### **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.

**Screening Questions for Children under 18**:

1.	Has the child traveled outside Canada in the last 14 days?	YES	NO		
If the child answered "YES":					
The child is required to quarantine for 14 days from the last day of exposure.					
• If the child develops any symptoms, use the AHS Online Assessment Tool or call Health Link 811 to					
determine if testing is recommended.					
If the child answered "NO", proceed to question 2.					
2.	Has the child had close contact with a case <sup>1</sup> of COVID-19 in the last 14	YES	NO		
	days?				
	Face-to-face contact within 2 metres for 15 minutes or longer or direct physical				
	contact such as hugging				
If the child answered "YES":					
	e child is required to quarantine for 14 days from the last day of exposure.				
NOTE: Individuals who previously tested positive for COVID-19 in the 90 days before being exposed to another case of					
COVID-19 are not required to quarantine.					
If the					
	e child answered "NO", proceed to question 3.	nptoms	<u>s:</u>		
If the					
	child answered "NO", proceed to question 3.  Does the child have any new onset (or worsening) of the following core syn Fever	nptoms YES	s: NO		
	child answered "NO", proceed to question 3.  Does the child have any new onset (or worsening) of the following core syn  Fever  Temperature of 38 degrees Celsius or higher	YES	NO		
	E child answered "NO", proceed to question 3.  Does the child have any new onset (or worsening) of the following core synthem.  Temperature of 38 degrees Celsius or higher  Cough				
	child answered "NO", proceed to question 3.  Does the child have any new onset (or worsening) of the following core syn  Fever  Temperature of 38 degrees Celsius or higher	YES	NO		
	Example child answered "NO", proceed to question 3.  Does the child have any new onset (or worsening) of the following core synthem.  Fever Temperature of 38 degrees Celsius or higher  Cough Continuous, more than usual, not related to other known causes or conditions	YES	NO		
	Does the child have any new onset (or worsening) of the following core syntem Fever Temperature of 38 degrees Celsius or higher Cough Continuous, more than usual, not related to other known causes or conditions such as asthma	YES	NO NO		
	Does the child have any new onset (or worsening) of the following core syntem Fever Temperature of 38 degrees Celsius or higher  Cough Continuous, more than usual, not related to other known causes or conditions such as asthma  Shortness of breath	YES	NO NO		
	Does the child have any new onset (or worsening) of the following core syntem Fever Temperature of 38 degrees Celsius or higher  Cough Continuous, more than usual, not related to other known causes or conditions such as asthma  Shortness of breath Continuous, out of breath, unable to breathe deeply, not related to other known	YES	NO NO		
	Example child answered "NO", proceed to question 3.  Does the child have any new onset (or worsening) of the following core syntems:  Fever Temperature of 38 degrees Celsius or higher  Cough Continuous, more than usual, not related to other known causes or conditions such as asthma  Shortness of breath Continuous, out of breath, unable to breathe deeply, not related to other known causes or conditions such as asthma	YES YES YES	NO NO		
	Example 2 child answered "NO", proceed to question 3.  Does the child have any new onset (or worsening) of the following core syntems of the child have any new onset (or worsening) of the following core syntems of the children of 38 degrees Celsius or higher  Cough  Continuous, more than usual, not related to other known causes or conditions such as asthma  Shortness of breath  Continuous, out of breath, unable to breathe deeply, not related to other known causes or conditions such as asthma  Loss of sense of smell or taste	YES YES YES	NO NO		

# If the child answered "YES" to any symptom in question 3:

- The child is to isolate for 10 days from onset of symptoms OR receive a negative COVID-19 test and feel better before returning to activities
- Use the <u>AHS Online Assessment Tool</u> or call Health Link 811 to arrange for testing and to receive additional information on isolation.

If the child answered "NO" to all of the symptoms in question 3, proceed to question 4.



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4.	Does the child have any new onset (or worsening) of the following other symptoms:		
	Chills	YES	NO
	Without fever, not related to being outside in cold weather		
	Sore throat/painful swallowing	YES	NO
	Not related to other known causes/conditions, such as seasonal allergies or reflux		
	Runny nose/congestion	YES	NO
	Not related to other known causes/conditions, such as seasonal allergies or being		
	outside in cold weather		
	Feeling unwell/fatigued	YES	NO
	Lack of energy, poor feeding in infants, not related to other known causes or		
	conditions, such as depression, insomnia, thyroid dysfunction or sudden injury		
	Nausea, vomiting and/or diarrhea	YES	NO
	Not related to other known causes or conditions, such as anxiety, medication or		
	irritable bowel syndrome		
	Unexplained loss of appetite	YES	NO
	Not related to other known causes or conditions, such as anxiety or medication		
	Muscle/joint aches	YES	NO
	Not related to other known causes or conditions, such as arthritis or injury		
	Headache	YES	NO
	Not related to other known causes or conditions, such as tension-type headaches		
	or chronic migraines		
	Conjunctivitis (commonly known as pink eye)	YES	NO

# If the child answered "YES" to ONE symptom in question 4:

- 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 feel well enough to go. Testing is not necessary.
- If the symptom **does not improve or worsens** after 24 hours (or if additional symptoms emerge), use the <u>AHS Online Assessment Tool</u> or call Health Link 811 to check if testing is recommended.

# If the child answered "YES" to TWO OR MORE symptoms in question 4:

- Keep your child home.
- Use the <u>AHS Online Assessment Tool</u> or call Health Link 811 to determine if testing is recommended.
- Your child can return to school and activities once their symptoms go away as long as it has been at least 24 hours since their symptoms started.

# If the child answered "NO" to all questions:

• Your child may attend school, childcare and/or other activities.

**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.

