



GRAYSON COUNTY HEALTH CENTER
124 E WHITE OAK STREET
LEITCHFIELD, KY 42754
PHONE: 270-259-3141
FAX: 270-259-5388
WWW.GRAYSONHEALTHCENTER.ORG



Date: _____

Dear Parent/Guardian,

Grayson County Health Department and Grayson County Schools are dedicated to the well-being of our children. This commitment includes a prompt response to potential health issues that are a concern to our families as well as keeping you informed and being as transparent as possible.

Your child, _____, has been determined to be a direct exposure to COVID-19 and needs to quarantine for 10 days from last exposure. Day of exposure is day 0, day 10 is last day of quarantine, and day 11 is return to normal activities.

The exposure took place on: _____

The child will need to be in quarantine until: _____

You will be contacted by the Contact Tracing nurse from the school or health department. In order for your child to be released after quarantine they will need to be cleared by the contact tracer.

If during quarantine, the child meets criteria to test out early, this will be offered at day 7, **and your child may return to school on day 8**. The health department continues to do free drive-thru rapid testing and you can call 270-259-3141, extension 118 to schedule a test. Your child **MUST** have remained symptom free with no new exposures in order to use this option for quarantine release. Your child can test on: _____

Please report any symptoms to the nurse or tracer. Symptoms to monitor for:

- Congestion or stuffy nose
- Headache
- Abdominal pain, nausea, vomiting, diarrhea
- Fever or chills
- Cough
- Sore throat
- Shortness of breath
- Change in taste or smell
- Muscle aches
- Fatigue

This quarantine does not affect anyone else in the household unless your child becomes sick. Please feel free to call with any questions. Contact number to call is _____.

Letter sent by Grayson County Health Department in collaboration with Grayson County Schools.