Recommended COVID-19 Decision Tree for People in Schools, Youth, and Child Care Programs

Settings are encouraged to follow the appropriate path if a child, student, or staff person — regardless of vaccination status — is experiencing the following symptoms.

- More common: fever of 100.4 degrees Fahrenheit or higher; new cough or a cough that gets worse; difficulty/hard time breathing; new loss of taste or smell.
- Less common: sore throat; nausea; vomiting; diarrhea; chills; muscle pain; extreme fatigue/feeling very tired; new severe/very bad headache; new nasal congestion stuffy or runny nose.

For people with
- ONE “less common” symptom.
  - Evaluate symptom and determine if person is well enough to stay in school or program.
  - Siblings and all others who live in the house DO NOT need to go home or stay home.

For people with
- ONE “more common” symptom OR at least TWO “less common” symptoms OR ANY symptom (more or less common) during day 8-14 of a shortened quarantine.
  - Person should stay home or be sent home.
  - Evaluation from a doctor/health care provider and/or gets a COVID-19 test for symptom(s).

SECOND PATH

- Siblings and all others who are not fully vaccinated or have not had lab confirmed COVID-19 within last 90 days and who live in the house should stay home or be sent home.
- Does not seek evaluation from doctor/health care provider or get a COVID-19 test.
- Receives positive COVID-19 test result.
  - Siblings and all others who are not fully vaccinated or have not had lab confirmed COVID-19 within the last 90 days and who live with them should stay home and away from all activities for at least 14 days (quarantine). Day 1 of quarantine starts the day after their last day of contact (Day 0) with the person who has COVID-19 symptoms.

If the person tests positive for COVID-19 and has symptoms they should stay at home and away from others who live in the house (isolation) for at least 10 days from the time the symptoms started and until symptoms have improved and they have had no fever for 24 hours without using fever-reducing medications. If they have no symptoms but test positive, they should stay home for 10 days counting from the day they were tested.

For people who are a close contact of someone who tested positive for COVID-19.
- Close Contact should stay home from ALL ACTIVITIES during your quarantine period. Students and staff who are fully vaccinated or have had lab confirmed COVID-19 within last 90 days do not need to quarantine but should monitor for symptoms.

- A 14-day quarantine is the safest recommendation for people who have been exposed to COVID-19. MDH also provides suggestions for programs to consider a shortened quarantine period of 7 or 10 days. Schools, Youth Programs, and Child Care should determine when it is appropriate to use a shortened quarantine period and are encouraged to follow: How long to stay away from others (quarantine)
  - www.health.state.mn.us/diseases/coronavirus, close.html#long

If the person who is a close contact develops any of the more or less common symptoms and/or has a positive test result, follow second path for people with ANY symptom (more or less common) during quarantine.
Narrative for the Recommended COVID-19 Decision Tree for People in Schools, Youth Programs, and Child Care Programs

5/27/2021

Updated to reflect CDC guidance regarding quarantine for fully vaccinated people.

Introduction

Schools, youth programs, and child care programs are encouraged to follow the COVID-19 Decision Tree for all children, students, and staff members, regardless of vaccination status, who have symptoms consistent with COVID-19. These settings should follow First Path or Second Path if a child, student, or staff person, regardless of vaccination status, is experiencing the following symptoms consistent with COVID-19.

COVID-19 symptoms fall into two groups:

- **More common** symptoms are one or more of these: fever of 100.4 degrees Fahrenheit or higher; new cough or a cough that gets worse; difficulty/hard time breathing; and new loss of taste or smell.
- **Less common** symptoms are two or more of these: sore throat; nausea; vomiting; diarrhea; chills; muscle pain; extreme fatigue/feeling very tired; new severe/very bad headache; and new nasal congestion/stuffy or runny nose.

Recommendations for people with COVID-19 symptoms

*Note:* If a person has had lab-confirmed COVID-19 in the past 90-days and is experiencing symptoms consistent with COVID-19, retesting is not recommended. The person should remain home until symptoms have improved and they have been fever free for 24 hours. Siblings and other household members can continue to attend.
After identifying the COVID-19 symptoms, schools and programs are encouraged to choose one of two possible paths.

**Recommended first path**

1. Use this first path when the person has only one symptom from the list of less common symptoms.

2. Next, evaluate the symptom to decide if the person is well enough to stay in the school or program. **Siblings and all others who live in the house DO NOT need to go home or stay home.**

3. If they are well enough, the person may attend or stay in the school or program.

4. If they are not well enough, the person should stay home or be sent home.

5. If the person goes home and does not develop additional symptoms, schools and programs are encouraged to allow the person to return 24 hours after the symptom has improved. If the person goes home, they should consider an evaluation from a doctor or health care provider and getting a COVID-19 test.

6. If the person gets an evaluation and/or a COVID-19 test, they should follow the second path detailed below.

**Recommended second path**

1. Use the second path when the person has one more common symptom or at least two less common symptoms, when a person has any symptom while under quarantine, or when a person who started in the first path decides to get an evaluation from a doctor or other health care provider and/or get a COVID-19 test.

2. The person should stay home or be sent home, and their siblings and others who are not fully vaccinated or have not had lab confirmed COVID-19 within last 90 days, and who live with them should stay home or be sent home.

3. If the person does not get an evaluation from a doctor or another health care provider or get a COVID-19 test, they should stay at home away from others (isolation), including those who live in the house if possible, for at least 10 days starting from the time their symptoms started and until their symptoms have improved and they have no fever for 24 hours without using fever-reducing medications.

   a. **Siblings and all others who are not fully vaccinated or have not had lab confirmed COVID-19 within the last 90 days, and who live with them should stay home and away from all activities for at least 14 days (quarantine). Day 1 of quarantine starts the day after their last day of contact (Day 0) with the person who has COVID-19 symptoms.**

4. If the person is told by their doctor or other health care provider that their symptoms are from something else (alternate diagnosis), and not from COVID-19, they can then go back to school or the program 24 hours after their symptoms have improved or as directed by their doctor or other health care provider.

   a. If an alternate diagnosis is established, siblings and other people they live with do not need to stay home or to stay away from other activities and can return to school or program.
5. If the person tests negative for COVID-19, they can go back to school or the program 24 hours after their symptoms have improved. Siblings and other people they live with do not need to stay home or stay away from other activities and can return to school or program.

6. If the person tests positive for COVID-19 and has symptoms, they should stay at home and away from others who live in the house (isolation) for at least 10 days from the time the symptoms started and until symptoms have improved and they have had no fever for 24 hours without using fever-reducing medications. If they have no symptoms but test positive, they should stay home for 10 days counting from the day they were tested.
   a. Siblings and all others who are not fully vaccinated or have not had lab confirmed COVID-19 within last 90 days, and who live with them should stay home and stay away from all activities during the quarantine period, which starts with the day they last had contact with the person who has COVID-19 symptoms.

**Recommended close contact path**

1. People who have close contact with someone who tests positive for COVID-19 should follow this path. A close contact is ANY person who lives in the same household as a person who tested positive for COVID-19 OR someone who has been within 6 feet of a person who has COVID-19 for a total of 15 minutes or more throughout the course of a day (24 hours).

2. If a person is a close contact, the person should stay home from ALL ACTIVITIES for up to 14 days (quarantine). Day 1 of quarantine starts the day after their last day of contact (Day 0) with the person who has tested positive for COVID-19.
   a. Children and staff who are fully vaccinated may not need to quarantine and should follow guidance on About COVID-19 Vaccine: For fully vaccinated people (www.health.state.mn.us/diseases/coronavirus/vaccine/basics.html#recs).
   b. Children and staff who have had lab-confirmed COVID-19 may not need to quarantine and should follow Close Contacts and Tracing: COVID-19 (www.health.state.mn.us/diseases/coronavirus/close.html#not).

3. A 14-day quarantine is the safest recommendation for people who have been exposed to COVID-19. MDH also provides suggested situations for schools to consider a shortened quarantine period of 7 or 10 days. Schools, youth programs, and child care should determine when it is appropriate to use a shortened quarantine period and are encouraged to follow:

   - Who does not need to quarantine (www.health.state.mn.us/diseases/coronavirus/close.html#not)

   Siblings and all others who live with the person who is the close contact do not need to stay home or stay away from activities.
NARRATIVE FOR THE RECOMMENDED COVID-19 DECISION TREE FOR PEOPLE IN SCHOOLS, YOUTH PROGRAMS, AND CHILD CARE PROGRAMS

4. If the person who is a close contact develops any of the more or less common symptoms or has a positive test result, schools and programs are encouraged to follow the second path for people with ANY symptom (more or less common) during quarantine.

Additional details and recommendations about the decision tree

Symptoms

- The symptoms listed are those most often identified among people who test positive for COVID-19.
- **More common** symptoms are seen more often among people who are confirmed to have COVID-19. They may be the only symptoms a person gets.
- **Less common** symptoms are identified and associated with people who are confirmed to have COVID-19 but are less specific to COVID-19. Less common symptoms may appear alone or with other less common symptoms.
- A fever of 100.4 degrees Fahrenheit or higher (taken by mouth) marks the point at which a person should stay home or be sent home for COVID-19. Schools and programs may also consider sending a person home with a fever lower than 100.4 degrees Fahrenheit. For low-grade fevers, schools and child care programs should follow their established policy or procedure or reference the Infectious Diseases in Childcare Settings and Schools Manual (www.hennepin.us/daycaremanual).
- A “new” symptom is a symptom that is not something the person has on a regular basis or that is associated with a pre-existing condition. Pre-existing conditions are a sickness or physical disorder for which someone was treated, received medical advice, or took medication within 12 months before the start of illness.
- The decision tree is recommended to evaluate symptoms (for each episode) for all children, including those known to have a chronic condition. Depending upon the specific symptom or symptoms, the school nurse or child care provider, along with input from the parent or guardian, should determine if a condition is new or worsening and consider a medical evaluation.
- Because COVID-19 symptoms and symptoms of many chronic conditions can overlap, people involved with the care of children should consider the possibility that symptoms could be COVID-19 infection rather than assuming it is the just the chronic condition. Consider the level of virus transmission in the community, with a low threshold for recommending testing if the community levels are rising or high. Schools and programs should review and make decisions on a case-by-case, episode-by-episode basis.
- In general, “improved symptoms” means that a person no longer feels ill, they can keep up and do their daily routine just as they did before they were ill, and any remaining symptoms, such as a cough or runny nose, are very mild, intermittent, or infrequent and do not interfere with daily living.
Recommendations when considering evaluation by a health care provider

- Evaluation by a health care provider is a recommended action to help confirm a diagnosis of COVID-19, establish an alternate diagnosis, to determine the need for COVID-19 testing. Medical evaluation and/or testing for COVID-19 may be considered for ANY of the symptoms listed, depending on suspicion of illness from a health care provider and availability of testing. When there are high levels of community transmission or multiple unlinked cases in the school or child care center, testing is strongly encouraged. Evaluation may include in-person, phone triage or telehealth, emergency department, clinic, and/or urgent care.

- When a health care provider finds that symptoms are from something other than COVID-19 (alternative diagnosis), it means an established medical diagnosis was obtained through evaluation by a health care provider and/or diagnostic test (e.g., strep, influenza, respiratory syncytial virus (RSV)). School districts, schools, child care programs, and youth programs are encouraged to follow their existing policies and procedures when choosing to ask for written documentation (e.g., after-visit summary, note) for a child, student, or staff member to return to a school or a program.

Close contacts

- A close contact is ANY person who lives in the same household as a person who tested positive for COVID-19 OR someone who has been within about 6 feet of a person who has COVID-19 for a total of 15 minutes or more throughout the course of a day (24 hours). However, even shorter periods of time or longer distances can result in spread of the virus.

COVID-19 testing recommendations

If someone is asymptomatic (does not have symptoms of COVID-19) and is being tested for COVID-19, any children or staff members who live with them and who are not also being tested do not need to stay home or be excluded from school or child care. If someone is symptomatic (has symptoms of COVID-19) and is being tested, all children or staff members who are not fully vaccinated or have not had lab confirmed COVID-19 within last 90 days and live with that person are recommended to stay home and not attend school, child care, or youth programs until test results are known.

- If the person who has symptoms receives a negative test result, they can return 24 hours after their symptom/s have improved. All children or staff members who live with them can return to school or child care when the negative test is known.

- If the person who has symptoms receives a positive test result, they should stay at home and away from others (isolation) as much as possible until all three of these things are true:
  - They feel better (symptoms have improved), and;
  - It has been 10 days since they first felt sick (or since they were tested if no symptoms), and;
  - They have had no fever for at least 24 hours, without using medicine that lowers fevers.

- Everyone who lives with the person who has tested positive for COVID-19 should stay home for 14 days (quarantine), starting on the last day they were in close contact with the person who has COVID-19.
Types of COVID-19 testing and recommendations for each type

If a child or staff member has COVID-19 symptoms and receives more than one type of test (Antigen or Molecular) to diagnose COVID-19, they should not attend school or child care until the results of all tests are known, even if the first test comes back negative and the person is feeling better. MDH does not recommend that people get tested again after getting a positive result.

Molecular tests (such as PCR tests)

- Polymerase chain reaction (PCR) is a test that detects genetic material of the SARS-CoV-2 virus that causes COVID-19. A swab is used to collect fluid from someone’s nose or throat, or someone spits to collect saliva. The test tells if someone is infected right now. Results can take several days. This test is used to diagnose COVID-19 infection and it is considered quite accurate. This type of test is recommended when using the shortened 7-day quarantine option.

Antigen

- Antigen tests detect certain proteins in the virus. They are often called rapid tests, though some PCR tests are also rapid tests. A swab is used to collect a fluid sample from the nose or throat. Results can be returned in 15 minutes. This test is used to diagnose whether someone has COVID-19 right now. This test is not recommended when using the shortened 7-day quarantine option.

NOTE: Antibody tests look at blood samples for proteins that your body makes when fighting COVID-19. These tests tell you if you may have had COVID-19 in the past; they do not tell you if you have it now. They are not used to diagnose COVID-19 and are not recommended to be used to shorten a quarantine period or be used to return to school, child care, or a youth program. The presence of antibodies does not indicate a person is protected from getting COVID-19 in the future.

Resources

- To find out more about testing options, visit COVID-19 Testing (www.health.state.mn.us/diseases/coronavirus/testsites/index.html).
- To learn more about testing locations, visit Find Testing Locations (https://mn.gov/covid19/get-tested/testing-locations/index.jsp).