

Before you come to school each day, please address the following questions:

Household Daily Health Questionnaire

Contact	<p>Has anyone in your immediate household had close contact with or been exposed to a person that has a positive case of COVID-19?</p> <p>Has anyone in your immediate household had close contact with a person with possible COVID-19 symptoms?</p>	<p>If YES, stay home in self-quarantine and follow the CDC recommendations for COVID-19 exposure: https://www.cdc.gov/coronavirus/2019-ncov/php/public-health-recommendations.html</p> <p>If YES, consider self-quarantine.</p>
Symptoms	<p>Everyday, please check all members of your immediate household for the following symptoms:</p> <ol style="list-style-type: none"> 1. Fever over 100.4 Degrees 2. Chills 3. Shortness of breath 4. Difficulty breathing 5. Fatigue 6. Body or muscle aches 7. Headache 8. New loss of taste or smell 9. Sore Throat/ Cough 10. Congestion or runny nose 11. Nausea/ vomiting 12. Diarrhea 	<p>If any immediate member of your household has possible COVID-19 symptoms, including a fever of 100.4 degrees or higher, all SV students in the family must stay home and may not return to school until they have met the quarantine and fever-free CDC guidelines.</p> <p>In order to return to school, <i>all members</i> in the family must be fever and symptom-free (without medication) for 72 hours and should have remained home for 10 consecutive days from the onset of symptoms, unless otherwise cleared by a doctor (please provide a written doctor's note if returning before 10 days).</p> <p>*Students and staff members who are diagnosed with COVID-19 may return only after they have satisfied the CDC guidelines for discontinuation of isolation: https://www.cdc.gov/coronavirus/2019-ncov/hcp/disposition-in-home-patients.html</p>