Decision Pathways for Symptoms in Early Care and Education Centers and TK-12 Schools

Los Angeles County Department of Public Health

Updated: 8/15/2022
Decision Pathway for *Children* with Symptoms
Symptoms consistent with possible COVID-19 infection in children include: fever ≥ 100.4°F; new cough (different from baseline); vomiting or any new onset diarrhea. If the child’s symptoms are not consistent with possible COVID-19 but there is still concern, evaluation of the child by a medical provider is recommended.

Decision Pathways for Children with Symptoms Prior to Entry into an Educational Institution, regardless of vaccination status

1If child becomes unwell at the facility, place child in an isolation area (physically distant from attendant, ideally outdoors) and follow decision pathways described below.

1Symptoms consistent with possible COVID-19 infection in children include: fever ≥ 100.4°F; new cough (different from baseline); vomiting or any new onset diarrhea. If the child’s symptoms are not consistent with possible COVID-19 but there is still concern, evaluation of the child by a medical provider is recommended.

2COVID-19 diagnostic viral test includes Nucleic Acid Amplification Test, such as a PCR, or a rapid antigen test (including over-the-counter, or at-home, tests). PCR tests are considered the most accurate test for COVID-19, but either PCR or rapid antigen tests may be used.
Decision Pathway for *Employees* with Symptoms
Decision Pathways for Employees with Symptoms Prior to Entry\textsuperscript{1} into an Educational Institution, regardless of vaccination status

\textsuperscript{1}If employee becomes unwell at the facility, place employee in an isolation area (ideally outdoors, physically distant from attendant) and follow decision pathways below.

1. Symptoms associated with possible COVID-19 in adults: fever \(\geq 100.4^\circ\) or feeling feverish (chills, sweating); cough; shortness of breath; new loss of taste or smell; fatigue; runny or stuffy nose; muscle or body aches; headache; sore throat; nausea or vomiting; diarrhea. If the symptoms are not listed but there is still concern, additional evaluation by a medical provider is recommended.

2. COVID-19 diagnostic viral test includes Nucleic Acid Amplification Test, such as a PCR, or a rapid antigen test (including over-the-counter, or at-home, tests). PCR tests are considered the most accurate test for COVID-19, but either PCR or rapid antigen tests may be used.
Decision Pathway for *Contacts (child/student or employee/staff) of a Potentially Infected Individual*
A potentially infected individual is an individual with \( \geq 1 \) symptoms consistent with possible COVID-19\(^1\). In TK-12 and ECE settings, close contacts of a potentially infected individual are those that shared the same indoor airspace OR were within 6 feet of someone with COVID-19 for a total of 15 minutes or more over a 24-hour period while they were infectious.\(^2\)

Asymptomatic close contacts DO NOT need to quarantine, but are required to:

1. Monitor for symptoms for 10 days following last exposure.
2. Wear a highly protective mask around others indoors if aged 2 years and older, except when eating or drinking, for 10 days after the last date of exposure.\(^*\)
3. Test with an FDA-authorized viral COVID-19 test (e.g. PCR or antigen test, including at-home tests) within 3-5 days since the last date of exposure.\(^**\)

\(^*\)Students/children aged 2 years or older with a mask exemption may wear a face shield with drape at the bottom or must test once between days 3-5 and once between days 6-9 to remain on site. Children under 2 years of age should not wear a mask. Refer to the TK-12 Exposure Management Plan or the ECE Exposure Management Plan for additional details.

\(^**\)If you had COVID-19 in the past 90 days, you do not need to test unless you develop symptoms.

If applying the within 6 ft of an infected person for 15 minutes or more over a 24-hour period definition for close contacts in classrooms or similar-sized settings, all other individuals who shared the same indoor airspace with the infected person for 15 minutes or more over a 24-hour period must be notified of a potential exposure and are advised to follow the above guidance for symptom monitoring, masking (if aged 2 years and older), and testing.

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\(^1\)Symptoms consistent with COVID-19 criteria differ for children and adults, see slide 3 for child criteria and slide 5 for adult criteria.

\(^2\)There are different approaches for identifying close contacts in ECE, TK-12, and IHE settings. Refer to the exposure management plan corresponding to the setting for more details: ECE, TK-12, IHE.

\(^3\)Exposure is confirmed for a close contact to a potentially infected individual if the site receives notification that the potentially infected individual had a positive COVID-19 diagnostic viral test OR received a COVID-19 diagnosis from a medical provider.