



Daily Health Assessment Form – Parent – Child(ren)

Please complete, Sign, and Return a copy of this form ONCE to your school.

The following is an example of a daily health check to determine if you should attend school that day.

Daily Health Check			
1. Key Symptoms of Illness*	Do you have any of the following new key symptoms?	CIRCLE ONE	
	Fever	YES	NO
	Chills	YES	NO
	Cough or worsening of chronic cough	YES	NO
	Shortness of breath	YES	NO
	Loss of sense of smell or taste	YES	NO
	Diarrhea	YES	NO
	Nausea and vomiting	YES	NO
2. International Travel	Have you returned from travel outside Canada in the last 14 days?	YES	NO
3. Confirmed Contact	Are you a confirmed contact of a person confirmed to have COVID-19?	YES	NO

If you answered "YES" to one of the questions included under 'Key Symptoms of Illness' (excluding fever), you should stay home for 24 hours from when the symptom started. If the symptom improves, you may return to school when you feel well enough. If the symptom persists or worsens, seek a health assessment.

If you answered "YES" to two or more of the questions included under 'Symptoms of Illness' or you have a fever, seek a health assessment. A health assessment includes calling 8-1-1, or a primary care provider like a physician or nurse practitioner. If a health assessment is required, you should not return to school until COVID-19 has been excluded and your symptoms have improved.

When a COVID-19 test is recommended by the health assessment:

- If the COVID-19 test is **positive**, you should stay home until you are told by public health to end self-isolation. In most cases this is 10 days after the onset of symptoms. Public health will contact everyone with a positive test.
- If the COVID-19 test is **negative**, you can return to school once symptoms have improved and you feel well enough. Symptoms of common respiratory illnesses can persist for a week or more. Re-testing is not needed unless you develop a new illness.
- If a COVID-19 test is recommended but is not done because you choose not to have the test, or you do not seek a health assessment when recommended, and your symptoms are not related to a previously diagnosed health condition, you should stay home from school until 10 days after the onset of symptoms, and then you may return if you are feeling well enough.

If a COVID-19 test is not recommended by the health assessment, you can return to school when symptoms improve and you feel well enough. Testing may not be recommended if the assessment determines that the symptoms are due to another cause (i.e. not COVID-19).

If you answered "YES" to questions 2 or 3, use the [COVID-19 Self-Assessment Tool](#) to determine if you should seek testing for COVID-19.

A health-care provider note (i.e. a doctor's note) should not be required to confirm the health status of any individual.

Confirmation of Understanding

Please print, sign and return this form to the school on _____, _____ Day, _____ Date (MM/DD/YYYY)

Print Parent Name: _____ Parent Signature: _____

Student Name: _____ Grade _____