COVID-19 Screening for Parents

Every morning before you send your child to school please check for signs of illness:

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FEVER 100.4* OR CHILLS
*or school board policy if threshold is lower

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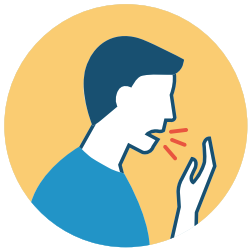
SORE THROAT

☐ 

COUGH* OR SHORTNESS OF BREATH
*especially new onset, uncontrolled cough

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DIARRHEA, NAUSEA OR VOMITING, ABDOMINAL PAIN

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HEADACHE*
*particularly new onset of severe headache, especially with fever

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NEW LOSS OF TASTE OR SMELL

**May present with more than one symptom. This list does not include all possible symptoms.*

1. Does your child have any sign of illness above?
2. Were you in close contact (within 6 feet for a total of 15 minutes over a 24-hour period) with anyone confirmed with COVID-19?
3. If the answer is **YES** to any of the questions, **DO NOT** send your student to school. Instead, begin isolation of your child and contact your healthcare provider. Have you been tested for COVID-19? Only a positive test or provider diagnosis can confirm if someone has a current infection.
4. Please keep your student home until they meet the criteria.

→ *If you have trouble breathing, chest pain, new confusion, inability to wake or stay awake or bluish lips or face*

CALL 911!

Indiana Department of Health

Updated: 2/9/21