

# Daily Home Health Screening Checklist

## Section 1: Symptoms

As per the New Jersey Department of Health, any of the symptoms below could indicate a COVID-19 infection in children and may put your child at risk for spreading illness to others. Please note that this list does not include all possible symptoms and those with COVID-19 may experience any, all, or none of these symptoms.

Parents/Guardians should be monitoring their child on a **daily** basis for any evidence of illness/exposure as outlined below. For those with medically documented chronic illness/allergies only new symptoms or symptoms worse than baseline should be considered for the exclusion criteria.

**If your child exhibits the symptoms below (regardless of vaccination status and post COVID-19 illness within the last 90 days), they should remain home and contact the school nurse.**

### List A (2 symptoms)

- chills
- myalgia (muscle aches)
- headache
- sore throat
- nausea/vomiting\*
- diarrhea\*
- rash
- fatigue
- congestion or runny nose
- red, runny eyes

### List B (1 symptom)

- fever (100.0 or higher)
- cough
- shortness of breath
- difficulty breathing
- new loss of taste or smell
- tested positive for COVID-19 within the past 5 days

If **TWO OR MORE symptoms in list A** are exhibited OR **AT LEAST ONE symptom in list B** is exhibited, **keep your child home, call the attendance line and notify the school nurse for further instructions.**

*\* If the student is experiencing Nausea/Vomiting or Diarrhea as a single symptom, they must not attend school until at least 24 hours after the symptom has subsided.*

## Section 2: Close Contact/Potential Exposure

Individuals that are “up to date” with vaccination or those that have recovered from COVID-19 (within the past 90 days) are **EXEMPT** from the following scenarios. To be considered “up to date” the individual must have received all recommended COVID-19 vaccines, including any booster dose(s) when eligible. For those that are not eligible for a booster they must be 2 weeks post the last dose of the COVID-19 vaccination series. Medical documentation must be on file or provided to the school nurse.

If not **exempt**, do **any** of the additional criteria below pertain to your child? **If so DO NOT send your child to school and contact the school nurse for further instruction.**

- Someone in our household has tested positive for COVID-19 or is awaiting COVID-19 test results, due to illness.
- My child has been a close contact of someone (outside of school) who has symptoms associated with COVID-19 (close contact is defined as being within 6 feet of an infected individual for a period of 15 minutes or more in a 24 hour period)
- My child has been advised to isolate or self-quarantine by a government agency, physician, or school official.