This document is in the process of being updated to align with Public Health's new Isolation and Quarantine Guidelines from March 13<sup>th</sup>.

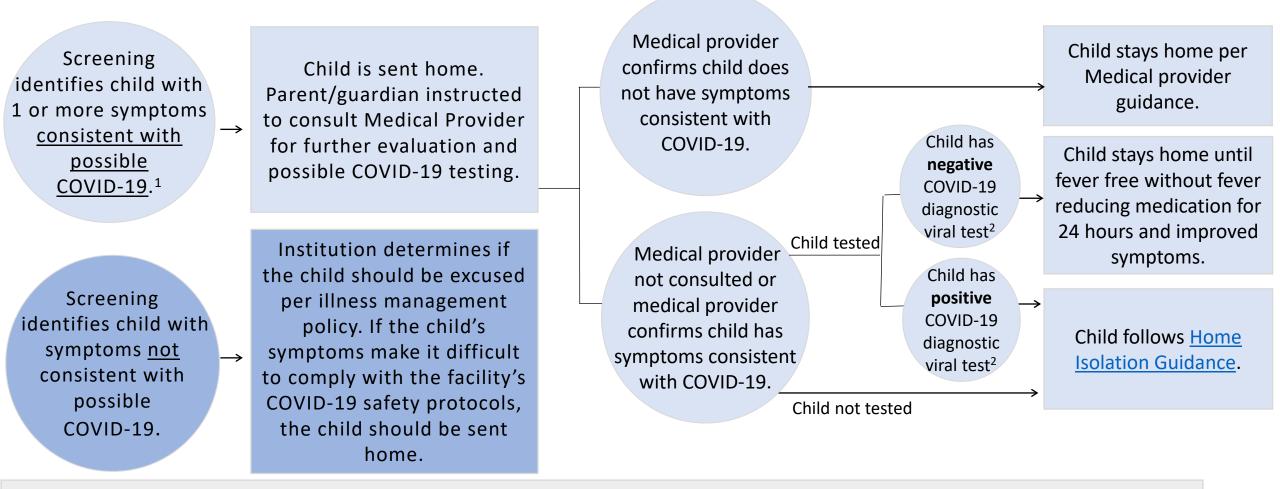
# Decision Pathways for Symptoms in Early Care and Education Centers and TK-12 Schools

Los Angeles County Department of Public Health Updated: <mark>8/15/2022</mark>

## **Decision Pathway for Children with Symptoms**

### Decision Pathways for Children with Symptoms Prior to Entry<sup>1</sup> into an Educational Institution, regardless of vaccination status

<sup>1</sup>If child becomes unwell at the facility, place child in an isolation area (physically distant from attendant, ideally outdoors) and follow decision pathways described below.



<sup>1</sup>Symptoms consistent with possible COVID-19 infection in children include: fever  $\ge 100.4^{\circ}$ F; <u>new</u> cough (different from baseline); vomiting or any new onset diarrhea. If the child's symptoms are not consistent with possible COVID-19 but there is still concern, evaluation of the child by a medical provider is recommended.

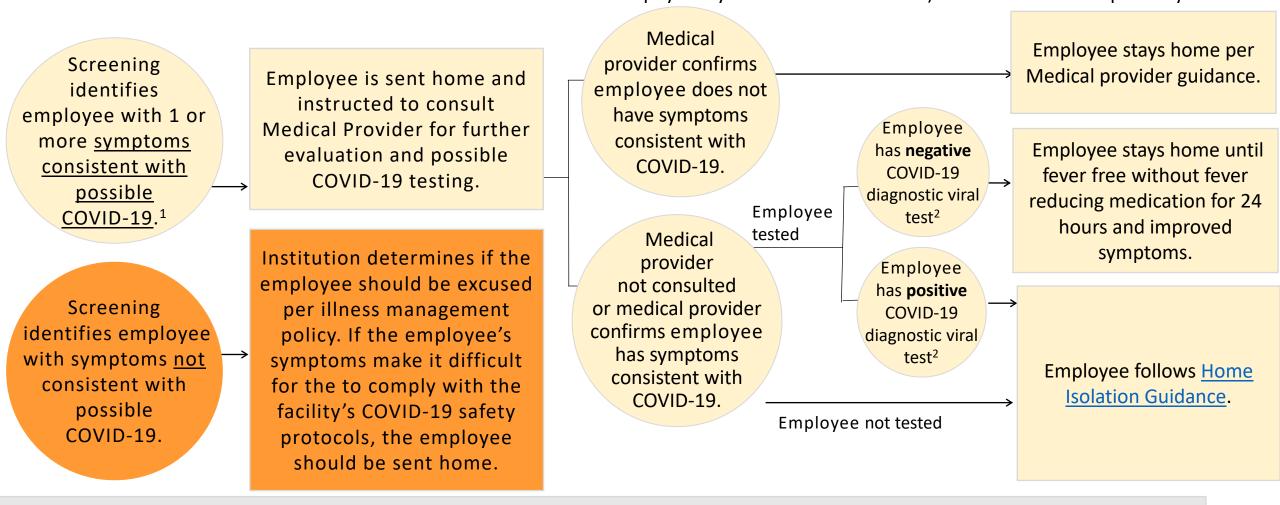
<sup>2</sup>COVID-19 diagnostic viral test includes Nucleic Acid Amplification Test, such as a PCR, or a rapid antigen test (including over-the-counter, or a rapid antigen tests are considered the most accurate test for COVID-19, but either PCR or rapid antigen tests may be used.

## **Decision Pathway for** *Employees* **with Symptoms**

#### Decision Pathways for Employees with Symptoms Prior to Entry<sup>1</sup> into an Educational Institution, regardless of vaccination status

<sup>1</sup>If employee becomes unwell at the facility, place employee in an isolation area (ideally outdoors, physically distant from attendant) and follow decision pathways below.

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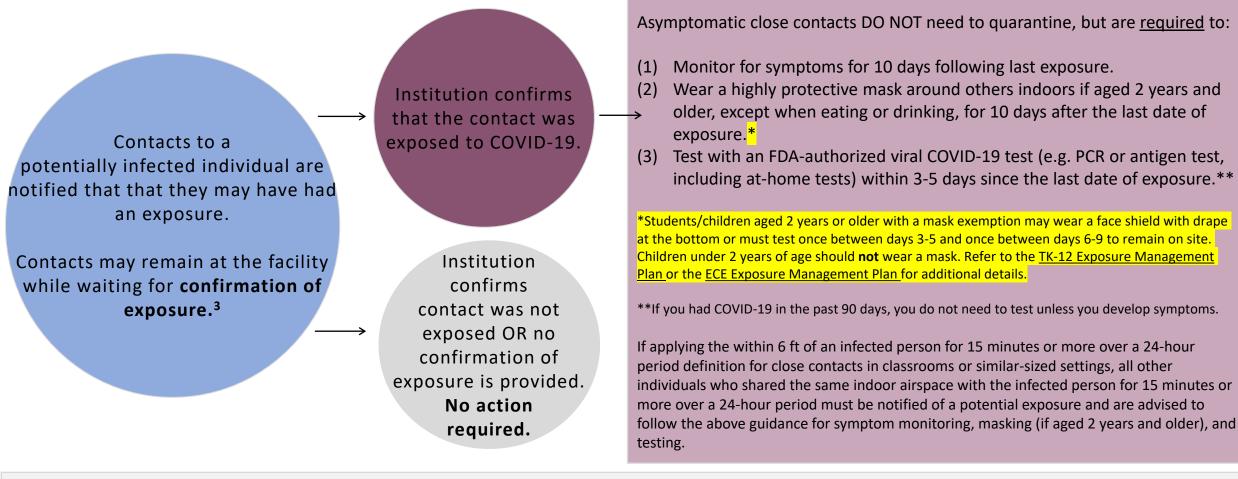
<sup>1</sup>Symptoms associated with possible COVID-19 in adults: fever  $\geq$  100.4° or feeling feverish (chills, sweating); cough; shortness of breath; new loss of taste or smell; fatigue; runny or stuffy nose; muscle or body aches; headache; sore throat; nausea or vomiting; diarrhea. If the symptoms are not listed but there is still concern, additional evaluation by a medical provider is recommended.

<sup>2</sup>COVID-19 diagnostic viral test includes Nucleic Acid Amplification Test, such as a PCR, or a rapid antigen test (including over-the-counter, or at-home, tests). PCR tests are considered the most accurate test for COVID-19, but either PCR or rapid antigen tests may be used.

Decision Pathway for Contacts (child/student or employee/staff) of a Potentially Infected Individual

#### Decision Pathways for Contacts to a Potentially Infected Individual at an Educational Institution

A potentially infected individual is an individual with  $\geq$  1 symptoms consistent with possible COVID-19<sup>1</sup>. In TK-12 and ECE settings, close contacts of a potentially infected individual are those that shared the same indoor airspace OR were within 6 feet of someone with COVID-19 for a total of 15 minutes or more over a 24-hour period while they were infectious.<sup>2</sup>



<sup>1</sup>Symptoms consistent with COVID-19 criteria differ for children and adults, see slide 3 for child criteria and slide 5 for adult criteria.

<sup>2</sup> There are different approaches for identifying close contacts in ECE, TK-12, and IHE settings. Refer to the exposure management plan corresponding to the setting for more details: <u>ECE</u>, <u>TK-12</u>, <u>IHE</u>.

<sup>3</sup>Exposure is confirmed for a close contact to a potentially infected individual if the site receives notification that the potentially infected individual had a positive COVID-19 diagnostic viral test <u>OR</u> received a COVID-19 diagnosis from a medical provider.