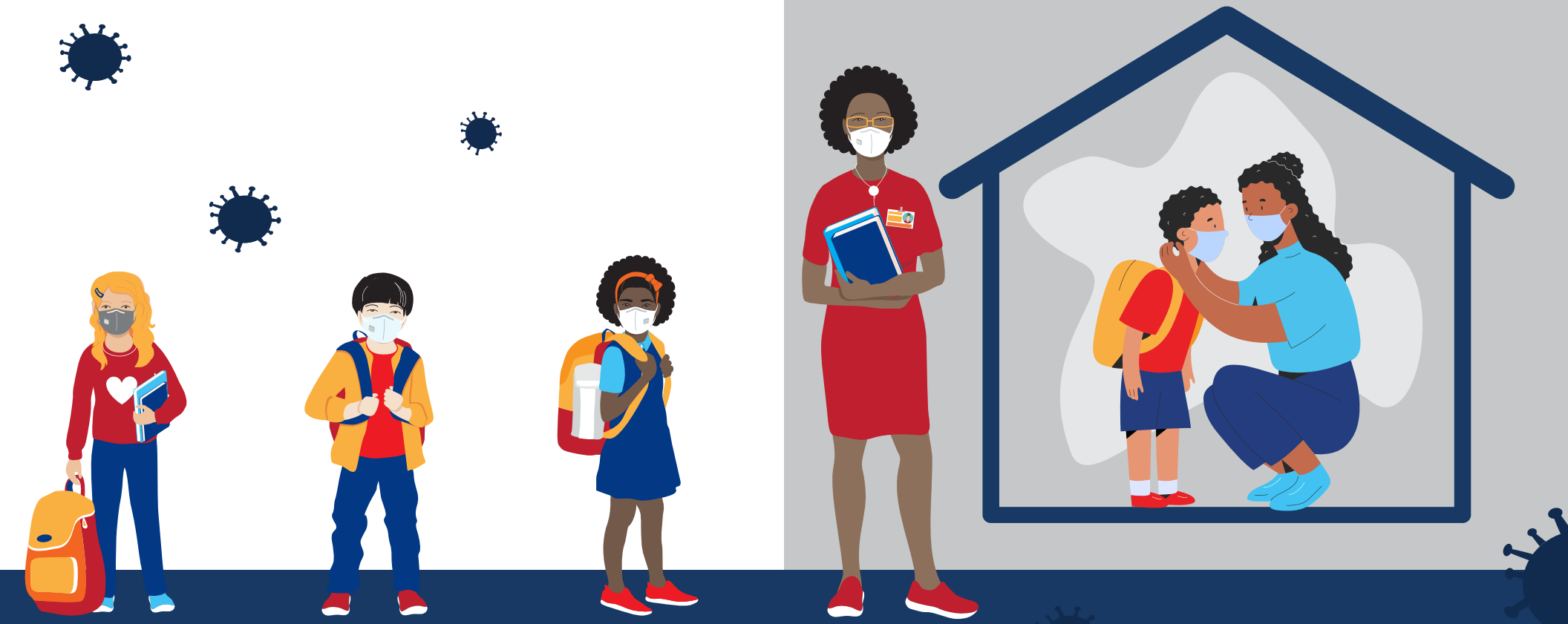
When Should a Child Stay Home From School and/or Child Care?

A Virginia Department of Health Guideline
for Evaluating a Child with COVID-19 Symptoms or Exposure



VDH VIRGINIA DEPARTMENT OF HEALTH

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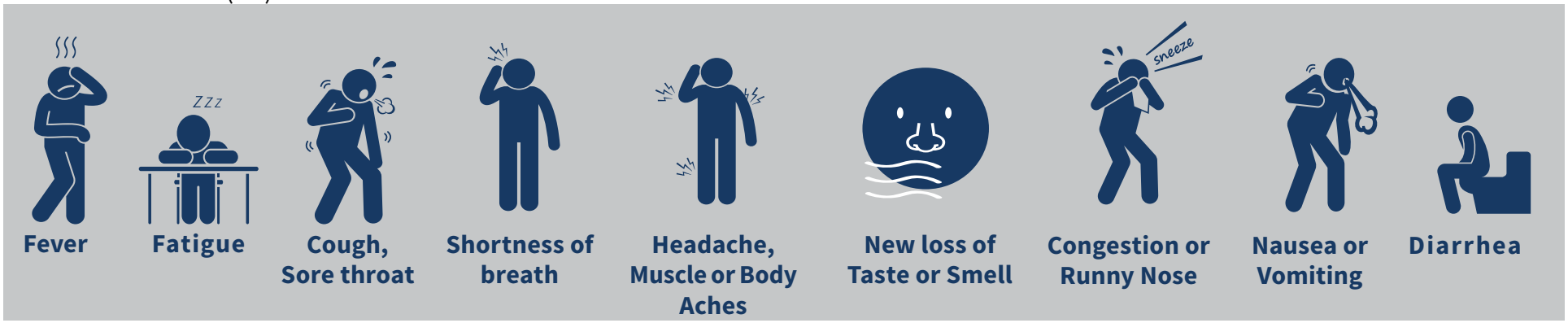
Introduction

As schools and child care facilities reopen during the Fall of 2020, parents and guardians, school and child care personnel, and health-care providers all play a role in identifying possible cases of COVID-19 and taking quick action to limit the spread of disease in homes, schools, and child care facilities. This is very challenging because the symptoms of COVID-19 are similar to other common illnesses, like colds and influenza (flu).

The goal of this guideline is to help parents and guardians, school and child care personnel, and healthcare providers assess a child's symptoms and exposure to COVID-19 to determine when and for how long the child needs to stay away from others in an effort to prevent the spread of disease.



Symptoms Of COVID-19

People with COVID-19 have had a wide range of symptoms reported – ranging from mild symptoms to severe illness. Symptoms may appear **2-14 days after exposure to the virus**. People with these symptoms may have COVID-19:

- Fever (≥100.4°F) or chills
- Cough
- Shortness of breath or difficulty breathing
- Fatigue
- Muscle or body aches
- Headache
- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea

This list does not include all possible symptoms.

If someone is showing any of the following signs, seek emergency medical care immediately:

- Trouble breathing,
- persistent pain or pressure in the chest,
- new confusion,
- inability to wake up or stay awake,
- or bluish lips or face.

www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html

General Prevention Tips

There are general COVID-19 prevention tips that are important for everyone to know and follow consistently. This section includes steps everyone should take to prevent COVID-19, what to do if a child has a fever, and what to do if a child has been exposed to someone who is sick with COVID-19.

1. **There are steps every person needs to take every day** to help slow down the number of people getting sick with COVID-19. These are well known and summarized in the figure below.

- Physical distancing – maintain 6 feet from others
- Wear a mask when physical distancing is not possible
- Avoid crowds when indoors and outdoors
- Wash hands or use hand sanitizer frequently
- Clean and disinfect frequently touched surfaces
- Stay at home and away from others (self-isolate) if any symptoms of COVID-19 develop

Steps Everyone Should Take To Prevent Disease And Protect Others

2. **Any child who has a fever should not go to school or child care.** If the fever goes away after taking fever-reducing medicine (for example, acetaminophen/Tylenol or ibuprofen/Motrin), the child still needs to stay home. In fact, the child should be kept home and away from others until the fever has been gone for at least 24 hours without the use of fever-reducing medicine. Other symptoms of illness (such as cough or runny nose) should also be improved before the child goes back to school or child care.
3. **Anyone who has had close contact with someone who has, or might have, COVID-19 needs to stay away from others.** Close contact means anyone who has been within 6 feet of the sick person for 15 minutes or longer or anyone who has had contact with the person's respiratory secretions from the mouth or nose. Typically, close contacts include all the people who live in the same house. It can take up to 14 days for a person who has been exposed to the virus that causes COVID-19 to start having any signs or symptoms of illness. Because of this, someone who has been in close contact with a person who has, or might have, COVID-19 **needs to stay away from others for 14 days after the date of last exposure**. Staying away from others because you have been exposed to the virus when you are not sick is called **'quarantine'.**

During quarantine, it is important to watch to see if symptoms develop. A person who is in quarantine and begins to get sick should be tested for COVID-19. If it turns out the person has COVID-19, determined by either a positive lab test or a diagnosis by a healthcare provider, then he or she needs to stay away from others for **10 days after the symptoms started**. When an ill person has to stay away from others, it is called **'isolation'**. Isolation lasts for 10 days because that is how long a person with COVID-19 might be able to spread it to others.

Anytime isolation is recommended for someone, based on a positive lab test for COVID-19 or based on a combination of symptoms plus close contact with someone with COVID-19, that person's close contacts need to stay home and be quarantined from others for 14 days after the date of last contact.

Steps For Parents and Guardians

Parents and guardians need to evaluate each child every day before sending the child out of the house by asking two questions:

1. Has the child had close contact with someone who has COVID-19 in the last 14 days? AND
2. Is the child sick?

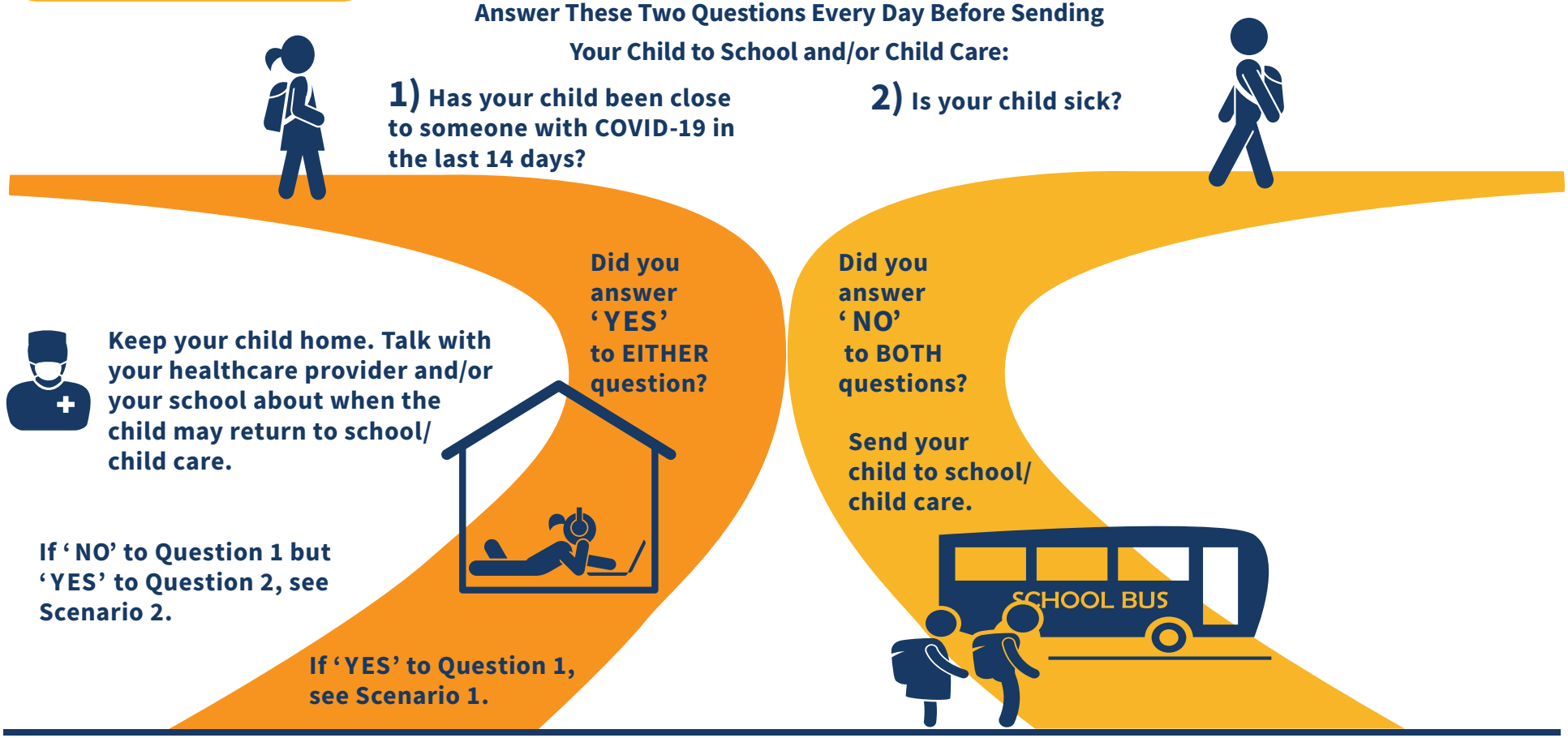
If the answer to both questions is 'No', then the child can go to school or child care or any other planned activities for the day. Remember that it is important for everyone to follow the prevention steps listed earlier (like wearing a mask and staying 6 feet away from other people) while outside of the house.

If the answer to either question is 'Yes', then the child should be kept at home. Next steps in assessing the child will depend on symptoms and/or possible exposure to the virus. These steps are described in the graphic as Scenario 1 and Scenario 2 in the section on 'Steps for School and Child Care Personnel.'

For Parents and Guardians

When Can I Send My Child to School and/or Child Care?

Answer These Two Questions Every Day Before Sending Your Child to School and/or Child Care:



Steps For Parents and Guardians, continued

If the child had close contact with someone with COVID-19, then the child must stay home in quarantine for 14 days after the date of last contact, whether or not the child is sick. (See the 'Definition of Terms' section for a reminder about what quarantine means.) More information about this is provided in Scenario 1.

The trickier part is what to do if a child is sick, especially because the symptoms of COVID-19 are the same as the symptoms of other illnesses, including the common cold, influenza (flu), and gastroenteritis (vomiting and diarrhea, or a 'stomach bug').

Parents and guardians know their child and are best equipped to recognize whether the child's symptoms are routine, or 'normal', on that day. For example, a child with allergies or asthma might have a cough or runny nose every day, even though they are not contagious. If the symptoms seem normal for the child and are not of any unusual concern, then the parents or guardians are encouraged to manage the symptoms the way they usually do. **This does not apply if the child has a fever.** A child with a fever should not go to school or child care. However, in the absence of fever, parents and guardians might choose to keep the child home for a day, take care of the child's symptoms, monitor for any change, and send the child back to school and/or child care when symptoms have improved. Consultation with the child's healthcare provider is encouraged. School and child care personnel need to be notified if the child will not be attending that day.

If the symptoms are new or different for that child, or concerning for parents and guardians, then the child should be kept at home and the school and/or child care facility notified that the child will be absent. Consultation with the child's healthcare provider is strongly encouraged. The healthcare provider will likely do the following:

1. assess the child's symptoms,
2. assess any exposures the child might have had to others with COVID-19 or to areas with higher rates of COVID-19,
3. make a decision about whether to test for COVID-19, and
4. give the parent or guardian recommendations about when the child may return to school and/or child care.

More information on how the healthcare provider will decide when the child can return to school and/or child care is in the section on 'Steps for Healthcare Providers to Take.' **A child who is tested for COVID-19 because of symptoms or close contact with someone with COVID-19 should be kept at home while waiting for the test results.**

Consulting with your child's healthcare provider is recommended if the child has symptoms of COVID-19 or close contact with a person who has COVID-19.

Steps For Parents and Guardians, continued

Parents and guardians who elect not to consult with a healthcare provider about new or unusual symptoms in their child will need to consider the risk of exposure to COVID-19 their child has had when making return to school/child care decisions. The three main scenarios are as follows:

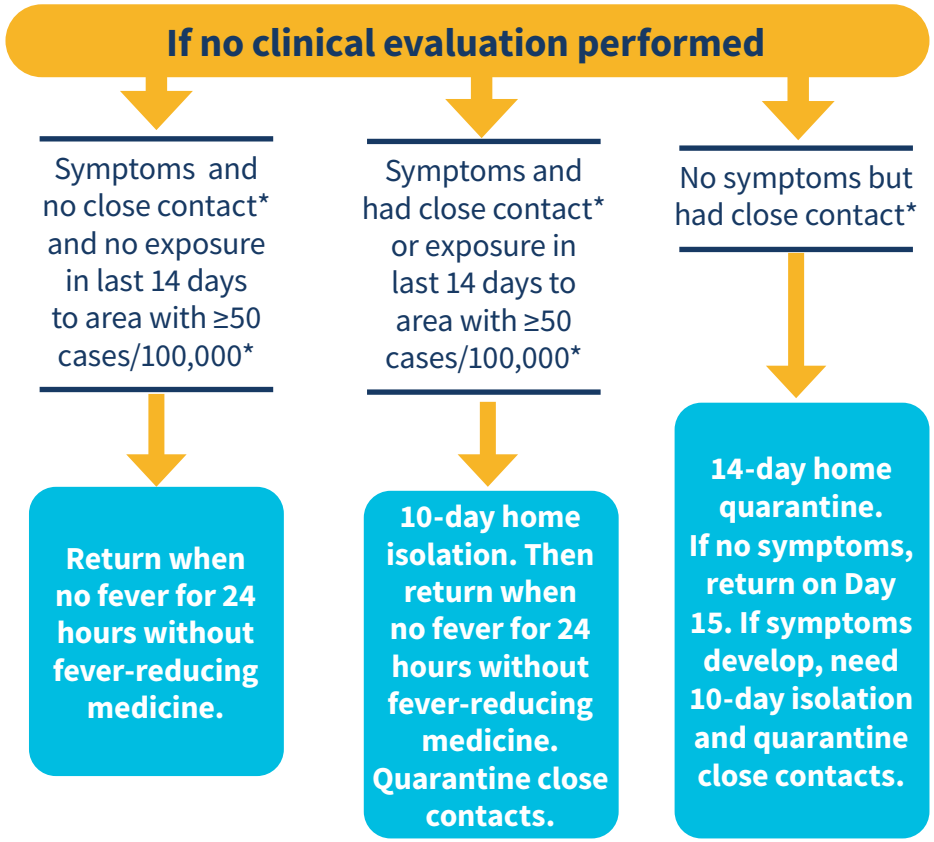
- **Anyone who has had close contact with someone with COVID-19 needs to stay in quarantine for 14 days after the date of last contact.** Even if the child is tested for COVID-19 and has a negative test, the child must still stay home for the full 14 days. This is because it can take up to 14 days after exposure to the virus that causes COVID-19 to become infected.
  - If no symptoms develop during the whole quarantine period, the child may return to school or child care on Day 15.
  - If symptoms develop, then the child needs to enter a 10-day period of isolation that starts on the day after symptoms start. After the 10-day isolation, the child may return to school or child care once symptoms have improved and the child has been fever-free for at least 24 hours without the use of fever-reducing medicine.
  - Household and other close contacts of children who develop symptoms while in quarantine need to stay in quarantine for 14 days and be monitored in this same way to see if symptoms develop.

- **Anyone who has symptoms AND, within the past 14 days, either 1) had close contact OR 2) had been in an area that has high rates of COVID-19, needs to stay in isolation for 10 days after the day symptoms began.** After the 10 days of isolation, a child may return to school and/or child care if at least 24 hours have passed since the last fever without the use of fever-reducing medicine and other symptoms have improved. How to find out if an area has a high rate of COVID-19 is discussed in the 'Definition of Terms' section.

- **Anyone with symptoms who 1) has not had any close contact with a person with COVID-19 and 2) has not been in an area with high rates of COVID-19 should stay at home and away from others until fever-free for at least 24 hours** without the use of fever-reducing medicine and other symptoms have improved.

Parents and guardians may find the information, scenarios, and graphics provided below in the section for School and Child Care Personnel helpful for better understanding these recommendations.

*See the 'Definition of Terms' section for the definition of close contact and to see how to find the disease rate in your area.



Steps For School and Child Care Personnel

Scenario 1

The steps described below for school and child care personnel to take follow one of two scenarios. The first scenario is for a child who has had close contact with someone with COVID-19, whether the child has symptoms of COVID-19 or not. The second scenario is for a child who has symptoms compatible with COVID-19 but no known close contact exposure. These scenarios could be helpful for parents to follow as well and are described and illustrated below.

Scenario 1: If school and/or child care personnel learn that a child in the facility has had **close contact** with someone who may have, or is known to have, COVID-19, then the child needs to be sent home and placed in quarantine for 14 days. Count the date of last close contact as Day 0.

- If the child has or develops symptoms of COVID-19 during that quarantine period, then consultation with a healthcare provider is needed. The provider will decide if testing for COVID-19 is needed and make recommendations for when the child may return to school/child care.
  - If COVID-19 is suspected by the healthcare provider, or confirmed with a lab test, the child must stay home (isolate) for 10 days from the day after the symptoms started and until at least 24 hours have passed since the last fever without fever-reducing medicines and other symptoms have improved.
  - Household and other close contacts of a child in isolation because of either a positive lab test for COVID-19 or a combination of symptoms and close contact with someone with COVID-19 should be in quarantine for 14 days after the date of last contact.

- If the child does not have any symptoms during the entire 14-day quarantine, then on Day 15, he or she may return to school/child care.
- A child who has a negative COVID-19 test during the 14-day quarantine must still remain at home for the entire 14 days.

Child Has Been Exposed to COVID-19

A negative test for COVID-19 does not change these recommendations.

The child has been close to someone with COVID-19 in the last 14 days

'Close to someone with COVID-19' means being within 6 feet of someone with COVID-19 for at least 15 minutes, or having direct contact with secretions.

The child must stay home.

If no symptoms throughout the entire 14-day quarantine: On Day 15 child may return to school/child care.

If child has symptoms: Contact healthcare provider. Isolate at home for 10 days after the day symptoms start. Quarantine close contacts.

If no symptoms at first but some develop: When symptoms start, consult healthcare provider, begin 10-day home isolation for sick child, and begin 14-day quarantine for close contacts.

Must have no fever for at least 24 hours without fever-reducing medicine and feel better before returning to class after 10-day isolation.

Scenario 2:
School and child care personnel need to be watchful for any child or staff member who develops symptoms of COVID-19 while at the facility. Anyone identified with symptoms needs to quickly be moved to an area where contact with others can be limited. This is important so that anyone who might have COVID-19 has less of a chance to expose others.

Because the symptoms of COVID-19 are the same as those of a number of other infectious and chronic conditions, it is challenging to assess symptoms that develop during the school day. Sometimes a teacher will be very familiar with a child's history of illness and will feel comfortable that the symptoms the child is having are consistent with that history and very normal for the child. If that is the case and the child does not have a fever or feel feverish, then the teacher can respond in a manner consistent with normal school policy. It might be that the child can continue with his or her normal activities.

If the child has a fever or feels feverish, or if the child develops symptoms that are unusual or not routine for that child, then the child should be moved to the area in the school that has been designated for isolation and evaluation of children that could potentially have COVID-19. Parents and/or guardians should be called and the child taken home.

Next steps in assessing the child will depend on symptoms and/or possible exposure to the virus. These steps are illustrated to the right as Scenario 2 and described more fully in the section on 'Steps for Healthcare Providers'.

While the child is at home for either isolation or quarantine, the parents and/or guardians should continue to update the school and/or child care facility about the status of the child's health and plans for returning to class.

Please note that if an outbreak occurs in a school or child care facility, more stringent recommendations for isolation or quarantine may be recommended by the local health department.

Child Has Not Been Exposed to COVID-19

Scenario 2

The child has NOT been close to someone with COVID-19 in the last 14 days, but the child is sick

- You already know why the child is sick, and it is not COVID-19
  - Fever → Stay home until fever is gone for 24 hours, without the use of fever-reducing medications.
  - No Fever → Child may return to school/child care as symptoms permit.
- The child has been tested or evaluated for COVID-19
  - Negative → Stay home until fever is gone for 24 hours, without the use of fever-reducing medications.
  - Positive test or diagnosis → Isolate at home for 10 days after symptom onset (or date of positive test) and 24 hours fever-free. Quarantine close contacts.
- You do not know why the child is sick, and the child has not been tested for COVID-19
  - Exposure in last 14 days to area with ≥50 cases/ 100,000 → Isolate at home for 10 days after symptom onset and 24 hours fever-free. Quarantine close contacts.
  - No exposure in last 14 days to area with ≥50 cases/ 100,000 → Stay home until fever is gone for 24 hours, without the use of fever-reducing medications.

Outbreaks may result in more stringent recommendations

Evaluation by a healthcare provider is strongly recommended for any child who is sick.

Steps For Healthcare Providers

The U.S. Centers for Disease Control and Prevention (CDC) released Information for Pediatric Healthcare Providers on August 19, 2020 (www.cdc.gov/coronavirus/2019-ncov/hcp/pediatric-hcp.html). The Virginia Department of Health (VDH) Algorithm for Evaluating a Child with COVID-19 Symptoms or Exposure is based on those guidelines and can be found here: www.vdh.virginia.gov/content/uploads/sites/182/2020/08/Evaluating-Symptoms-in-a-Child.pdf

The VDH algorithm is also included in the Appendix to this document. It is intended to serve as a tool to guide decision-making on when children may return to school and/or child care. As a guide, its goal is not to cover all potential scenarios but rather provide a framework that allows healthcare providers to apply their clinical judgment based on each child's symptoms and potential exposures.

The algorithm assumes that 1) a parent has called the healthcare provider about a child who either has symptoms suggestive of COVID-19 or potential exposure to COVID-19, or 2) a child has presented to a provider's clinic with symptoms suggestive of COVID-19. The first step in either scenario is to assess the child's potential exposures to COVID-19. The algorithm breaks into three exposure categories:

1. Within the past 14 days, no known close contact and no exposure to an area with ≥50 cases/100,000 population in the last 14 days;
2. Recent exposure (within the past 14 days) to an area with ≥50 cases/100,000 population in the last 14 days;
3. Close contact within the past 14 days with someone suspected or confirmed to have COVID-19.

Healthcare providers can access local rates of COVID-19 cases on the VDH website here: www.vdh.virginia.gov/coronavirus/key-measures/pandemic-metrics/school-metrics/

See the **Definition of Terms** section for screenshots that illustrate where to select the locality and where to locate the rate of new cases per 100,000 population for the last 14 days on that website.

1. **No known close contact and no exposure to an area with ≥50 cases/100,000 population for the last 14 days:** In the first group, symptomatic children with no known direct or area exposures in the past 14 days, consideration of alternate diagnoses is suggested. Testing and exclusion for COVID-19 may be considered based on level of clinical suspicion and availability of testing resources. If a clinician diagnoses another condition, does not suspect a diagnosis of COVID-19, and chooses not to test for COVID-19, then the return-to-school/child care recommendation would be that which is typically given for the diagnosed condition. For most infectious diseases, this recommendation is that the child may return to school and/or child care once symptoms have improved and the child has been fever-free for at least 24 hours without the use of fever-reducing medications.

Testing refers to PCR or antigen (Ag) testing for SARS-CoV-2. If an Ag test is negative and clinical suspicion of COVID-19 is high, confirmation with PCR is recommended, ideally within 2 days of the initial Ag test. If PCR testing is not available, clinical discretion can be used in determining whether to recommend isolation for the patient.

If testing for COVID-19 is pursued for patients in this first exposure category, then the return-to-school/child care recommendations would depend on test results, as described below.

2. **Recent exposure to an area with ≥50 cases/100,000 population for the last 14 days:** The second group is symptomatic children exposed within the past 14 days to an area with ≥50 cases/100,000 population for the last 14 days. For this group, testing for COVID-19 and home isolation pending test results is recommended. Clinicians who elect not to test or who are unable to procure a test for COVID-19 should make return-to-school/child care recommendations based on clinical judgement.

Steps For Healthcare Providers, continued

- Children in this exposure category who test negative, or are clinically determined to be negative, for COVID-19 may return to school and/or child care once symptoms have improved and the child has been fever-free for at least 24 hours without the use of fever-reducing medications.
- Children in this exposure category who test positive, or are clinically diagnosed, for COVID-19 need to home isolate for 10 days after the date symptoms started.
  - The child's close contacts need to be quarantined for 14 days after their last contact and monitored for the development of symptoms.
  - After the 10-day isolation, once the child has been fever-free for at least 24 hours without fever-reducing medicines and symptoms have improved, he or she may return to school and/or child care.

3. Close contact within the past 14 days with someone suspected or confirmed to have COVID-19:

- The third exposure category is children who have had close contact within the past 14 days with someone suspected or confirmed to have COVID-19. These children need to be separated from others and be monitored for symptoms suggestive of COVID-19. The specific recommendations for testing and separation depend on whether or not symptoms are present or develop.
- Asymptomatic children who have had close contact with a person suspected or confirmed to have COVID-19 should be placed in quarantine for 14 days after their last exposure to the person with COVID-19. In the absence of symptoms, the recommendations are to:
  - Test for COVID-19 approximately one week from last exposure
  - If the test is negative, on Day 15 they may be released from quarantine and return to usual activities as long as no symptoms developed during the quarantine period
  - If the test is positive, follow the recommendations below for symptomatic close contacts.
- Children who have had close contact with a person suspected or confirmed to have COVID-19 and have or develop symptoms of COVID-19 and/or test positive for COVID-19 need to home isolate for 10 days after the date symptoms started, or the date of the positive test if no symptoms were present.
  - Test for COVID-19 as soon as possible after symptoms start
  - The child's close contacts need to be quarantined for 14 days after their last contact and monitored for development of symptoms
  - After the 10-day isolation, once the child has been fever-free for at least 24 hours without the use of fever-reducing medicines and symptoms have improved, he or she may return to school and/or child care.

For Healthcare Providers

Clinical Evaluation for Children with COVID-19 Symptoms or Exposure

(www.cdc.gov/coronavirus/2019-ncov/hcp/pediatric-hcp.html)

In last 14 days, no known close contact** and no exposure to area with ≥50 cases/100,000 population***

Consider alternate diagnoses. Testing♦ and exclusion for COVID-19 may be considered based on level of clinical suspicion and testing availability.

Once symptoms have improved and child has no fever for at least 24 hours without fever-reducing medicine, allow return to school/child care.

In past 14 days, exposure to area with ≥50 cases/100,000 population ***

Test♦ (and/or evaluate clinically) for COVID-19. Isolate at home.

Negative for COVID-19

Close contact** in past 14 days with person with known or suspected COVID-19

Symptoms Present:
Test ♦ for COVID-19 immediately
Symptoms Not Present:
Test ~1 week after likely exposure
Isolate/quarantine at home.

Positive test or diagnosis for COVID-19

Home isolate for 10 days after symptom onset (or date of positive test). Quarantine close contacts.

After 10-day isolation, if no fever for at least 24 hours without fever-reducing medication and symptoms have improved, child may return to school and/or child care.

Negative for COVID-19 or not tested

Quarantine for 14 days after last exposure or isolate for 10 days after symptom onset.

If symptoms develop, consider retesting. Home isolate for 10 days after symptom onset. Quarantine close contacts.

If no symptoms develop, return to school and/or child care on Day 15.

♦Testing – PCR or antigen (Ag) testing is acceptable. If an Ag test is negative and clinical suspicion for COVID-19 is high, confirm with PCR, ideally within 2 days of the initial Ag test. If PCR testing is not available, clinical discretion can be used in whether to recommend the patient isolate.

****Close contact** means being within 6 feet of a person with COVID-19 for 15 minutes or more or having direct exposure to respiratory secretions.

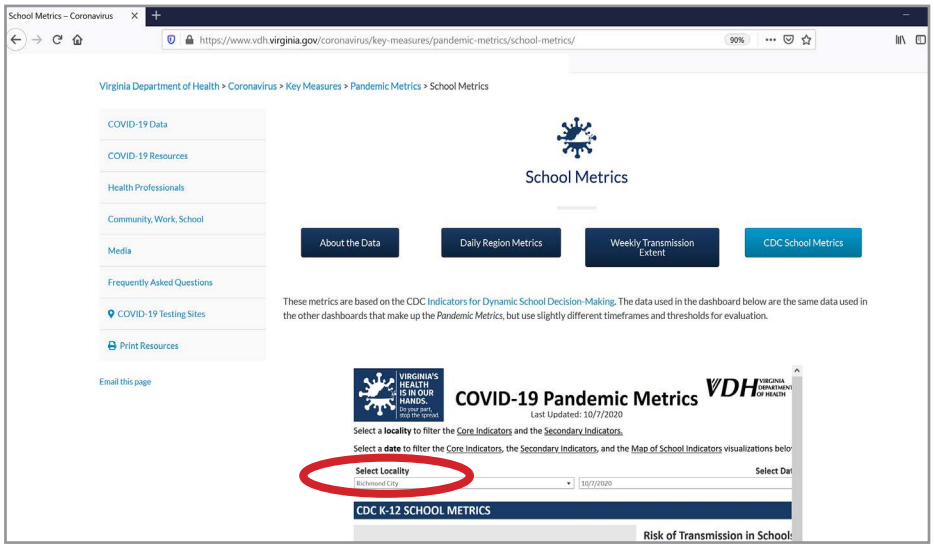
***** ≥50 cases per 100,000 population in the past 14 days.**
Click here for local information:
www.vdh.virginia.gov/coronavirus/key-measures/pandemic-metrics/school-metrics/

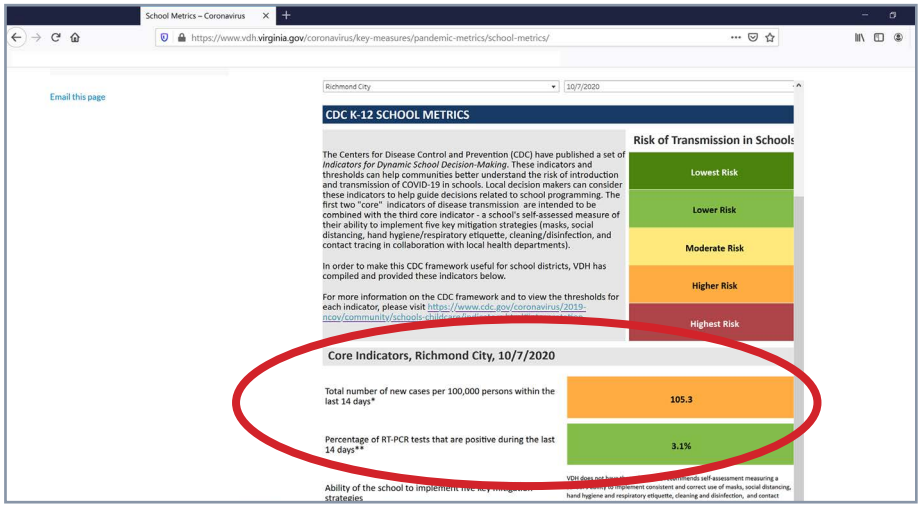
Conclusion

The purpose of this guidance is to help identify potential COVID-19 illnesses and exposures as quickly as possible and separate children who could be a source of the disease from others to limit the spread of COVID-19 in Virginia's communities. Unfortunately, with COVID-19, there are no guarantees. Some people will not know they have been exposed to COVID-19 and will never develop symptoms, but they can still spread COVID-19. Some people with symptoms will be kept at home when they actually have a disease other than COVID-19. Some people will be diagnosed with a disease other than COVID-19 and be allowed to come to school and/or child care, even though they actually have COVID-19. There is no clear way to get it right 100% of the time. However, VDH hopes this tool may help parents and guardians, school and child care personnel, and healthcare providers understand their roles and work together to minimize the impact of COVID-19 on Virginia's children as much as possible.

Definition of Terms

- **What does 'sick' or 'symptoms' include?**
  - **Symptoms** of COVID-19 include fever (≥100.4°F) or chills, fatigue (more tired than usual), headache, muscle aches, cough, nasal congestion or runny nose, new loss of taste or smell, sore throat, shortness of breath or difficulty breathing, abdominal pain, diarrhea, nausea or vomiting, new onset of poor appetite or poor feeding.
- **What does 'close contact' or 'close to someone with COVID-19' mean?**
  - **Close contact** or close to someone with COVID-19 means being within 6 feet of someone with COVID-19 for at least 15 minutes or having exposure to the person's respiratory secretions (for example, being coughed or sneezed on; sharing a drinking glass or utensils; kissing) while they were contagious. A person with COVID-19 is considered to be contagious starting from 2 days before they became sick (or 2 days before they tested positive if they never had symptoms) until they meet the criteria to discontinue isolation.
- **How do I check to see if I live or have been exposed to an area (or hot spot) with ≥50 cases/100,000 population for the last 14 days?**
  - Local areas can be identified by looking at the VDH website here: www.vdh.virginia.gov/coronavirus/key-measures/pandemic-metrics/school-metrics/ Select a city or county you have been in and then scroll down to see the Number of New Cases per 100,000 population within the last 14 days for that locality, as illustrated on the right.
  - Although rates are available from previous dates, it is acceptable to use the value that is listed on the page at the time of your assessment when you are considering if you have been exposed to the particular area.





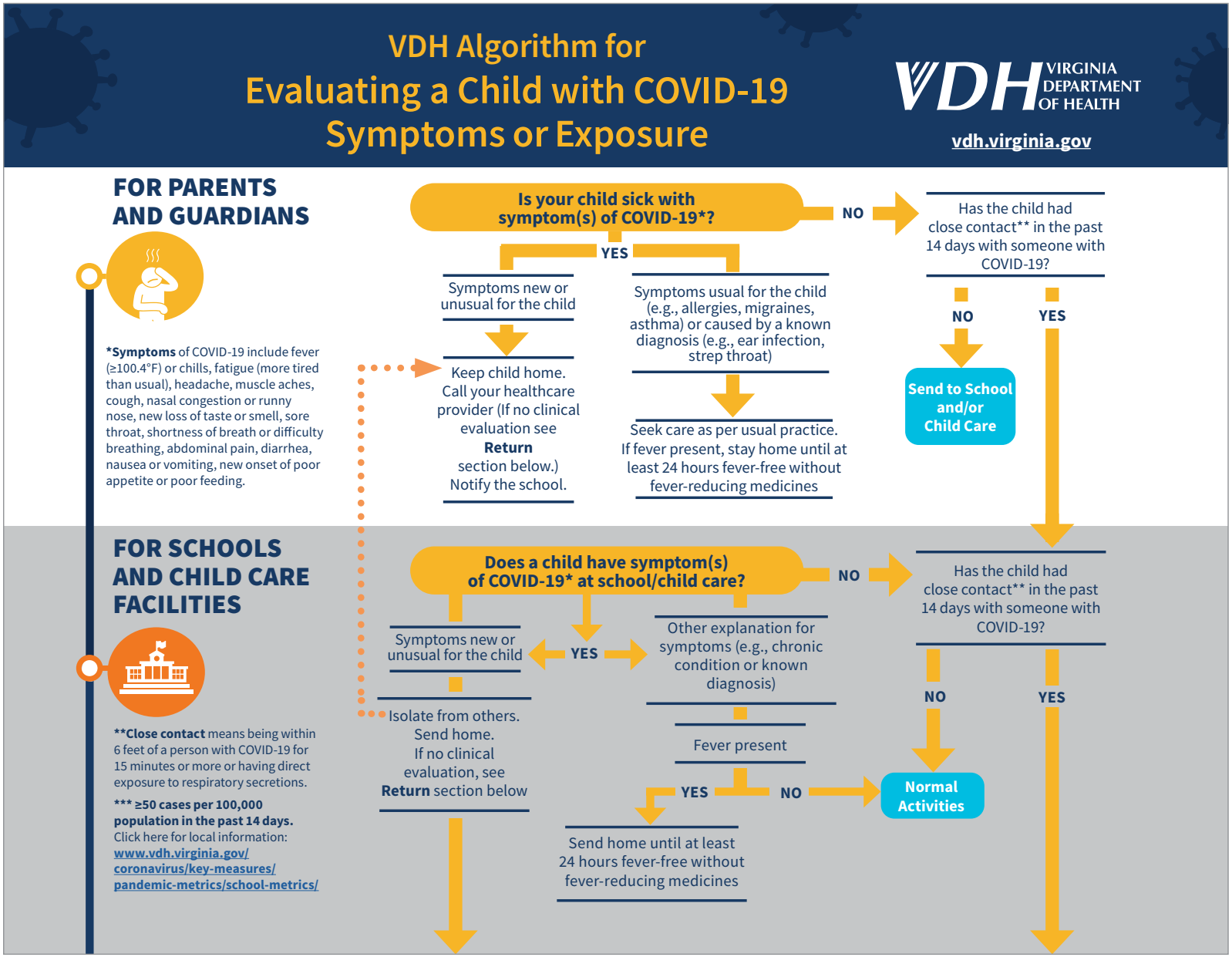
Definition Of Terms, continued

- **What is the difference between COVID-19 and SARS-CoV-2?**
  - COVID-19 is the name of the disease that is causing the pandemic. It stands for 'Coronavirus Disease 2019.' SARS-CoV-2 is the name of the virus that causes the disease. It stands for 'Severe Acute Respiratory Syndrome Coronavirus-2.'
- **What is the difference between quarantine and isolation?**
  - **Quarantine** is the separation of a person who has been exposed to an infectious disease from others even though the person does not have any signs or symptoms of the disease
  - **Isolation** is the separation of a person who is sick with an infectious disease from others
  - Both are ways to prevent the spread of disease
- **Why do you have to quarantine for 14 days and isolate for 10 days? Why are the time periods different?**
  - The time from when a person is exposed to the virus that causes COVID-19 to the time when symptoms first appear can be up to 14 days. So a person who has been exposed to someone with COVID-19 needs to stay in quarantine for 14 days to be sure no symptoms develop, even if the person has a negative test for COVID-19.
  - A person who has COVID-19 can potentially spread it to others for 10 days after symptoms begin. So a person with the disease needs to stay away from others (that is, be in isolation) for 10 days to be sure not to spread it to anyone else. Even after 10 days, a person cannot stop being in isolation until at least 24 hours have passed since the last fever, without using fever-reducing medicine, and other symptoms have improved.
- **What does 'suspected or confirmed to have COVID-19' mean?**
  - A person who has symptoms of COVID-19 or has been diagnosed by a healthcare provider but has not had a positive test for the disease is **'suspected'** to have COVID-19. A person who has tested positive for the disease by a valid laboratory test that is used to diagnose COVID-19 is **'confirmed'** to have it.
  - A person who tests positive for COVID-19, even if he or she does not have any symptoms, needs to take precautions to prevent the spread of the virus to others, including completing a 10-day isolation.

Appendix

VDH Algorithm for Evaluating a Child with COVID-19 Symptoms or Exposure (Ocotber 8, 2020)

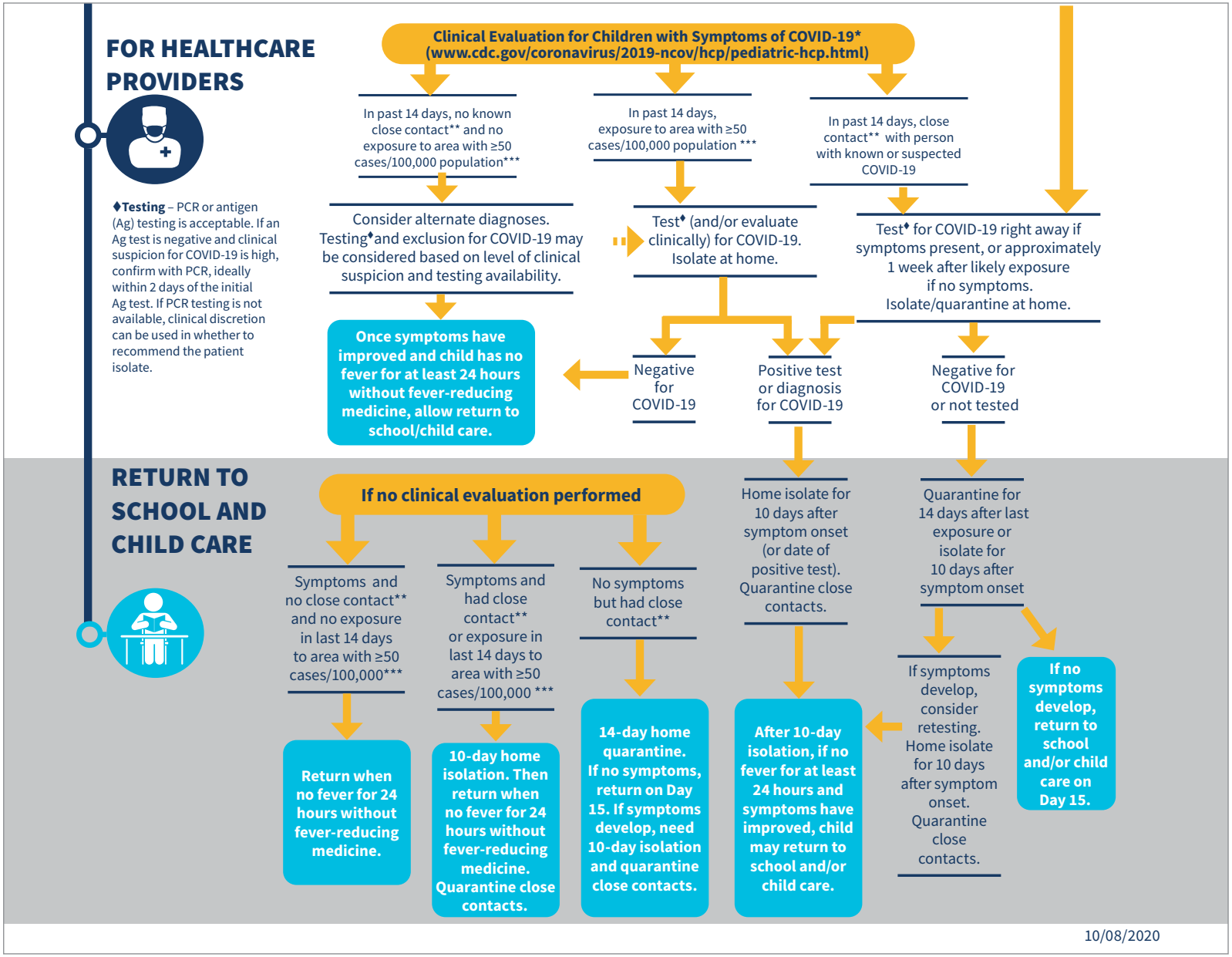
Top half



www.vdh.virginia.gov/content/uploads/sites/24/2020/08/Evaluating-Symptoms-in-a-Child.pdf

VDH Algorithm for Evaluating a Child with COVID-19 Symptoms or Exposure (Ocotber 8, 2020)

Bottom half



www.vdh.virginia.gov/content/uploads/sites/24/2020/08/Evaluating-Symptoms-in-a-Child.pdf

For Parents and Guardians

When Can I Send My Child to School and/or Child Care?

Answer These Two Questions Every Day Before Sending Your Child to School and/or Child Care:

1) Has your child been close to someone with COVID-19 in the last 14 days?

2) Is your child sick?

Did you answer "YES" to EITHER question?

Keep your child home. Talk with your healthcare provider and/or your school about when the child may return to school/ child care.

If "NO" to Question 1 but "YES" to Question 2, see Scenario 2.

If "YES" to Question 1, see Scenario 1.

Did you answer "NO" to BOTH questions?

Send your child to school/ child care.

www.vdh.virginia.gov/content/uploads/sites/24/2020/08/Evaluating-Symptoms-in-a-Child.pdf

Scenarios for Evaluating a Child Based on COVID-19 Exposure

Child Has Been Exposed to COVID-19

Scenario 1

A negative test for COVID-19 does not change these recommendations.

The child has been close to someone with COVID-19 in the last 14 days

‘Close to someone with COVID-19’ means being within 6 feet of someone with COVID-19 for at least 15 minutes, or having direct contact with secretions.

The child must stay home.

If no symptoms throughout the entire 14-day quarantine: On Day 15 child may return to school/child care.

If child has symptoms: Contact healthcare provider. Isolate at home for 10 days after the day symptoms start. Quarantine close contacts.

If no symptoms at first but some develop: When symptoms start, consult healthcare provider, begin 10-day home isolation for sick child, and begin 14-day quarantine for close contacts.

Must have no fever for at least 24 hours without fever-reducing medicine and feel better before returning to class after 10-day isolation.

Child Has Not Been Exposed to COVID-19

Scenario 2

The child has NOT been close to someone with COVID-19 in the last 14 days, but the child is sick

- You already know why the child is sick, and it is not COVID-19
  - Fever → Stay home until fever is gone for 24 hours, without the use of fever-reducing medications.
  - No Fever → Child may return to school/child care as symptoms permit.
- The child has been tested or evaluated for COVID-19
  - Negative → Stay home until fever is gone for 24 hours, without the use of fever-reducing medications.
  - Positive test or diagnosis → Isolate at home for 10 days after symptom onset (or date of positive test) and 24 hours fever-free. Quarantine close contacts.
- You do not know why the child is sick, and the child has not been tested for COVID-19
  - Exposure in last 14 days to area with ≥50 cases/ 100,000 → Isolate at home for 10 days after symptom onset and 24 hours fever-free. Quarantine close contacts.
  - No exposure in last 14 days to area with ≥50 cases/ 100,000 → Stay home until fever is gone for 24 hours, without the use of fever-reducing medications.

Outbreaks may result in more stringent recommendations

Evaluation by a healthcare provider is strongly recommended for any child who is sick.

For Healthcare Providers

Clinical Evaluation for Children with COVID-19 Symptoms or Exposure

(www.cdc.gov/coronavirus/2019-ncov/hcp/pediatric-hcp.html)

In last 14 days, no known close contact and no exposure to area with ≥50 cases/100,000 population*****

Consider alternate diagnoses. Testing♦ and exclusion for COVID-19 may be considered based on level of clinical suspicion and testing availability.

Once symptoms have improved and child has no fever for at least 24 hours without fever-reducing medicine, allow return to school/child care.

In past 14 days, exposure to area with ≥50 cases/100,000 population***

Test♦ (and/or evaluate clinically) for COVID-19. Isolate at home.

Negative for COVID-19

Close contact in past 14 days with person with known or suspected COVID-19**

Symptoms Present:
Test ♦ for COVID-19 immediately
Symptoms Not Present:
Test ~1 week after likely exposure
Isolate/quarantine at home.

Positive test or diagnosis for COVID-19

Home isolate for 10 days after symptom onset (or date of positive test). Quarantine close contacts.

After 10-day isolation, if no fever for at least 24 hours without fever-reducing medication and symptoms have improved, child may return to school and/or child care.

Negative for COVID-19 or not tested

Quarantine for 14 days after last exposure or isolate for 10 days after symptom onset.

If symptoms develop, consider retesting. Home isolate for 10 days after symptom onset. Quarantine close contacts.

If no symptoms develop, return to school and/or childcare on Day 15.

♦Testing – PCR or antigen (Ag) testing is acceptable. If an Ag test is negative and clinical suspicion for COVID-19 is high, confirm with PCR, ideally within 2 days of the initial Ag test. If PCR testing is not available, clinical discretion can be used in whether to recommend the patient isolate.

****Close contact** means being within 6 feet of a person with COVID-19 for 15 minutes or more or having direct exposure to respiratory secretions.

***** ≥50 cases per 100,000 population in the past 14 days.**
Click here for local information:
www.vdh.virginia.gov/coronavirus/key-measures/pandemic-metrics/school-metrics/