



Parents/Guardians

We know most staff and students need a face-to-face learning environment to learn and thrive. To support our students and you, our educators and staff, in providing that invaluable in-person learning environment, our school has partnered with the Bay County Health Department to offer free rapid antigen serial testing to any student or staff who has been identified as a close contact. Staff members and students will have the opportunity to receive daily rapid antigen testing during the time they would otherwise have been required to quarantine. Participants will receive an antigen test on days 1-5, day 7 and day 9. If the rapid test results in a negative test, staff and students will be able to remain in school without needing to quarantine.

Drive through testing will occur daily at our Edison Administration Building at 3359 E. Midland Road from **7:00am-9:00am**, prior to entering any of our school buildings. The test entails a simple swab, less than one inch into the nostril, and you can self-swab. Results will be received within 15 minutes. Staff or students that test negative can continue with the workday or school day. Anyone that tests positive will be sent home immediately and should seek confirmatory PCR testing.

This serial COVID-19 testing program is an optional measure our district is making available. You can choose not to participate in the testing program or opt out of testing at any time.

If you **do wish to participate** in COVID-19 testing, you will need to sign a consent form prior to testing on your first visit to our Edison Administration Building.

The health and safety of our school community is important to us all. COVID-19 testing for staff and students is just one of many ways our school is working to help keep our school community safe from the virus. Wearing masks, washing hands often, maintaining social distance wherever possible, and getting staff vaccinated all remain important safety measures. We are excited to offer this free COVID-19 rapid testing to you as one extra layer of safety.

Please carefully read the following notice:

1. I understand that the COVID-19 testing will be conducted through a BinaxNOW antigen test, or other acceptable test as ordered by an authorized medical provider or a public health official.
2. I understand that my ability to receive testing is limited to the availability of test supplies.

3. I understand that I am not creating a patient relationship with the ordering physician by participating in this testing. I understand the entity performing the test is not acting as my medical provider. Testing does not replace treatment by my medical provider. I assume complete and full responsibility to take appropriate action with regards to my test results and my medical care. I agree I will seek medical advice, care, and treatment from my medical provider or other health care entity if I have questions or concerns, if I develop symptoms of COVID-19, or if my condition worsens.
4. I understand it is my responsibility to inform my health care provider of a positive test result, and that a copy will not be sent to my health care provider for me.
5. I understand that my antigen test result will be available in 15-30 minutes. If the result is positive, it will need to be confirmed with a PCR test.
6. I understand and acknowledge that a positive antigen test result is an indication that I need to self-isolate to avoid infecting others until I obtain a negative PCR test result.
7. I have been informed of the test purpose, procedures, and potential risks and benefits. I will have the opportunity to ask questions before proceeding with a COVID-19 diagnostic test at the testing site. I understand that if I do not wish to continue with the COVID-19 diagnostic test, I may decline to test.
8. I understand that to ensure public health and safety and to control the spread of COVID-19, my test results may be shared without my individual authorization.
9. I understand that my test results will be disclosed to the appropriate public health authorities as required by law.
10. I understand that I may withdraw my consent to participate in testing at any time.

Note: It is imperative that you have read this entire communication prior to bringing your child to our Edison Administration Building for testing. Once you arrive, you will have to consent to the testing of your child before any testing can begin.

If you have additional questions about COVID-19 safety measures at our school, please contact your building administrator.

Thank you,

Bangor Township Schools Administration