

# CUYAHOGA COUNTY

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# BOARD OF HEALTH

YOUR TRUSTED SOURCE FOR PUBLIC HEALTH INFORMATION

## **School Health Screening**

In an effort to keep others from getting sick, everyone who enters this school will be asked about their current health status.

### **Have you or anyone in your household had any of these symptoms over the past 7 days?**

- Body aches/muscle pain
- Chills
- Cough
- Diarrhea
- Fatigue
- Fever of 100.4° F or higher
- Headache (severe)
- Jaundice (yellowing of eyes or skin)
- New loss of taste or smell
- Shortness of breath/difficulty breathing
- Sore throat
- Vomiting
- Wounds or lesions

### **Have you or anyone in your household been tested for COVID-19 due to symptoms or illness?**

If you answered “yes” to either of these questions, you must leave now and contact your doctor to determine if you have an illness that can be transmitted to others. Based on your doctor’s advice, you may need to be tested for COVID-19 or other communicable diseases.

If you are confirmed as having a communicable disease, you will be excluded or restricted from school/work as required. You will be contacted by your local health department who will give you additional instructions.

Also, if you are caring for or living with someone who has these symptoms or who has a confirmed communicable disease, you need to check with your doctor before returning to school/work.

Your cooperation will keep all of us safe—thank you!