

# General Wellness Screening for Parents

Every morning before you send your child to school please check for signs of illness:



**FEVER 100.4\* OR CHILLS** \*or school board policy if threshold is lower



**COUGH\* OR SHORTNESS OF BREATH**  
\*especially new onset, uncontrolled cough



**DIARRHEA, NAUSEA OR VOMITING, ABDOMINAL PAIN**



**HEADACHE\***  
\*particularly new onset of severe headache, especially with fever



**SORE THROAT**

Does your child have any sign of illness above?

If yes, consider their history. For example, does the child have a chronic health condition (allergies, asthma) that can mimic a viral illness? When in doubt, keep your student home until symptoms improve.

- If you check any of the boxes, **DO NOT** send your student to school. Instead, please keep your student home until they meet the criteria to return to school.
- Follow your school policy for returning to school.