COVID-19

Pre-Screening Tool for School Attendance

Within the past 24 hours have you had a fever (100.4 and above*) or used any fever reducing medicine?

YES =

Do you feel sick with any of the most common symptoms?
(see symptom list to the right)

YES =

Have you been in close contact with a person who has COVID-19?

YES =

Have you traveled outside of the state in the past 14 days?

YES =

Contact Your School

Stay home with any YES response to the questions above OR with two or more of the "other" or "less common" symptoms listed to the right.

Attend school when all answers are NO. Call or see your school nurse or other designated person at school if you have questions.

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Most Common Symptoms of Covid 19:

Cough
Shortness of breath or difficulty breathing
Fever (100.4 or greater)*

Other Symptoms

Chills
Muscle pain
Sore throat
New loss of taste or smell

Less Common Symptoms:

Nausea or Vomiting
Stomach pain
Diarrhea
Fatigue
Headache
Rash
Swelling or redness of hands/feet
Red eyes/eye drainage
Congestion/ runny nose

**Fever is 100.4 regardless of measurement location (oral, temporal).*

Maine Department of Education