

## Covid-19 Daily Checklist for Children

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

Question 1: Does the child have any new onset (or worsening) of the following Core Symptoms. If the child answered “yes to any symptom in question 1, the child is required to isolate for 10 days from the onset of symptoms as per CMOH Order 39-2021 OR receive a negative COVID-19 test and feel better before returning to activities. Use the AHS Assessment Tool 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 proceed to question 2.

Symptom	Monday	Tuesday	Wednesday	Thursday	Friday
Fever (higher than 38 degrees)					
Cough Continuous, more than usual, not related to other known causes or conditions such as asthma.					
Shortness of breath (continuous, unable to breath deeply, not related to other known causes or conditions such as asthma)					
Less of sense of smell or taste					

Question 2: Does the child have any new onset (or worsening) of the following other symptoms: if the child answered “yes” to ONE symptom -keep your child home and monitor for 24hrs. - If their symptom is improving after 24hrs., 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 24hrs. (Or if additional symptoms emerge), use the AHS Online Assessment Toll or call Health Link 811 to check if testing is recommended.

If the child answered “yes” to 2 of more symptoms in question 2: Keep your child home. - Use the AHS Assessment Tool or call Health Link 811 to determine if testing is recommended. - Your child can return to school/care and activities once their symptoms go away as long as it has been at least 24hrs.since their symptoms started.

If Child answered “no” to all questions: your child may attend school/care and activities.

Chills (Without fever, not related to being outside in cold weather)					
Sore throat/painful swallowing (not related to other known causes/conditions)					
Runny Nose/congestion (not related to other known causes/conditions)					
Feeling unwell/fatigued (lack of energy, poor feeding in infants, not related to other known causes/conditions)					
Nausea, Vomiting and/or diarrhea (not related to other known causes/conditions or medications)					
Unexplained loss of appetite ( not related to other know causes/conditions)					
Muscle/Joint aches (not related to other known causes/conditions)					
Headache (not related to other known causes/conditions)					
Conjunctivitis (pink eye)					

Child Name: \_\_\_\_\_

Parent Signature : \_\_\_\_\_

Date : \_\_\_\_\_