When You Can Be Around Others

Symptomatic children and adults

– Anyone with an illness that is unlikely to be COVID (single low-risk symptom resolving in 24-48 hours or non-infectious diagnosis e.g. migraine, allergies) may return to school when symptoms have improved and afebrile for ≥ 24 hours (usual policy for any illness).
  • This person does not need to see a physician or be tested to be cleared to return to school. If symptoms do not resolve quickly, the individual should be assessed by a physician and considered for testing.
  • If this person is a contact with a known COVID case, then this person should be seen by a physician and tested to determine if he or she can return to school or requires isolation.

– Anyone with a COVID-like illness (one high-risk or two or more low-risk symptoms) should be assessed by a physician and tested for COVID (as well as influenza, RSV, group A Streptococcus depending on the signs and symptoms).
  • If the test is negative, or another pathogen is identified and the person is not a contact of a COVID case, then he or she can return to school when symptoms have improved and afebrile for ≥ 24 hours.
  • If the test is positive or no test is done (and no other pathogen identified), this person must stay home for minimum of 10 days and be afebrile with improving symptoms for ≥ 24 hours.

Asymptomatic children and adults

– Anyone who is a contact of a known case of COVID must be isolated at home for 14 days from the date of last potential exposure to the COVID case. If there is ongoing exposure to the case in the household then the date of last potential exposure is 10 days after the onset of symptoms of the COVID case.
  • If this person develops symptoms during this 14-day period, he or she should continue isolation for 10 days beyond the day of onset of symptoms and have improving symptoms for ≥ 24 hours and no fever.
    • If anyone in the household develops symptoms of COVID during the 14-day isolation period, then the start date of the isolation period resets to the first day of symptoms for that contact and must continue for 10 days after that exposure.
    • If this person remains asymptomatic during this 14-day period, testing for COVID is not recommended as the best timing for such a test is unknown and a negative test would not shorten the period of isolation.

– Anyone who has not been exposed to a COVID case and is asymptomatic should not be tested.

Students and staff need clearance from the Health Department, but not from a physician, to return to school when the isolation period has ended. A school official should monitor absences and dates of isolation to approve return.
Algorithm for Return to School

Accessing for COVID-19 in children with symptoms of illness & no known exposure: Consider SARS-CoV-2 for the patients with a single high-risk symptoms or 2 or more low risk symptoms (note: symptoms grouped together are considered a single symptom).

*High risk symptom based on specificity, seriousness, or risk for spread of SARS-CoV-2. Clinicians may elect to test with one low risk symptom due to high clinical suspicion and/or testing readily available.

<table>
<thead>
<tr>
<th>High Risk*</th>
<th>Low Risk</th>
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</thead>
<tbody>
<tr>
<td>• fever/chills/rigors</td>
<td>• headache</td>
</tr>
<tr>
<td>• cough</td>
<td>• myalgias</td>
</tr>
<tr>
<td>• shortness of breath or difficulty breathing</td>
<td>• sore throat</td>
</tr>
<tr>
<td>• new loss of taste or smell</td>
<td>• runny nose/congestion</td>
</tr>
<tr>
<td>• nausea/vomiting/diarrhea</td>
<td></td>
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</tbody>
</table>

Molecular or antigen test for SARS-CoV-2 and/or other respiratory pathogens: RSV, Flu, Group A strep**

Negative SARS-CoV-2 and no other pathogen identified: Not COVID-19
- Back to daycare/school if afebrile ≥ 24 hours and symptoms improved

Other pathogen identified: Assume not COVID-19
- Possible or Confirmed COVID-19
  • Back to daycare/school if afebrile for ≥ 24 hours and symptoms improved and approved by local health department for those with positive tests (typically 10-14 days from start of illness).
  • Quarantine household contacts for 14 days from last contact with case.

Positive SARS-CoV-2
- No SARS-CoV-2 test and no other pathogen identified: Clinically Not COVID-19
  • Back to daycare or school for non-infectious disorders
  • Back to school or daycare based on CDC criteria for other illnesses, most frequently when afebrile
  • ≥ 24 hours and symptoms improved

Single low risk symptom complex which resolves in 24-48 hours: COVID Unlikely
- Symptoms likely due to non-infectious diagnosis (eg., allergies)

Possible or Confirmed COVID-19
- Back to daycare/school if afebrile for ≥ 24 hours and symptoms improved and approved by local health department for those with positive tests (typically 10-14 days from start of illness).
- Quarantine household contacts for 14 days from last contact with case.

Clinically Not COVID-19
- Back to daycare or school for non-infectious disorders
- Back to school or daycare based on CDC criteria for other illnesses, most frequently when afebrile
- ≥ 24 hours and symptoms improved