Daily Health Family Screening

Parent Name (print clearly) __________________________
Child Name (print clearly) __________________________
Other Adult’s Name that is bringing child to class __________________________

If the adult or child’s temperature is at or above 100.4 F, will not participate in program and be sent home.

Family may return to class:
• He or she has no fever for at least three days without taking medication to reduce fever during that time AND
• Any respiratory symptoms (cough and shortness of breath) have improved: AND
• At least ten days have passed since symptoms began.

The person may return to the Cathedral if a doctor confirms the cause of the person’s fever or other symptoms is not COVID-19 and provides a written release.

IF THE PERSON’S BODY TEMPERATURE IS BELOW 100.4 F, YOU MUST ANSWER THE FOLLOWING SCREENING QUESTIONS:

Yes or No, in the last 72 hours, have you had any of the following? CIRCLE
1. A new fever of 100.4F or higher or a sense of having a fever? Yes No
2. A new cough that you cannot attribute to another health condition Yes No
3. New shortness of breath you cannot attribute to another health condition Yes No
4. A new sore throat that you cannot attribute to another health condition Yes No
5. New muscle aches that you cannot attribute to another health condition Yes No
6. In the last 14 days, have you had close contact with a person who was know to be COVID-19 positive at the time you had close contact with them? Yes No

Signature_________________________________________ Today’s Date___________________