

If your child exhibits any of the symptoms below (1 from Group A or 2 or more from Group B) they should stay home, and you should contact your medical provider regarding evaluation and/or potential testing for COVID-19.

Group A 1 or more symptoms	Group B 2 or more symptoms
<ul style="list-style-type: none"><input type="checkbox"/> Cough (new, uncontrolled cough that causes difficulty breathing, for student with chronic allergic/asthmatic cough, a change in their cough from baseline)<input type="checkbox"/> Shortness of breath<input type="checkbox"/> Difficulty breathing<input type="checkbox"/> New loss of taste or smell	<ul style="list-style-type: none"><input type="checkbox"/> FEVER (100.0° or higher)<input type="checkbox"/> Chills/shaking or exaggerated shivering<input type="checkbox"/> Muscle aches<input type="checkbox"/> Sore throat<input type="checkbox"/> Headache<input type="checkbox"/> Nausea or vomiting<input type="checkbox"/> Diarrhea<input type="checkbox"/> Fatigue<input type="checkbox"/> Runny nose/congestion