COVID-19 INFORMATION COVID-19 ALBERTA HEALTH DAILY CHECKLIST (FOR CHILDREN UNDER 18)

Overview

This checklist applies for all children, as well as all students who attend kindergarten through Grade 12, including high school students over 18. Children should be screened every day by completing this checklist before going to school, childcare or other activities. Children may need a parent or guardian to assist them to complete this screening tool.

If your child has traveled outside Canada in the last 14 days, follow the <u>Government of Canada Travel, Testing,</u> <u>Quarantine and Borders</u> instructions, including any requirements for exempt travelers related to attending high-risk environments.

Screening Questions for Children under 18:

	Fever	YES	NO		
	Temperature of 38 degrees Celsius or higher				
	Cough	YES	NO		
	Continuous, more than usual, not related to other known causes or conditions such as asthma				
	Shortness of breath	YES	NO		
	Continuous, unable to breathe deeply, not related to other known causes or conditions such as asthma				
	Loss of sense of smell or taste	YES	NO		
	Not related to other known causes or conditions like allergies or neurological disorders				
lf th	e child answered "YES" to any symptom in question 1:				
	The child is required to isolate for 10 days from onset of symptoms as per <u>CMOH Order 39-</u> a negative COVID-19 test and feel better before returning to activities	<u>2021</u> OF	R receiv		
• . l	Use the AHS Online Assessment Tool or call Health Link 811 to arrange for testing and to receive additional				
	information on isolation.				

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	Chills	YES	NO
	Without fever, not related to being outside in cold weather		
	Sore throat/painful swallowing	YES	6 NO 6 NO
	Not related to other known causes/conditions, such as seasonal allergies or reflux		
	Runny nose/congestion Not related to other known causes/conditions, such as seasonal allergies or being outside in cold weather	YES	
	Feeling unwell/fatigued Lack of energy, poor feeding in infants, not related to other known causes or conditions, such as depression, insomnia, thyroid dysfunction or sudden injury		
	usea, vomiting and/or diarrhea t related to other known causes/conditions, such as anxiety, medication or irritable bow drome		
	Unexplained loss of appetite Not related to other known causes/conditions, such as anxiety or medication	YES	NO
	Muscle/joint aches Not related to other known causes/conditions, such as arthritis or injury	YES	NO
	Headache Not related to other known causes/conditions, such as tension-type headaches or chronic migraines	YES	NO
	Conjunctivitis (commonly known as pink eye)	YES	NO
• • •	e child answered "YES" to ONE symptom in question 2: Keep your child home and monitor for 24 hours. If their symptom is improving after 24 hours, they can return to school and activities when they enough to go. Testing is not necessary. If the symptom does not improve or worsens after 24 hours (or if additional symptoms emerge AHS Online Assessment Tool or call Health Link 811 to check if testing is recommended.		
•	e child answered "YES" to TWO OR MORE symptoms in question 2: Keep your child home. Use the <u>AHS Online Assessment Tool</u> or call Health Link 811 to determine if testing is recommer Your child can return to school and activities once their symptoms go away as long as it has bee		ıst 24
	hours since their symptoms started. e child answered "NO" to all questions:		

Please note: If your child is experiencing any symptoms from the lists above, do not bring them to visit a continuing care or acute care facility for 10 days from when symptoms started or until symptoms resolve (whichever is longer), unless they receive a negative COVID-19 test result and feel better.

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