



Date _____

Dear _____,

As _____ is going home with possible COVID-19 symptoms, we would like to follow up on next steps. Per our COVID-19 infections protocol from the Archdiocese, students who are exhibiting symptoms must be evaluated by a physician and be tested for COVID-19. If a student tests positive for COVID-19 , they and their siblings must complete a 10 day isolation from the date of the onset of symptoms. They must also be fever-free for 24 hours, without fever-reducing medication, before returning to school.

If the student tests negative, they must be fever-free for 24 hrs with no fever-reducing medication and any other symptoms 75% improved. Students will also need a doctor's note documenting an alternative diagnosis or proof of a negative COVID-19 test result in order to return to school.

If you choose not to get your child tested, they will have to remain in self-quarantine for 10 days from symptom onset, and must be fever-free for 24 hours with no fever-reducing medication and other symptoms improved 75% before returning. Siblings must also self-quarantine for 14 days from contact with them.

Please let us know how you would like to proceed. We hope that _____ is feeling ok, and is in our thoughts.

Thank you,

St. Giles Office

Student name _____ Grade level/room number _____

Sibling name _____ Grade level/room number _____

Sibling name _____ Grade level/room number _____