Health Screening Checklist

This screening should be done by a parent at the beginning of the day before students are sent to school. This checklist applies even to those vaccinated or previously infected.

1. Do you have a fever (38C), do you feel warm, or feel chills?
   - Yes
   - No

2. Do you have any of the following respiratory symptoms?
   - New continuous cough (regularly for over an hour or multiple episodes over 24 hours)
   - Sore throat
   - Runny nose

3. Loss of sense of taste or smell in the last 24 hours.
   - Yes
   - No

If they answer yes to questions #1 or #2, please keep them home and inform us. If they answered yes to #3 or have a persistent fever (more than 24 hours) and respiratory difficulties combined with any of the following: general weakness/fatigue; headache; sore throat; nausea/vomiting; diarrhea or confusion, please see a doctor and isolate at home until they are asymptomatic for 4 straight days without the use of any medications or longer as directed by a doctor.

If you have had close contact with a COVID-19 patient (spent longer than 15 minutes within 1.5m of someone who was sick with a fever and cough) stay home immediately and self-isolate. If asymptomatic, this is for a period of 7 days from contact. If symptomatic, please see a doctor and isolate at home until they are asymptomatic for 4 straight days without the use of any medications or longer as directed by a doctor. Please inform the school.

If they develop a fever OR any of the respiratory symptoms at school, they will be assessed at school and then sent home to self-isolate until they are asymptomatic for 4 straight days without the use of any medications.