

School/Child Care Screening Support Tool

This tool can be used by schools and child care centers to help determine what is a positive symptom and a “yes” answer on the [Ministry’s screening tool](#).

Not all symptoms require the COVID-19 protocol. For example, the protocol for a sprained ankle is to send the child home, ice, rest, and return to school the next day.

In the table below are some other possible considerations for symptoms. This screening tool **cannot diagnose** and if **in doubt, send the child home**. If parents have medical questions, they should consult a health care provider for an alternate diagnosis.

If you have questions related to COVID-19 testing and isolation guidelines, please call the **Provincial Testing and Isolation Information Line** at **1-888-777-0730**.

SYMPTOM	WHEN TO SEND STUDENT HOME	ADDITIONAL QUESTIONS OR CONSIDERATIONS	THINGS TO TRY WHEN UNSURE
FEVER AND/OR CHILLS	Temperature of 37.8 degrees Celsius/100 degrees Fahrenheit or higher: The manufacturer of the temperature device you use, such as an ear or forehead thermometer, provides information on how to use it. Be sure to read and follow the instructions to obtain an accurate temperature. The information may also include how the results of the device correlate with the results from other methods of taking a temperature.	<ul style="list-style-type: none"> • Is this child overdressed, did they just finish gym or recess? • Is it unusually hot outside or in the room? 	<ul style="list-style-type: none"> • Is the child at rest and comfortable (~20min) after returning from outside/activity before the temperature was reported? • Consider a second temperature to confirm.

<p>COUGH OR BARKING COUGH (CROUP)</p>	<p>Cough that is new or worsening (e.g., continuous, more than usual if chronic cough) including croup (barking cough, making a whistling noise when breathing)ⁱ</p> <ul style="list-style-type: none"> • Is this child’s chronic condition worsening?ⁱⁱ <ul style="list-style-type: none"> ◦ If <u>yes</u>, they should be sent home. 	<ul style="list-style-type: none"> • Does this child have a history of asthma or increased production of mucus? 	<ul style="list-style-type: none"> • Does the child have an inhaler?
<p>SHORTNESS OF BREATH</p>	<p>Out of breath, unable to breathe deeply:</p> <ul style="list-style-type: none"> • Can the child carry on a conversation? <ul style="list-style-type: none"> ◦ If <u>no</u>, they should be sent home. 	<ul style="list-style-type: none"> • Does this child have a history of asthma or other known breathing issues, especially after exertion? 	<ul style="list-style-type: none"> • Is the child at rest and comfortable after returning from outside/activity. • Does the child have an inhaler?
<p>DECREASE OR LOSS OF SENSE OF TASTE OR SMELL</p>	<ul style="list-style-type: none"> • Not related to other known causes or conditions they already have. • Is this child’s chronic condition worsening? <ul style="list-style-type: none"> ◦ If <u>yes</u>, they should be sent home. 	<ul style="list-style-type: none"> • Does this child have a history of seasonal allergies, neurological disorder, known nasal issues, etc.? 	
<p>NAUSEA, VOMITING, AND/OR DIARRHEA</p> <p>Diarrhea: Bowel movements that are less formed and more watery than usual.</p>	<ul style="list-style-type: none"> • Not related to other known causes or conditions they already have. • Is this child’s chronic condition worsening? <ul style="list-style-type: none"> ◦ If <u>yes</u>, they should be sent home. 	<ul style="list-style-type: none"> • Does this child have a history of irritable bowel syndrome? • Is there a history of anxiety or a recent stressful peer interaction, trouble at home, or other school/childcare-related stress? • Is this child experiencing menstrual cramps (if applicable)? • Does this child have gas or constipation? <ul style="list-style-type: none"> ◦ When was the child’s last bowel movement? ◦ Was the bowel movement healthy? A Guide to Healthy Bowel Movements (video) 	<ul style="list-style-type: none"> • Offer sips of water. • Allow the child to use the bathroom.

		<ul style="list-style-type: none">• Could the pain be related to something this child ate (food sensitivity)?• Has this child recently gotten off the bus (e.g., motion sickness)?• Could this child be hungry?<ul style="list-style-type: none">◦ When and what did they last eat?	
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ⁱ https://www.health.gov.on.ca/en/pro/programs/publichealth/coronavirus/docs/contact_mngmt/management_cases_contacts.pdf

ⁱⁱ Not related to other known causes or conditions for which current symptoms do not represent a flare-up/exacerbation related to infection (e.g., asthma)