

BEAVERTON SCHOOL DISTRICT STUDENT RETURN TO SCHOOL FORM

Dear Parent/Guardian,

BSD COVID-19 protocol requires that any student exhibiting a primary symptom of COVID-19 must stay at home for 10 days after onset of symptoms or a positive test result. **Your child may return to school on _____.**

Primary Symptoms of COVID-19:

- Fever 100.4 or higher
- Cough
- Chills
- Shortness of breath, difficulty breathing
- New loss of taste or smell

Your child may return to school sooner than 10 days if you:

1. Provide the school with documentation of a NEGATIVE COVID-19 test as long as your child has not had close contact with someone with a confirmed or presumptive case of COVID-19. Child may return to school after 24 hours fever-free (without the use of medication) and all symptoms improving.

OR

2. Provide the school with documentation from a licensed, diagnosing health care provider (MD, DO, PA, NP) who determined that your child had another clear non-respiratory source of symptoms. Child may return to school after 24 hours fever-free (without the use of medication) and other symptoms improving.

*Note: A child should still be excluded from school for 10 days even if a non-COVID-19 respiratory test, such as a positive throat swab for rapid strep or a positive influenza test, is positive. Co-infection with COVID-19 was not ruled out

To find a COVID-19 testing location near you, please check the Washington County Public Health website:
<https://www.co.washington.or.us/HHS/CommunicableDiseases/COVID-19/testing-sites.cfm>

FOR HEALTH CARE PROVIDER USE ONLY

Patient name _____ Date of birth _____

Alternative diagnosis _____

Date of exam _____ COVID-19 test result if applicable _____

Name of health care provider _____

Signature of health care provider _____