

# **COVID-19 Screening Tool** for Families

Parents and guardians, use this checklist every day before sending your children to school.

If you answer "YES" to one or more questions, you must keep your child home from school today.

Does your child have any new, unusual, or worsening symptoms as listed in Box One and Box Two below?

## Box 1

- Fever? (100.4° F or greater)
- Cough?
- Shortness of breath?
- Difficulty breathing?
- · Loss of smell or taste?

Does your child have at least 1 of these symptoms?

☐ YES ☐ NO

## Box 2

- · Vomiting or diarrhea?
- Headache?
- Sore throat?
- Runny nose and/or congestion?
- Body aches and/or tiredness?

Does your child have at least 2 of these symptoms?

YES NO

If the answer to any of the questions above is "yes", keep your child home and consult your primary care physician. If a doctor determines that the symptoms are due to another diagnosis, or COVID-19 is ruled out, your child may return to school after being fever-free for 24 hours without the use of fever-reducing medications.

## YES NO

П п In the last 10 days, has your child been identified as a close contact of anyone who has had a positive COVID-19 diagnostic test?

If the answer to this questions is "yes", your child must stay home to quarantine for at least 10 days from the last exposure to the close contact unless symptoms appear (see section above regarding symptoms in Box 1 and Box 2.

Report any confirmed or suspected cases:

### In the City of Detroit:

**Detroit Health Department** 

Main Communicable Disease Line: (313) 876-4000

After Hours Call Center: (313) 876-4000

### **Outside the City of Detroit:**

**Wayne County Public Health Division** 

Main Communicable Disease Line: (734) 727-7078

After Hours Call Center: (734) 727-7284

Mary Roman: mroman@waynecounty.com • (734) 727-7150

Nnenna Wachuku: nwachuku@waynecounty.com • (734) 727-7253

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