

COVID-19 At-Home Screening

SECTION 1: Symptoms

Any of the symptoms below could indicate a COVID-19 infection in children and may put your child at risk for spreading illness to others. Please note that this list does not include all possible symptoms and children with COVID-19 may experience any, all, or none of these symptoms. **Please check your child daily for these symptoms:**

Category A

- Chills
- Rigors (shivers)
- Myalgia (muscle aches)
- Headache
- Sore Throat
- Nausea or Vomiting
- Diarrhea
- Fatigue
- Congestion or runny nose

Category B

- Fever (100° or higher)
- Cough
- Shortness of Breath
- Difficulty Breathing
- New loss of smell
- New loss of taste

Students who are sick (e.g. fever, vomiting, diarrhea) **must not** attend school in-person. If **TWO OR MORE of the fields under Category A are checked off OR AT LEAST ONE field under Category B is checked off**, please keep your child home, notify their health care provider for additional guidance, and follow up with your school.

SECTION 2: Close Contact/Potential Exposure

Please verify if in the last 14 days:

- Your child has had close contact (within 6 feet of an infected person for at least 10 minutes) with a person with lab confirmed COVID-19
- Someone in your household is diagnosed with lab confirmed COVID-19
- Your child has traveled to [an area of high community transmission](#).

If **ANY of the fields in Section 2 are checked off**, your child must remain home for 14 days from the last date of exposure (if child is a close contact of a confirmed COVID-19 case) or date of return to New Jersey. Contact your child's provider or Camden County Department of Health for further guidance.