

At home daily health screening

PLEASE REVIEW THIS CHECKLIST EACH DAY BEFORE SCHOOL

NO YES

Do you currently have a fever of 100.4° or higher, or had a sense of having a fever since you were last in school?

Do you currently have a new cough or breathing difficulty that cannot be attributed to another health condition?

Do you currently have chills that cannot be attributed to another health condition?

Do you have a new sore throat that cannot be attributed to another health condition?

Do you have muscle aches that cannot be attributed to another health condition or activity such as exercise?

Have you been exposed to anyone who tested positive or is suspected positive for Coronavirus (COVID-19) in the past 14 days?

If you checked YES to ANY of these questions, please stay at home and contact your doctor and contact the school.

