



Litchfield School District

School Administrative Unit #27
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"Imagine Greatness, Expect Success!"

DAILY HEALTH SCREENING - 3/26/2021

All Staff and Students are expected to take personal responsibility for the health and safety of self and others. Please answer the following questions each morning:

1. Do you have any of the following symptoms of COVID-19?
 - a. Temperature of 100.0 °F or greater?
 - b. Respiratory symptoms: cough, sore throat, runny nose, nasal congestion, or shortness of breath?
 - c. General body symptoms: fatigue, muscle aches, joint aches, headache?
 - d. Nausea, vomiting, or diarrhea?
 - e. Change in your sense of taste or smell?
2. Have you had "close contact" (10 minutes+ within 6 feet with or without a mask) with anyone who is confirmed to have COVID-19 in the 48 hours prior to onset of symptoms or a positive test result?
3. Have you traveled in the prior 10 days on a cruise ship or to an international destination? Please note the school district does not recognize "testing out" after travel.

If you answered "Yes" to any of the questions above, please contact the school nurse to report symptoms or receive additional guidance before coming to school.

Updated 10/8/2020 to clarify the list of COVID-19 Symptoms (#1), simplify the close contacts info (#2), and clarify travel restrictions (#3).

Updated 1/1/2021 to reduce the travel quarantine to 10 days with no option for testing out.

Updated 3/26/2021 to change travel quarantines from outside New England to international/cruise ship, clarified "close contacts".