

Today's Date: \_\_\_\_\_

Dear Parent or Guardian,

Your child is being sent home today because they have exhibited 1 or more of the following symptoms while in school:

- Temperature 100.0 degrees Fahrenheit or higher
- Chills
- Cough (for students with chronic allergic/asthmatic cough, a change in their cough from baseline)
- Shortness of breath or difficulty breathing
- Sore throat
- New onset of severe headache
- Fatigue
- Muscle or body aches
- Headache
- New loss of taste or smell
- Nasal congestion or runny nose
- Nausea or vomiting
- Diarrhea
- Stomachache
- Poor appetite (new onset)
- Rash

In cases of mild symptoms, a negative COVID-19 **PCR** test will be required for your child to return to school.

In cases with more severe symptoms the nurse may require a medical practitioner's note to return to school.

**The decision to require the medical practitioner's note will be at the discretion of the school nurse.**

Your child is exhibiting mild symptoms of COVID-19 and may return to school if their PCR test is negative AND they have been fever free for 24 hours AND symptoms are improving.

Your child is exhibiting moderate to severe symptoms of COVID-19. Please contact your child's medical provider for an evaluation and possible COVID-19 test.

**I will contact you when the health office has received what is required for your child to return to school.**

Thank you,

\_\_\_\_\_  
School Nurse