COVID-19 Decision Tree for People in Schools, Youth, and Child Care Programs

Follow the appropriate path if a child, student, or staff person is experiencing the following symptoms consistent with COVID-19:

- **More common:** fever greater than or equal to 100.4° F, new onset and/or worsening cough, difficulty breathing, new loss of taste or smell.
- **Less common:** sore throat, nausea, vomiting, diarrhea, chills, muscle pain, excessive fatigue, new onset of severe headache, new onset of nasal congestion or runny nose.

For people with ONE "less common" symptom

Evaluate symptom and determine if person is well enough to remain in school or program.

- Well enough to attend or remain in school or program.
- Stay home or send home and consider evaluation from a health care provider and/or COVID-19 test.

Return to school or program 24 hours after symptom improved.

Siblings and household contacts do not need to stay home or quarantine.

For people with ONE "more common" symptom OR at least TWO "less common" symptoms

Person stays home or is sent home.

- Siblings and household contacts remain at home or are sent home.
- Does not seek evaluation and/or COVID-19 test from a health care provider.

Evaluation and/or COVID-19 test from a health care provider.

RECEIVES:
- Negative COVID-19 test result

OR
- Alternative diagnosis

Siblings and household contacts return to school or program.

RECEIVES:
- Positive COVID-19 test result

Siblings and household contacts stay home and quarantine from all activities for at least 14 days.

Stay at home in isolation for at least 10 days from time symptoms started until symptoms improved AND no fever for 24 hours (without fever reducing medications).

For people who are a close contact with someone who tested positive for COVID-19.

A close contact is a person who was within 6 feet for at least 15 minutes of someone who is infected. This includes anyone who lives in the same household.

Stay home from all activities for at least 14 days since the last contact with the positive case.

Even if the person receives a negative test result, they need to complete 14 days of quarantine before returning to school or program.

Get tested 5-7 days after last contact with the positive case.

- If symptoms develop and/or a positive test result is received.
- Siblings and household contacts DO NOT need to stay home or quarantine.

Stay at home in isolation for at least 10 days from time symptoms started until symptoms improved AND no fever for 24 hours (without fever reducing medications).

Siblings and household contacts stay home and quarantine from all activities for at least 14 days.

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Narrative for COVID-19 Decision Tree for People in Schools, Youth, and Child Care Programs

Introduction

This tool applies to children, students, or staff members who are experiencing symptoms consistent with COVID-19. Symptoms consistent with COVID-19 fall into two groups:

- **More common** symptoms are one or more of these: fever of 100.4℉ or higher, new onset and/or worsening cough, difficulty breathing, and new loss of taste or smell.
- **Less common** symptoms are two or more of these: sore throat, nausea, vomiting, diarrhea, chills, muscle pain, excessive fatigue, new onset of severe headache, and new onset of nasal congestion or runny nose.

Supporting people with COVID-19 symptoms

After identifying the COVID-19 symptoms, select one of two possible paths.

First path

1. The first path is for when the person is experiencing only one symptom from the list of **less common** symptoms.
2. Next, evaluate that symptom and determine if the person is well enough to stay in the school or program.
3. If yes, attend or remain in school or program.
4. If no, they should stay home or be sent home and consider an evaluation from a health care provider or COVID-19 testing.
5. If evaluated and/or tested, follow second path numbers 3 – 7.
6. If the person is sent home, they can return to the school or program 24 hours after the symptom has improved.
7. The person's siblings or household contacts do not need to stay home or quarantine.

Second path

1. The second path is for when the person is experiencing one **more common** symptom or at least two **less common** symptoms.
2. If yes, the person stays home or is sent home, and their siblings or household contacts stay home or are sent home.
3. The person with symptoms is either seen by a health care provider for an evaluation and COVID-19 test or they do not seek a medical evaluation.
4. If the person does not seek a medical evaluation, they must stay at home in isolation for at least 10 days from the time their symptoms started until symptoms are improved and no fever for 24 hours without fever reducing medications. Siblings and household contacts must stay home and quarantine from all activities for at least 14 days starting with the day they were last in contact with the person who is experiencing COVID-19 symptoms.
5. If the person receives an alternate diagnosis to explain the symptoms, they can then return to school or the program 24 hours after symptoms have improved or as directed by a health care provider. Siblings and household members do not need to stay home or quarantine any longer once the alternate diagnosis is known.
6. If the person tests negative for COVID-19, they can return to school or the program 24 hours after symptoms have improved. Siblings and household members do not need to stay home once the negative result is known.
7. If the person tests positive for COVID-19, they must stay at home in isolation for at least 10 days from the time the symptoms started until symptoms have improved and no fever for 24 hours without fever reducing medications. Siblings and household contacts must stay home and quarantine from all activities for at least 14 days starting with the day they were last in contact with the person who is experiencing COVID-19 symptoms.

Close contact path

1. The document also provides guidance for people who are a close contact with someone who tested positive for COVID-19. A close contact is a person who was within 6 feet for at least 15 minutes of someone who is infected. This includes anyone who lives in the same household.
2. If a person is a close contact, the person must quarantine and stay home from all activities for at least 14 days since the last day of contact with the positive case. Even if the close contact receives a negative test result, they need to complete 14 days of quarantine before returning to school or program. Close contacts should seek COVID-19 testing 5-7 days after last contact with the positive case. The siblings and household members of the close contact do not need to stay home or quarantine.
3. If a person who is a close contact develops symptoms and/or tests positive for COVID-19, the person must stay home in isolation for at least 10 days from the time their symptoms started until symptoms are improved and no fever for 24 hours without fever reducing medications. Siblings and household contacts also must stay home and quarantine from all activities for at least 14 days.

Additional details about this tool

This decision tree supports these guidance documents:

- 2020-2021 Planning Guide for Schools (PDF) (www.health.state.mn.us/diseases/coronavirus/schools/k12planguide.pdf).
- COVID-19 Prevention Guidance for Youth and Student Programs (PDF) (www.health.state.mn.us/diseases/coronavirus/schools/socialdistance.pdf).
- COVID-19 Prevention Guidance for Overnight Camps (PDF) (www.health.state.mn.us/diseases/coronavirus/schools/overnightcamp.pdf).

Symptoms

- The symptoms listed are those most often identified among people who test positive for COVID-19. **More common** symptoms are seen more frequently among people who are confirmed to have COVID-19 and may be the only symptoms a person develops. **Less common** symptoms have been identified and associated with people who are confirmed to have COVID-19, but are less specific to COVID-19. Less common symptoms may appear along or with another less common symptom.
- A fever of 100.4°F or higher is the threshold that needs to be met for a person to stay home or be sent home for COVID-19. A fever lower than 100.4°F, or a low-grade fever, may still require the child, student, or staff member to stay home or be sent home. Programs may follow pre-COVID-19 protocols for return for low-grade fevers. Schools and child care programs should follow their established policy or procedure or reference the Infectious Diseases in Childcare Settings and Schools Manual (https://www.hennepin.us/daycaremanual).
- New onset means that the symptom is not something that is experienced on a regular basis or is associated with a pre-existing condition. Pre-existing conditions are a sickness or physical disorder for which someone was treated, received medical advice, or had taken medication within 12 months before the onset of illness.
- MDH will continue to evaluate data related to COVID-19 symptoms and will update this document as needed.

Evaluation by a health care provider

- Evaluation by a health care provider is a recommendation, not a requirement. Medical evaluation and/or testing for COVID-19 may be considered for ANY of the symptoms listed, depending on suspicion of illness from a health care provider and availability of testing. When there are high levels of community transmission or multiple unlinked cases in the school or child care center, testing is strongly encouraged. Evaluation may include in-person, phone triage or telehealth, emergency department, clinic, and/or urgent care. An evaluation can help to identify the need for COVID-19 testing or if there is another reason/diagnosis to explain new symptoms.
- **For schools only:** When there are high levels of community transmission or multiple unlinked cases in the school, exclusion with evaluation and testing is strongly encouraged even if a person is experiencing only one less common symptom. For these purposes, high levels of community

transmission may be defined as greater than 10 cases per 10,000. Schools can use the Data for K-12 Schools: 14-day COVID-19 Case Rate by County (PDF) (www.health.state.mn.us/diseases/coronavirus/stats/wschool.pdf) and can consult with their Regional Team or local public health office to help guide this recommendation.

- Alternative diagnosis means an established medical diagnosis obtained through evaluation by a health care provider and/or diagnostic test (e.g., strep, influenza, Respiratory Syncytial Virus (RSV)). School districts, schools, child care programs, youth programs, etc., may require written documentation (e.g., after-visit summary, note) for a child, student or staff member to return to a school or a program.

COVID-19 testing

- Polymerase chain reaction (PCR) is a viral test that checks a sample from a person's respiratory system by swabbing inside the nose (nasopharyngeal) or throat (oropharyngeal) to determine if a person **currently** has an infection with SARS-CoV-2, the virus that causes COVID-19. Results can take several days.
- Antigen tests are immunoassays that detect the presence of a specific viral antigen, which implies current viral infection. Antigen tests are currently authorized to be performed on nasopharyngeal or nasal swab specimens placed directly into the assay's extraction buffer or reagent and results can be retuned in 15 minutes.

NOTE: Antibody tests check blood samples by looking for antibodies, which can show if a person had a **past** infection with the virus that causes COVID-19. They are not used to diagnose COVID-19.

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