COVID Isolation, Quarantine, and Return to Work/School Guidelines for School Districts

August 20, 2020

Below are the general guidelines to manage COVID symptoms, confirmed exposures, and confirmed positive cases amongst students and staff of K-12 schools, based on guidance from the U.S. Centers for Disease Control and Prevention (CDC).

1. If a student or employee is symptomatic with any of the symptoms listed below, they should not come to school and should seek COVID testing at a location listed at coronavirus.utah.gov:
   - **One or more of these symptoms:**
     - cough
     - shortness of breath
     - difficulty breathing
     - fever of 100.4°F or higher
     - chills
     - new loss of taste or smell
   - **Two or more of these symptoms:**
     - headache
     - muscle pain
     - sore throat
     - congestion or runny nose
     - nausea or vomiting
     - diarrhea

2. If a student or employee is symptomatic (as defined in #1) and tests for COVID*, they should remain at home until test results are back.
   - If test result is negative, the individual may return to school when symptoms are improving and they are fever-free without the aid of medication for at least 24 hours
   - If test result is positive, the individual must remain isolated until symptoms are improving and one of the following, whichever is longer:
     - 10 days have passed since symptoms began
     - 24 hours have passed since resolution of fever without the aid of medication

*If the student or employee chooses to not be tested, they should stay home and the school should use the return-to-work/return-to-school guidance intended for a positive test result (second bullet above).

3. If a student or employee is exposed but not symptomatic, they should quarantine for 14 days from the date of exposure and watch for symptoms. The individual should maintain the full 14-day quarantine even if they test negative for COVID during the 14-day time period; illness may develop at any point during the 14 days and they may have tested before illness developed.

Please also note that the CDC does not recommend use of face shields as a substitute for cloth face coverings. A transparent, plastic face shield may be worn in addition to a cloth face covering, but a plastic face shield is not an adequate replacement for an appropriately worn face covering. As such, face shields should only be used in place of a face covering when communicating with a person who is deaf or hard of hearing, or for speech therapy where seeing the mouth and lips is necessary.

Thank you,

Dagmar Vitek, MD, MPH
Medical Officer