

**Mission:**

To protect, promote & improve the health of all people in Florida through integrated state, county & community efforts.



**Ron DeSantis**  
Governor

**Scott A. Rivkees, MD**  
State Surgeon General

**Vision:** To be the Healthiest State in the Nation

---

## What to do while waiting for COVID-19 Test Results

10/12/20

Dear Parent(s) or Legal Guardian(s):

We are all working together to help stop the spread of COVID-19. COVID-19 is caused by a virus that can spread easily from person to person. If you had your student tested for COVID-19, it can take several days for the test results to come back. The clinic or testing site that did your test will get the results to you. Until you hear back from your testing site continue to practice social distancing, good hygiene, and follow these guidelines while you are waiting for your test results.

If your child was a close contact to a person who has COVID-19:

- Stay home for 14 days after your last contact
- If the child tested negative, he or she will still need to stay home for 14 days
- Watch for fever (100.4°F), cough, shortness of breath, or other symptoms of COVID-19

If your child is sick or thinks he or she might have COVID-19 the child can be around others after:

- Ten days since symptoms first appeared or 20 days if the child has severe illness, **and**
- 24 hours with no fever without the use of fever-reducing medications **and**
- Other symptoms of COVID-19 are improving

If your child tested positive for COVID-19 but had no symptoms, isolation and other precautions can be discontinued

- 10 days after the date of their first positive test: Nasal or Throat Swab (RT-PCR) or Antigen test

If your child has no symptoms and is NOT a close contact to a person who has COVID-19:

- a. If the test is negative, the child may resume normal activities of daily living
- b. If the test is positive, the child stays home until:
  - Ten days since symptoms first appeared or 20 days if the child has severe illness, **and**
  - 24 hours with no fever without the use of fever-reducing medications **and**
  - Other symptoms of COVID-19 are improving

If your child's test is positive or identified as a close contact for COVID-19, a public health worker will call you to check on his or her health. Answer the phone call from the health department. If you have any questions, please call the Florida Department of Health in Miami-Dade County at 305-324-2400. More information about COVID-19 is available on the Centers for Disease Control and Prevention's website [www.cdc.gov/covid19](http://www.cdc.gov/covid19).

Sincerely,

Yesenia Villalta, DNP, MSN, APRN  
Administrator/Health Officer

Florida Department of Health in Miami-Dade County

Enclosure

---

**Florida Department of Health  
in Miami-Dade County**

8175 NW 12<sup>th</sup> Street, Suite 300 • Doral, Florida 33126  
PHONE: 305/324-2400 • FAX: 786/336-1297

**MiamiDade.FloridaHealth.gov**



**Accredited Health Department**  
Public Health Accreditation Board





# Parent/Guardian's At-Home Daily Student Health Screening



We are in the midst of a pandemic, and having your child stay home when they are ill, experiencing signs and symptoms of a communicable disease, and/or when they have come into close contact with a person who has tested positive for COVID-19, is critical to minimizing the spread of illness to others. In fact, it could make the difference between disease control and outbreak.

Prior to sending your child to school each morning, parents/guardians are being asked to conduct the At-Home Daily Student Health Screening to determine if it is safe for your child to attend school.

## SECTION 1 – COVID-19 EXPOSURE & SYMPTOMS

<input type="checkbox"/>	Has your child tested positive for COVID-19 in the last 14 days?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<input type="checkbox"/>	Has your child been in close contact (within 6 feet) with someone who has a confirmed positive or pending COVID-19 diagnosis in the past 14 day?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<input type="checkbox"/>	Has your child or anyone in your household been tested for COVID-19 (because they were experiencing symptoms, were in close contact with someone who had tested positive for COVID-19) and are awaiting results?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<input type="checkbox"/>	Is your child currently ill with COVID-19?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

## SECTION 2 – SIGNS OR SYMPTOMS – PAST 48 HOURS

Has your child experienced or is experiencing any of the following signs or symptoms listed below in the past 48 hours?

<input type="checkbox"/>	Fever (100.4°F or higher)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<input type="checkbox"/>	Cough ( <b>New</b> uncontrolled cough that causes difficulty breathing) (For students with chronic allergic/asthmatic cough, <b>a change in their cough different from their baseline.</b> )	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<input type="checkbox"/>	Shortness of Breath	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<input type="checkbox"/>	Fatigue	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<input type="checkbox"/>	Muscle or Body Aches	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<input type="checkbox"/>	Headache	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<input type="checkbox"/>	Loss of taste or smell	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<input type="checkbox"/>	Other: Rash, Red Eyes, Cracked/Swollen lips, Red Swollen Tongue, Swelling hands/ feet, stomach pain	<input type="checkbox"/> Yes	<input type="checkbox"/> No

## SECTION 3 – TEMPERATURE CHECK

<input type="checkbox"/>	What is your child's current temperature this morning?	
--------------------------	--	--

## SECTION 4 – NEXT STEPS – IF YOUR CHILD HAS ANY OF THE ABOVE-MENTIONED SYMPTOMS

<input type="checkbox"/>	If you answer “ <b>yes</b> ” to any of the above, or your child’s temperature is 100.4 °F (37.5°C) or higher, please <b>do not</b> send your child to school.	
<input type="checkbox"/>	You should contact your child’s health care provider immediately. <b>DON'T WAIT FOR SYMPTOMS TO WORSEN!</b>	
<input type="checkbox"/>	Having these symptoms alone does not mean that your child has a contagious disease or has the virus, but <b>ONLY</b> a health care provider can determine that.	
<input type="checkbox"/>	Notify the principal at your child’s school of their symptoms.	

## SECTION 5 – GUIDANCE FOR PARENTS/GUARDIANS

<input type="checkbox"/>	<b>Keep your child home if they are ill, and they should remain home for:</b>
<input type="checkbox"/>	At least three days (72 hours) have passed <i>since symptoms have resolved</i> ;
<input type="checkbox"/>	Free of fever <b>without</b> the use of fever-reducing medications;
<input type="checkbox"/>	Improvement in respiratory symptoms (e.g., cough, shortness of breath); <b>and/or</b> at least 10 days have passed <i>since symptoms first appeared</i> ;
<input type="checkbox"/>	Continue practice health hygiene, handwashing, face covering, maintaining appropriate distance/space.