



Dieringer School District Student COVID 19 Testing Consent Form

Purpose:

COVID-19 is spread primarily from person-to-person through respiratory droplets. To help prevent the spread of COVID-19, testing and isolation of infected people helps support the health and safety of the community. The purpose of this "Student COVID-19 Testing Consent Form" is for parents or legal guardians to consent to COVID-19 testing for their children.

Many schools, in coordination with local public health, have established robust Test to Stay programs as an alternative to at-home quarantine, in an effort to keep children in school and provide programs if they are not ill or positive for COVID-19. While contact tracing is no longer required, the Dieringer School District will continue existing testing programs to ensure uninterrupted, full-time, in-person learning. Considerations for engagement in Test to Stay protocols include, but are not limited to:

- Higher risk exposures (e.g., high-risk indoor sports, high aerosol-generating activities such as indoor cheer, singing, or playing brass or woodwind instruments), working out in a training room, or when evaluating ill individuals.
- Household exposures, which provide opportunities for prolonged and repeated exposures.
- Known exposure of an individual not up to date on COVID-19 vaccinations.
- Individuals who are at high risk for significant disease.
- During clusters and outbreaks to maintain in-person instruction.

Test to Stay Close Contact Conditions for students exposed to Covid:

Conditions for close contacts opting to follow the test to stay protocol are:

- Must not have any symptoms of COVID-19 - if symptoms develop, get tested with a Covid PCR or antigen test as soon as possible and notify the school of results. You must isolate for at least five days if COVID positive
- Must have valid COVID-19 testing/test to stay consent forms on file
- May be tested serially over a 10-day period, e.g., twice per week

Individuals completing a Test to Stay protocol are strongly recommended to monitor for symptoms and wear a well-fitting mask when around others. If an individual tests positive for Covid at any time, they must isolate at home and follow DOH isolation guidance.

Testing for Students Presenting with Covid-Like Symptoms at School

Testing may be available for students who develop Covid-like symptoms while at school. Testing depends on the availability of a trained staff member to facilitate the testing. Your student may still be required to go home until symptoms significantly improve per Department of Health guidelines.

Covid Positive Students Returning on Days 6-10:

A student who tests positive for Covid-19 is **required** to isolate at home, regardless of vaccination status. The isolation period is 10 full days from the start of symptoms or the date of positive test.

Students who test positive for Covid can return to school after 5 full days of isolation at home if:

- Their symptoms have significantly improved or they are asymptomatic, AND
- They are without a fever for the past 24 hours without use of fever-reducing medication.

AND IF returning to school on days 6-10, the individual is **required** to:

- Wear a well-fitting mask or face shield with a drape during days 6-10 (only for students with symptoms who did not get a first or second Covid test) **OR**
- Test negative with an antigen or at home test any day after day 5. Testing beyond day 10 is not necessary.
- Have a signed consent form on file to be tested at school on day 6, if school testing is desired

If the individual is not able to wear a well-fitted mask or face shield with a drape AND does not test negative, they are required to continue isolating through day 10 of their isolation period.

Authorizations:

- I authorize Dieringer School District to administer COVID-19 rapid antigen testing to my child.
- I authorize the Dieringer School District to conduct collection and testing for COVID-19 through a self-administered shallow nasal swab—less than one inch into the nostril—to screen for COVID-19.
- I authorize the Dieringer School District to share my child’s directory information and test results with the Washington State Department of Health and the Tacoma Pierce County Health Department as the law requires.

Acknowledgements:

I voluntarily agree for my child to be tested for COVID-19. I assume complete and full responsibility to take appropriate action with regard to my child’s test results. I acknowledge a positive test result is an indication my child must isolate at home and wear a mask or face covering as directed to avoid infecting others. I understand, as with any medical test, this COVID-19 test has the potential for false positive—test is positive but my child does not have the infection—or false negative—test is negative but my child has the infection—results. I agree to seek medical advice, care and treatment from my healthcare provider if I have questions or concerns, or if my child’s condition worsens. I understand the Dieringer School District is not acting as a healthcare provider, and this testing does not replace treatment by a healthcare provider.

I understand the test purpose, procedures, possible benefits and risks, and I can request a copy of this consent form. I can ask questions before I sign this consent form, and I understand I can ask additional questions at any time. I understand I can contact my child’s school at any time to end my child’s participation in the testing program.

All of the above must be met in order to have your child tested for Covid 19 at school. If you would like your student to participate please sign below.

Student’s name _____ Date of Birth _____

Parent or Guardian’s name _____

Parent or Guardian’s signature _____ Date _____