

# Can My Child Go To School Today?

## DAILY WELLBEING CHECKLIST



ONE TEAM. ONE GOAL.  
STUDENT SUCCESS.

1

Has the child been in **CONTACT** with an individual testing positive for COVID-19?

-YES→

*Exclude from school. The child can return 14 days after the last time he/she had contact with someone with COVID-19.  
\*If child becomes symptomatic see step 2 below.*

↓  
**NO**  
↓

2

Does the child have **SYMPTOMS** and have they tested **POSITIVE** for COVID-19?  
*i.e. shortness of breath, cough, fever, chills, muscle pain, sore throat, new loss of taste or smell, vomiting/diarrhea*

-YES→

*Exclude until the person can answer yes to ALL of these questions:*  
1. Has it been 10 days since they first had symptoms?  
2. Have they been without fever for 24 hours without any medicine for fever?  
3. Are the other respiratory symptoms, like cough and shortness of breath, improved?  
**\*\*Other criteria may be required by local health department**

↓  
**NO**  
↓

3

Is the child **UNWELL** with cold/flu-like **SYMPTOMS**?

-YES→

*Exclude from school until symptoms resolve and student has been fever free for 24 hours WITHOUT any fever reducing medication.*

↓  
**NO**  
↓

4

Does the child have a **FEVER** ?  
• 99.5 °F with one or more symptoms  
• 100.4 °F with no other symptoms

-YES→

*Exclude from school until symptoms resolve and student has been fever free for 24 hours WITHOUT any fever reducing medication.*

↓  
**NO**  
↓

**YOUR CHILD MAY ATTEND SCHOOL**

Student(s) Name / Grade(s)

Signature Box

I attest that I will monitor my student(s) daily for symptoms and follow the guidelines listed above.