VDH Algorithm for Evaluating a Child with COVID-19 Symptoms or Exposure

FOR PARENTS AND GUARDIANS

*Symptoms of COVID-19 include fever (≥100.4°F) or chills, fatigue (more tired than usual), headache, muscle aches, cough, nasal congestion or runny nose, new loss of taste or smell, sore throat, shortness of breath or difficulty breathing, abdominal pain, diarrhea, nausea or vomiting, new onset of poor appetite or poor feeding.

**Close contact means being within 6 feet of a person with COVID-19 for 15 minutes or more or having direct exposure to respiratory secretions.

*** ≥50 cases per 100,000 population in the past 14 days.

Click here for local information: www.vdh.virginia.gov/coronavirus/key-measures/pandemic-metrics/school-metrics/

FOR SCHOOLS AND CHILD CARE FACILITIES

*Symptoms usual for the child (e.g., allergies, migraines, asthma) or caused by a known diagnosis (e.g., ear infection, strep throat)

Other explanation for symptoms (e.g., chronic condition or known diagnosis)

Fever present

Send home until at least 24 hours fever-free without fever-reducing medicines

Normal activities

Send to school and/or child care

Has the child had close contact** in the past 14 days with someone with COVID-19?

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Keep child home. Call your healthcare provider (If no clinical evaluation see Return section below.)

Notify the school.

Does a child have symptom(s) of COVID-19* at school/child care?

Symptoms new or unusual for the child

Symptoms usual for the child (e.g., allergies, migraines, asthma) or caused by a known diagnosis (e.g., ear infection, strep throat)

Seek care as per usual practice. If fever present, stay home until at least 24 hours fever-free without fever-reducing medicines

Send home until at least 24 hours fever-free without fever-reducing medicines

Is your child sick with symptom(s) of COVID-19*?

NO

YES

Send home.

If no clinical evaluation, see Return section below.
Clinical Evaluation for Children with Symptoms of COVID-19*

- In past 14 days, no known close contact** and no exposure to area with ≥50 cases/100,000 population***
  - Consider alternate diagnoses. Testing* and exclusion for COVID-19 may be considered based on level of clinical suspicion and testing availability.
  - Once symptoms have improved and child has no fever for at least 24 hours without fever-reducing medicine, allow return to school/child care.

- In past 14 days, exposure to area with ≥50 cases/100,000 population***
  - Test* (and/or evaluate clinically) for COVID-19.
  - Isolate at home.
  - Negative for COVID-19

- In past 14 days, close contact** with person with known or suspected COVID-19
  - Test* for COVID-19 right away if symptoms present, or approximately 1 week after likely exposure if no symptoms.
  - Isolate/quarantine at home.
  - Negative for COVID-19

RETURN TO SCHOOL AND CHILD CARE

- If no clinical evaluation performed
  - Symptoms and no close contact** and no exposure in last 14 days to area with ≥50 cases/100,000***
    - Return when no fever for 24 hours without fever-reducing medicine.
  - Symptoms and had close contact** or exposure in last 14 days to area with ≥50 cases/100,000 ***
    - 14-day home quarantine. If no symptoms, return on Day 15. If symptoms develop, need 10-day isolation and quarantine close contacts.
  - No symptoms but had close contact**
    - Home isolate for 10 days after symptom onset (or date of positive test). Quarantine close contacts.
  - If symptoms develop
    - Consider retesting.
    - Home isolate for 10 days after symptom onset.
    - Quarantine close contacts.

- If symptoms develop, consider retesting. Home isolate for 10 days after symptom onset.
- If no symptoms develop, return to school and/or child care on Day 15.