## School Symptom Screening Tool

Complete Daily Prior to School

Employee or Student Name:

Assigned Class/Group:

Temperature:

Is the student taking any medication to treat or reduce a fever such as Ibuprofen (i.e. Advil, Motrin) or Acetaminophen (Tylenol)?

Is the student experiencing any of the following?

Group A	Group B
1 or more symptoms	2 or more symptoms
Fever (100.4 or higher)	Sore throat
Cough	Runny nose/congestion
Shortness of breath	Chills
Difficulty breathing	New lack of smell or taste
	Muscle pain
	Nausea or Vomiting
	Headache
	Diarrhea

## The student should stay home if they:

- Have one or more symptoms in Group A OR
- Have two or more symptoms in Group B **OR**
- Are taking fever reducing medication.