

St. Cloud School District 742

Health Services

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Influenza-like Illness Symptom Screening Tool for Parents and Caregivers of Students in Grades Pre-K Through 8

Parents and caregivers should use the following questionnaire to assess the health status of their child on a daily basis.

Does your child have:

- | | | |
|-------------------------------|------------------------------|-----------------------------|
| 1. Fever (100° f or greater)? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 2. Sore Throat? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 3. Cough? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 4. Nasal Congestion? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 5. Runny Nose? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |



SHOULD I KEEP MY CHILD AT HOME?

- If you checked “yes” to fever **AND** one of the other symptoms, **keep your child home for at least 24 hours after they no longer have a fever or signs of fever with use of fever reducing medications (any medicine that has ibuprofen or acetaminophen).** If you have questions about your child’s health or symptoms, call your child’s healthcare provider.
- If your child has been diagnosed by a healthcare provider with a different disease, such as strep, follow your healthcare provider’s recommendation and school policy for when to return to school.

WHAT SHOULD I TELL MY CHILD’S SCHOOL?

- If you checked “yes” for fever **AND** one of the other symptoms, **call your child’s attendance office and/or health office to let them know what symptoms your child has and that they will not be at school.**
- If your child has been diagnosed by a healthcare provider with a different disease, such as strep, tell your child’s attendance office.

This form is a recommended tool from the Minnesota Department of Health (MDH). For more information and on-going updates 651-201-5414 or 1-877-676-5414 or go to the MDH website at: www.health.state.mn.us .