

Litchfield School District COVID-19 Quarantine and Isolation Procedures ~ January 19, 2022

Note: If you have been tested for COVID-19, you must stay home from school while you wait for results.

	I have been exposed* to someone who has tested positive for COVID-19. I have no symptoms , and I am Up-To Date* on COVID-19 vaccination .	I have been exposed* to someone who has tested positive for COVID-19. I do not have symptoms , and I am NOT Up-To Date* on COVID-19 vaccination .	I have symptoms of COVID-19.	I tested positive for COVID-19, and I do not have symptoms .	I tested positive for COVID-19, and I have symptoms .
To Return to School	<ul style="list-style-type: none"> I do not need to quarantine* and can stay in school unless symptoms develop. I need to monitor for symptoms of COVID-19 for 10 days. 	<ul style="list-style-type: none"> I need to quarantine* for a minimum of 5 days after last exposure. Day Zero is the day I was last exposed. The timeline resets each time there is a new exposure. I need to monitor for symptoms of COVID-19 for 10 days. Please note: You CANNOT test out of quarantine due to an exposure. 	<ul style="list-style-type: none"> I need to have a negative COVID-19 test performed by a medical provider and be fever-free (off all fever-reducing medications) with other symptoms improving and certify that my symptoms have improved for at least 24-hrs. -OR- I need to isolate* for 5 days. Day Zero is the day I developed symptoms. I must be masked when around others for an additional 5 days. 	<ul style="list-style-type: none"> I need to isolate* for 5 days. Day Zero is the day I tested positive. I must be masked when around others for a total of 10 days. Complete THIS FORM prior to return 	<ul style="list-style-type: none"> I need to isolate* for 5 days. Day Zero is the day I developed symptoms. I must be masked when around others for a total of 10 days. To end isolation* after 5 days, I need to be fever-free (off all fever-reducing medications) with all other symptoms improving and to certify that my symptoms have improved for at least 24-hrs in THIS FORM
Testing Guidance	<ul style="list-style-type: none"> If I develop symptoms, I should isolate* and get a PCR test for COVID-19. It's recommended for me to obtain a PCR test for COVID-19 on day 5 after I was exposed. 	<ul style="list-style-type: none"> If I develop symptoms, I should isolate*, call my medical provider, and get tested for COVID-19. It's recommended for me to test for COVID-19 on day 5 after I was exposed and/or if I develop symptoms. 	<ul style="list-style-type: none"> I should isolate*, call my medical provider, and get tested for COVID-19. 	<ul style="list-style-type: none"> If I develop symptoms, I should call my medical provider and refer to the "I tested positive for COVID-19 and have symptoms" column. 	
Masks	<ul style="list-style-type: none"> Follow Masking status at school. It is recommended I always wear a mask around others for 10 days after exposure. 	<ul style="list-style-type: none"> Follow Masking status at school. It is required that I always wear a mask around others for 10 days after exposure. 	<ul style="list-style-type: none"> Follow Masking status at school. It is required that I always wear a mask around others for 10 days after developing symptoms. 	<ul style="list-style-type: none"> Follow Masking status at school. It is required that I always wear a mask around others for 10 days after testing positive. 	<ul style="list-style-type: none"> Follow Masking status at school. It is required that I always wear a mask around others for 10 days after testing positive.

***Isolation** is used for individuals who are symptomatic or who have tested positive for the COVID-19 virus. These individuals must stay home and away from others (including people in the household).

***Quarantine** is used for individuals who have been exposed to the COVID-19 virus and are at risk for infection. These individuals must stay home and away from others (including people in the household).

***Exposed** is defined as a household contact* with someone who has tested positive for COVID-19. Household contact* includes sleepovers with someone outside the typical household.

***Household contact** applies to any person who lives or sleeps in the same indoor shared space as another person diagnosed with COVID-19 (either a temporary or permanent living arrangement).

***Up-To-Date on COVID-19 vaccination** means an individual has completed a primary COVID-19 vaccine series (the single-dose J&J Janssen vaccine, or a 2-dose series of the Pfizer-BioNTech or Moderna vaccine) AND any booster shots which they are eligible for and recommended to receive. Vaccine cards are required to document vaccine status.