: 24 hours without fever, without the use of fever reducing medications Positive COVID-19 laboratory result/ Refusal to seek healthcare evaluation Alternate diagnosis OR **AND** symptoms improving medically diagnosed positive COVID-19 Recommend isolation at home **Negative COVID-19** Return to school after nasal swab test case Isolate at home o 24 hours without fever, Return to school after without the use of fever o 24 hours without fever, without reducing medications the use of fever reducing **AND** 10 days since first

symptoms

**AND** symptoms improving