



DEPARTMENT OF HEALTH  
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## Response to a Laboratory Confirmed Case of COVID-19 and Persons with COVID-19-like Illness in Schools

Updated January 7, 2021

**This guidance accompanies the “*Decision Aid: Exclusion and Return for Laboratory Confirmed COVID-19 Cases and Persons with COVID-19-like Illness in Schools, Child Care Programs, and Youth Camps.*”**

This guidance applies to persons with a laboratory **confirmed case of COVID-19, regardless of whether they have symptoms**, and persons with symptoms of COVID-19 including those with COVID-19-like illness and probable COVID-19. Exclusion, quarantine and return to school for persons with laboratory confirmed COVID-19, and persons with symptoms of COVID-19 is based on CDC and Maryland Department of Health/Maryland State Department of Education guidance and is to be implemented by schools and local school systems in collaboration with the local health department.

For the purposes of this guidance, **COVID-19-like illness** is defined as:

1. **Any 1** of the following: cough, shortness of breath, difficulty breathing, new loss of taste or smell, **OR**
2. **At least 2** of the following: fever of 100.4<sup>0</sup> or higher (measured or subjective), chills or shaking chills, muscle aches, headache, sore throat, nausea or vomiting, diarrhea, fatigue, and congestion or runny nose.

NOTE: A person with **COVID-19-like illness** is considered a **probable case** of COVID-19 if they had [close contact](#) with a person with COVID-19 in the past 14 days per [CDC guidance](#).

The guidance below is meant to supplement, where necessary, current communicable disease outbreak investigation processes, current school health services illness management processes, and current local health department COVID-19 response processes. The guidance below is designed to expedite notification, isolation, and quarantine of school staff and/or students, as indicated, when a person notifies the school they/their child has a laboratory confirmed case of COVID-19, regardless of whether the person has symptoms of COVID-19. The specific processes to implement this guidance within each school are to be developed and carried out as a collaboration between the school and the local health department, including the determination of length of quarantine based on MDH and local guidance.

## 1. Communication

- a. Schools should develop processes to inform staff and parents that they are expected to notify the school as soon as they are made aware that they/their child has tested positive for the virus that causes COVID-19 or that they/their child has had close contact with a person who is confirmed to have COVID-19;
- b. Schools should communicate to parents the expectation that ill students **MUST** be picked up within a specified period of time;
- c. The school should have a plan to ensure confidentiality regarding the process for parents to notify the school of a positive test result, illness or exposure to ensure confidentiality;
- d. Schools should have a plan to collaborate and coordinate with the local health department regarding school contact tracing procedures including determining the role of the school nurse, the school administrator, and the local health department; and
- e. Schools should develop communication templates for notification of close contacts of persons who are confirmed to have COVID-19 and for close contacts of persons with probable COVID-19.

## 2. Notification of contacts who must quarantine

- a. The local health department should lead the process of contact tracing;
- b. The school should work with the local health department to identify persons who may have had close contact with the person testing positive for COVID-19 or close contact with the person with probable COVID-19;
- c. Schools should provide written notification to all identified close contacts. The notification should make it clear that the contact should expect a call from health department contact tracers and also include the following information:
  - i. When to seek medical care
  - ii. How to monitor for symptoms
  - iii. Who to contact and how to contact them if they develop symptoms of COVID-19 while under quarantine
  - iv. The projected length of quarantine if they remain asymptomatic based on school or local school system implementation of MDH quarantine guidance
  - v. Plan for maintaining remote learning for those who remain well enough to engage in learning while under quarantine
  - vi. Information about local COVID-19 testing sites

## 3. Isolation, Exclusion, Quarantine, and Return to School

- a. If a student or school staff member develops symptoms of COVID-19 **during the school day**, the school should:
  - i. Safely isolate the person in the designated isolation area and place a surgical mask on the person if they are not wearing a cloth face covering as appropriate;

- ii. The school health services staff member should don the appropriate PPE and conduct the appropriate determination of the student's condition based on presenting symptoms;
  - iii. Begin the process for the person to vacate the school as soon as possible;
- b. When a school is informed of a laboratory confirmed case of COVID-19 in a student or school staff member, regardless of whether the person has symptoms, or learns of a student or school staff member with probable COVID-19, the school should begin the process for identifying close contacts and begin the notification process in collaboration with the local health department;
- c. The school should follow the "Decision Aid: Exclusion and Return for Laboratory Confirmed COVID-19 Cases and Persons with COVID-19-like Illness in Schools, Child Care Programs, and Youth Camps" (see attachment);
- d. The school should also follow the instructions from the local health department for all matters regarding exclusion, quarantine, and return to school for a person with a positive test for COVID-19 or who has symptoms of COVID-19 and those who have had close contact with a person with confirmed or probable COVID-19; and
- e. If the number of laboratory confirmed cases of COVID-19 meets the definition of an outbreak, the response decisions, including possible classroom or school closure and recommendations for COVID-19 testing of staff and students will be made by the local health department.

# Decision Aid: Exclusion and Return for Laboratory Confirmed COVID-19 Cases and Persons with COVID-19-like Illness in Schools, Child Care Programs, and Youth Camps

**For the purposes of this decision aid, COVID-19-like illness is defined as: Any 1 of the following: cough, shortness of breath, difficulty breathing, new loss of taste or smell, OR At least 2 of the following: fever of 100.4° or higher (measured or subjective), chills or shaking chills, muscle aches, sore throat, headache, nausea or vomiting, diarrhea, fatigue, and congestion or runny nose.**

Person (child, care provider, educator, other staff) with **1 new symptom not meeting the definition of COVID-19-like illness.**

Exclude person and allow return when symptoms have improved, no fever for at least **24 hours** without fever-reducing medication, **AND** criteria in the [Communicable Diseases Summary](#) have been met as applicable. **If person develops symptoms of COVID-19-like illness, follow processes below for person with COVID-19-like illness.**

An **asymptomatic person** (child, care provider, educator, other staff) who **tests positive for COVID-19 (confirmed case).**

The asymptomatic person (**confirmed case**) should stay home for 10 days from positive test.

**Close contacts** should stay home and quarantine according to MDH and local guidance.

**Person (child, care provider, educator, other staff) with COVID-19-like illness:**

- **Exclude** person and recommend that they talk to their health care provider about testing for COVID-19 or whether there is another specific diagnosis (e.g. influenza, strep throat, otitis) or a pre-existing condition that explains symptoms.
- The ill person should **isolate** pending test results or evaluation by their health care provider.

NOTE: Close contacts of the ill person **DO NOT** need to stay home and quarantine at this time unless the ill person is found to have had close contact with a person with COVID-19 (i.e. the ill person is a [probable case](#) of COVID-19).

The ill person has a positive rapid antigen test or RT-PCR for COVID-19 (**confirmed case**).

The ill person should stay home at least 10 days since symptoms first appeared **AND** until no fever for at least **24 hours** without fever-reducing medication **AND** improvement of other symptoms.

If the ill person is still suspected of having COVID-19, close contacts should stay home and quarantine according to MDH and local guidance.  
  
If COVID-19 is not suspected, close contacts **DO NOT need to stay home** as long as they remain asymptomatic.

The ill person has a negative rapid antigen test for COVID-19 without a confirmatory RT-PCR.

The ill person does not receive a test for COVID-19 or another specific diagnosis by their health care provider.

The ill person should stay home and quarantine and talk to their health care provider to determine if COVID-19 is still suspected and if another test is needed.

The ill person has a negative RT-PCR test for COVID-19 **AND** had close contact with a person with COVID-19.

The ill person has a negative RT-PCR test for COVID-19 and **NO** close contact with a person with COVID-19.

The ill person should stay home until symptoms have improved, no fever for at least **24 hours** without fever-reducing medication, **AND** criteria in the [Communicable Diseases Summary](#) have been met as applicable. If symptoms do not improve, the ill person should talk to their health care provider to determine if they should be tested/retested for COVID-19.

Health care provider documents that the ill person has another specific diagnosis **OR** that symptoms are related to a pre-existing condition **AND** the ill person had **NO** close contact with a person with COVID-19.

**Close contacts** of the ill person **DO NOT need to stay home** and quarantine as long as they remain asymptomatic.