

SHOULD I SEND MY CHILD TO SCHOOL?

Many parents are frequently concerned about when students should stay home or attend school. The following guidelines apply.

COVID-19 INFORMATION:

Centers For Disease Control (CDC) does not currently recommend universal symptom screenings (screening all students grades K-12) be conducted by schools. Given the wide range of symptoms and the fact that some people with SARS-CoV-2 infection (the virus that causes COVID-19) are asymptomatic, there are limitations to symptom screening conducted by schools for the identification of COVID-19

Parents or caregivers are asked to monitor their children for signs of infectious illness every day.

Students who are sick should not attend school in-person. People with COVID-19 have had a wide range of reported symptoms – ranging from mild symptoms to severe illness. Symptoms may appear 2-14 days after exposure to SARS-CoV-2. Symptoms can include:

- Fever 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 and children and youth with SARS-CoV-2 infection may experience any, all, or none of these symptoms. (See [Symptoms of Coronavirus](#) for more information.

Close Contact/Potential Exposure

Had close contact (within 6 feet of an infected person for at least 15 minutes) with a person with confirmed COVID-19: **OR** Had close contact (within 6 feet of an infected person for at least 15 minutes) with person under quarantine for possible exposure to SARS-CoV-2; OR

Traveled to or lived in an area where the local, Tribal, territorial, or state health department is reporting large numbers of COVID-19 cases as described in the [Community Mitigation Framework](#)

Live in areas of high community transmission (as described in the [Community Mitigation Framework](#)) while the school remains open

Some students may develop symptoms of infectious illness while at school.

- Students who develop any of the symptoms while at school should be placed in an isolation area separate from staff and other students:
 - School staff (e.g., workers, teacher aides, school health staff) who interact with a student who becomes ill while at school should use [Standard and Transmission-Based Precautions](#) when caring for sick people.
 - Students who are sick should go home or to a healthcare facility depending on how severe their symptoms are, and follow [CDC guidance for caring for oneself and others](#) who are sick.
- If a school needs to call an ambulance or bring a student to the hospital, they should first alert the healthcare staff that the student may have been exposed to someone with COVID-19.

After the student is placed in an isolation area, school staff who work in the isolation area should follow CDC's [Considerations for Cleaning and Disinfecting your Building or Facility](#).

Return-to-School Policies.

A negative test or doctor's note **should not** be required for return. Questions regarding return to school should be jointly decided in consultation with parents or caregivers, school personnel, and the student's healthcare provider.

Students who are excluded from school should be afforded the opportunity, as soon as feasible when they are well enough to participate in classwork, to make up any missed classwork without penalty in order to reduce mental or physical anxieties about missed academic opportunities.

OTHER ILLNESSES:

Fever – a fever of 100° or more signals an illness, the student should stay home for 24 hours after the temperature returns to normal **without** the aid of fever-reducing medicine.

Vomiting, diarrhea or severe nausea – sometimes called stomach flu or norovirus- if a student has vomited or had diarrhea, the student should stay home until **24 hours** after the last episode and a normal diet is tolerated the night before and the morning of school. A diagnosis of norovirus requires staying at home until asymptomatic for **48 hours**.

Contagious infectious diseases – diseases such as impetigo, whooping cough, and strep throat require a doctor’s examination and prescription for medication and doctor’s approval for return to school.

Rash – if a student has any rash that may be disease-related or you do not know the cause, check with your family physician before sending the student to school.

Coughing – a persistent cough is commonly an upper or lower respiratory infection and if the cough is ongoing, coincides with fever or loss of appetite, or causes breathing problems, the ill student should stay home.

Injuries – if a student has an injury that causes continuous discomfort, the student should not attend school until the condition is checked by a doctor or it improves. Injuries that interfere with class participation need a medical evaluation and if participation in physical education class is not recommended, a doctor’s excuse is required.

Head Lice – No child can attend school with live lice in their hair. If these are found, the child must go home. He/she can return when an approved treatment for lice has been completed.

MEDICATIONS:

Prescription Medications – Students requiring a prescription medication at school must have signed physician orders on file and a parent request form. These forms are available in the high school office. Medications are given by designated school personnel. Inhalers can be carried and used by the student if stated on the physician order. Prescription medicine must come in the most current pharmacy container with the pharmacy label. Instructions for giving medication must match the physician’s orders on file.

Over-the-counter medications - Must come in the original container with the student's name. The parent request to give medicine must state how much is to be

given, what time and what the medicine is for. Over-the-counter medications will be administered by designated school personnel if the parent/guardian request form is on file with the school.

IMMUNIZATIONS:

Immunizations - By state law, must be up-to-date **or** a waiver must be signed and they must be on file at school.

The Centers for Disease Control and Prevention (CDC) has been reporting a dramatic increase in cases of [acute flaccid myelitis](#) since August 2014. To date, the CDC has confirmed at least 386 cases of acute flaccid myelitis across the U.S. At least six of those cases have been reported in Minnesota since September. As of July 31, 2020, there have been 16 confirmed cases in 2020

Acute flaccid myelitis is a polio like condition that causes weakness in a person's arms or legs, most often occurring in children

Since the cause of acute flaccid myelitis is still not understood, it's difficult to know how to prevent it. The CDC recommends staying up to date on all vaccinations and avoiding mosquito bites.

"The CDC [also] has recommended the types of normal hygiene stuff that we all should practice," Dr. Mack says. "So washing hands, cleaning surfaces, trying to stay home when you're sick or ill so you don't spread infection. And right now, that's probably the biggest impact we can make on this."