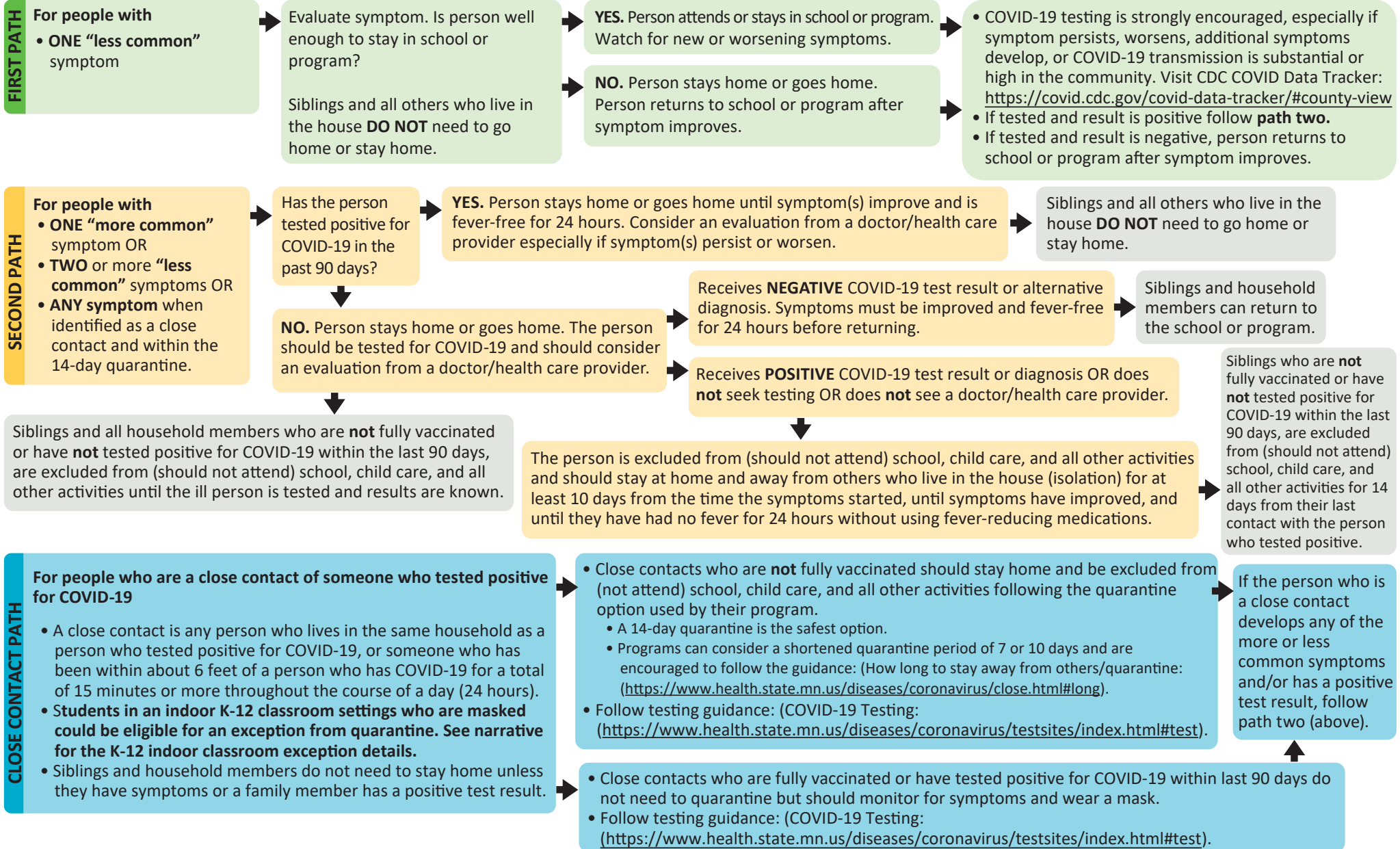


Recommended COVID-19 Decision Tree for People in Schools, Youth, and Child Care Programs

Follow the appropriate path if a child, student, or staff person is experiencing the following symptoms of illness regardless of vaccination status.

- **More common symptoms:** fever of 100.4 degrees Fahrenheit or higher; new cough or a cough that gets worse; difficulty/hard time breathing; new loss of taste or smell.
- **Less common symptoms:** sore throat; nausea; vomiting; diarrhea; chills; muscle pain; extreme fatigue/feeling very tired; new severe/very bad headache; new nasal congestion/stuffy or runny nose.



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

10/18/2021

Introduction

Schools, youth programs, and child care programs should follow the COVID-19 Decision Tree for all children, students, and staff members, who are experiencing symptoms of illness consistent with COVID-19, regardless of vaccination status.

COVID-19 symptoms fall into two groups:

- **More common** symptoms include one or more of these: fever of 100.4 degrees Fahrenheit or higher; new cough or a cough that gets worse; difficulty/hard time breathing; and new loss of taste or smell.
- **Less common** symptoms include two or more of these: sore throat; nausea; vomiting; diarrhea; chills; muscle pain; extreme fatigue/feeling very tired; new severe/very bad headache; and new nasal congestion/stuffy or runny nose.

Recommendations for people with COVID-19 symptoms

After identifying the COVID-19 symptoms, schools, child care and youth programs should follow path one or path two as appropriate for the symptoms identified.

First path

1. Use this first path when the person has only one symptom from the list of less common symptoms.
2. Next, evaluate the symptom. Is the person well enough to stay in school or in the program? Decide yes or no. **Siblings and all others who live in the house DO NOT need to go home or stay home.**
3. If yes, they are well enough, the person may attend or stay in the school or program. Watch for new or worsening symptoms.

NARRATIVE FOR THE RECOMMENDED COVID-19 DECISION TREE FOR PEOPLE IN SCHOOLS, YOUTH PROGRAMS, AND CHILD CARE PROGRAMS

4. If no, they are not well enough, the person should stay home or be sent home. The person can return to the school or program after the symptom improves.
5. With either a yes or no decision, COVID-19 testing is strongly encouraged, especially if the symptom persists, worsens, additional symptoms develop, or when COVID-19 transmission is substantial or high in the community. Visit [CDC Covid Data Tracker \(https://covid.cdc.gov/covid-data-tracker/#vaccinations-county-view\)](https://covid.cdc.gov/covid-data-tracker/#vaccinations-county-view).
 - a. If the person is tested and the result is positive, follow the second path.
 - b. If the person is tested and the result is negative, the person can return to school or program after symptom improves.

Second path

1. Use the second path when the person has one “more common” symptom, two or more “less common” symptoms, or any symptom when identified as a close contact and within the 14-day quarantine.
2. Next determine “has the person tested positive for COVID-19 in the past 90 days?”
3. If the person **DID test positive** for COVID-19 in the past 90 days, then the person stays home or goes home until the symptom(s) improve and is fever-free for 24 hours without fever-reducing medication. Consider an evaluation from a doctor/health care provider especially if symptom(s) persist or worsen.
 - a. Siblings and all others who live in the house DO NOT need to go home or stay home.
4. If the person **did NOT test positive** for COVID-19 in the past 90 days, the person stays home or goes home. The person should be tested for COVID-19 and should consider an evaluation from a doctor/health care provider.
 - a. Siblings and all household members, who are not fully vaccinated or have NOT tested positive for COVID-19 within the last 90 days, are excluded from (should not attend) school, child care, and all other activities until the ill person is tested and results are known.
 - b. If the person receives a **negative** COVID-19 test result or is told by their doctor or other health care provider that their symptoms are from something else (alternate diagnosis), and not from COVID-19, they can then go back to school or the program after their symptoms have improved and they are fever free for 24 hours without fever-reducing medication or as directed by their doctor or other health care provider.
5. Siblings and household members can return to the school, program, or other activities.
6. If the person receives a **positive** COVID-19 test result or diagnosis, or does **NOT** seek testing, or consult with a doctor/health care provider, then the person is excluded from (should not attend) school, child care, and all other activities. They should stay home and away from others who live in the house (isolation) for at least 10 days from the time the symptoms started until symptoms have improved, and until they have had no fever for 24 hours without fever-reducing medications.
7. Siblings who are **NOT** fully vaccinated or have **NOT** tested positive for COVID-19 within the last 90 days are excluded from (should not attend) school, child care, and all other activities for 14 days from their last contact with the positive person.

Close contact path

1. People who have close contact with someone who tests positive for COVID-19 should follow this path.
2. A close contact is ANY person who lives in the same household as a person who tested positive for COVID-19 OR someone who has been within 6 feet of a person who has COVID-19 for a total of 15 minutes or more throughout the course of a day (24 hours).
 - a. Quarantine exception: students in an indoor K-12 classroom who were within 3 to 6 feet of an infected student do not need to quarantine if both the infected student and the exposed student(s) correctly and consistently wore well-fitting masks the entire time. This exception does not apply to teachers, staff, or other adults in the indoor classroom setting.
 - b. For support in determining who may be eligible for this quarantine exception, review the [CDC: Steps for Determining Close Contact and Quarantine in K–12 Schools \(www.cdc.gov/coronavirus/2019-ncov/daily-life-coping/K-12-infographic.html\)](https://www.cdc.gov/coronavirus/2019-ncov/daily-life-coping/K-12-infographic.html).
3. Siblings and household members do not need to stay home unless they develop symptoms or a family member has a positive COVID-19 test result.
 - a. Close contacts who are **not** fully vaccinated should stay home and be excluded from (not attend) school, child care, and all other activities, following the quarantine options used by their program.
 - i. A 14-day quarantine is the safest option.
4. Programs can consider a shortened quarantine period of seven or 10 days and should follow MDH guidance: [How long to stay away from others/quarantine \(www.health.state.mn.us/diseases/coronavirus/close.html#long\)](https://www.health.state.mn.us/diseases/coronavirus/close.html#long).
 - a. Close contacts should get tested following testing guidance: [COVID-19 Testing \(www.health.state.mn.us/diseases/coronavirus/testsites/index.html\)](https://www.health.state.mn.us/diseases/coronavirus/testsites/index.html).
5. If the person who is a close contact develops any symptoms of COVID-19 and/or has a positive COVID-19 test result, follow the second path.
 - a. Close contacts who are fully vaccinated or who have tested positive for COVID-19 within the last 90 days **do not** need to quarantine but should monitor for symptoms and wear a mask.
 - b. Close contacts should get tested following testing guidance: [COVID-19 Testing \(www.health.state.mn.us/diseases/coronavirus/testsites/index.html\)](https://www.health.state.mn.us/diseases/coronavirus/testsites/index.html).
6. If the person who is a close contact develops any symptoms of COVID-19 and/or has a positive COVID-19 test result, follow the second path.

Additional resources

- [Close Contacts and Quarantine: COVID-19 \(www.health.state.mn.us/diseases/coronavirus/close.html\)](https://www.health.state.mn.us/diseases/coronavirus/close.html)
- [Quarantine Guidance for COVID-19 \(www.health.state.mn.us/diseases/coronavirus/quarguide.pdf\)](https://www.health.state.mn.us/diseases/coronavirus/quarguide.pdf)
- [CDC: When You've Been Fully Vaccinated \(www.cdc.gov/coronavirus/2019-ncov/vaccines/fully-vaccinated.html\)](https://www.cdc.gov/coronavirus/2019-ncov/vaccines/fully-vaccinated.html)

Additional details and recommendations about the decision tree

Symptoms

- The symptoms listed are those most often identified among people who test positive for COVID-19.
- More common symptoms are seen more often among people who are confirmed to have COVID-19. They may be the only symptoms a person gets.
- Less common symptoms are identified and associated with people who are confirmed to have COVID-19 but are less specific to COVID-19. Less common symptoms may appear alone or with other less common symptoms.
- A fever of 100.4 degrees Fahrenheit or higher (taken by mouth) marks the point at which a person should stay home or be sent home for COVID-19. Schools and programs may also consider sending a person home with a fever lower than 100.4 degrees Fahrenheit. For low-grade fevers, schools and child care programs should follow their established policy or procedure or reference the [Hennepin County: Infectious diseases in childcare settings and schools manual \(www.hennepin.us/daycaremanual\)](http://www.hennepin.us/daycaremanual).
- A “new” symptom is a symptom that is not something the person has on a regular basis or that 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 took medication within 12 months before the start of illness.
- The decision tree is recommended to evaluate symptoms (for each episode) for all children, including those known to have a chronic condition. Depending upon the specific symptom or symptoms, the school nurse or child care provider, along with input from the parent or guardian, should determine if a condition is new or worsening and consider a medical evaluation.
- Because COVID-19 symptoms and symptoms of many chronic conditions can overlap, people involved with the care of children should consider the possibility that symptoms could be COVID-19 infection rather than assuming it is just the chronic condition. Consider the level of virus transmission in the community, with a low threshold for recommending testing if the community levels are rising or high. Schools and programs should review and make decisions on a case-by-case, episode-by-episode basis.
- In general, “improved symptoms” means that a person no longer feels ill, they can keep up and do their daily routine just as they did before they were ill, and any remaining symptoms, such as a cough or runny nose, are very mild, intermittent, or infrequent and do not interfere with daily living.

Recommendations when considering evaluation by a health care provider

- Evaluation by a health care provider is a recommended action to help confirm a diagnosis of COVID-19, establish an alternate diagnosis, to determine the need for COVID-19 testing. 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.

NARRATIVE FOR THE RECOMMENDED COVID-19 DECISION TREE FOR PEOPLE IN SCHOOLS, YOUTH PROGRAMS, AND CHILD CARE PROGRAMS

- 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.
- When a health care provider finds that symptoms are from something other than COVID-19 (alternative diagnosis), it means an established medical diagnosis was 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, and youth programs are encouraged to follow their existing policies and procedures when choosing to ask for 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

If a child or staff member has COVID-19 symptoms and receives more than one type of test (antigen or molecular) to diagnose COVID-19, they should not attend school or child care until the results of all tests are known, even if the first test comes back negative and the person is feeling better. It generally is not recommended that people get tested again after getting a positive result.

For more information about the type of tests used to look for current infection with COVID-19, recommendations related to each type of testing, and where to find testing locations, use the resources below:

- [COVID-19 Testing \(www.health.state.mn.us/diseases/coronavirus/testsites/index.html\)](http://www.health.state.mn.us/diseases/coronavirus/testsites/index.html)
- [CDC: Nucleic Acid Amplification Tests \(NAATs\) \(www.cdc.gov/coronavirus/2019-ncov/lab/naats.html\)](http://www.cdc.gov/coronavirus/2019-ncov/lab/naats.html)
- [CDC: Interim Guidance for Antigen Testing for SARS-CoV2 \(www.cdc.gov/coronavirus/2019-ncov/lab/resources/antigen-tests-guidelines.html\)](http://www.cdc.gov/coronavirus/2019-ncov/lab/resources/antigen-tests-guidelines.html)
- [Find Testing Locations \(mn.gov/covid19/get-tested/testing-locations/index.jsp\)](http://mn.gov/covid19/get-tested/testing-locations/index.jsp)



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Contact health.communications@state.mn.us to request an alternate format.