

SFC Student Screening Tool

Review & Sign Daily Prior to Sending Your Child to School

Student Name:

Assigned Grade/Teacher:

Is the student taking any medication to treat or reduce a fever such as Ibuprofen (i.e. Advil, Motrin) or Acetaminophen (Tylenol)?

Is the student experiencing any of the following?

Group A 1 or more symptoms	Group B 2 or more symptoms
Cough Shortness of breath Difficulty breathing New olfactory disorder New taste disorder	Fever (measured or subjective) Chills Rigors Myalgia Headache Sore throat Nausea or vomiting Diarrhea Fatigue Congestion or runny nose

Stay home if, you or the student:

- Have **one or more** symptoms in Group A **OR**
- Have **two or more** symptoms in Group B **OR**
- Are taking fever reducing medication.

**Use your Kinsa thermometer to check your child's temperature before sending them to school daily. If you need a free Kinsa thermometer, contact the school.*

Parent/Guardian:
Please initial the calendar on today's date to indicate your child does NOT have any indications of symptoms or exposure in the above table.

FEBRUARY 2021						
SUN	MON	TUE	WED	THU	FRI	SAT
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28						