

Daily Screening Questions For Yellow Screen

1. **Have you taken a Covid-19 test in the last 14 days?**
 - a. Yes, but No Results Yet - stay home
 - b. Yes, and a Positive Result - household quarantines for 14 days + 24 hours symptom free
 - c. Yes, and a Negative result - continue to next question
 - d. No - continue to next question

2. **Have you been directly exposed to COVID-19 in the last 14 days (within 6ft for 15 min or more with or without a mask)?**
 - a. Yes - need to quarantine for 14 days since last exposure before returning to school
 - b. No - continue to the next question

3. **Do you have a 100.4 or greater temperature?**
 - a. Yes - please return home until symptom free for 24 hours
 - b. No - continue to the next question

4. **Have you had any symptoms of an illness in the last 24 hours?**
 - a. Yes - please return home until symptom free for 24 hours
 - b. No - continue to the next question

5. **Have you taken any medication to lower your temperature or reduce a symptom?**
 - a. Yes - please return home until symptom free for 24 hours
 - b. No - GO TO SCHOOL