

### Daily COVID-19 Checklist- Staff

Please check your temperature every morning prior to scheduled classroom instruction, then answer the following:

1. Have you, or anyone in your household, had any of the following symptoms in the last 14 days?
  - Fever (temperature of 100.0 or greater) or chills
  - Cough, shortness of breath, or difficulty breathing
  - Sore throat
  - Runny nose or nasal congestion
  - Nausea, vomiting, or diarrhea
  - New onset of fatigue
  - Muscle or body aches
  - New onset of loss of taste or smell
  - Headache
  
2. Have you, or anyone in your household, had close contact with someone who is presumed to have/had COVID-19 or has tested positive in the last 14 days?

If you answered yes to any of these questions, please stay home and contact your school nurse for further guidance. Follow the district protocol for reporting an absence.

Should you have an [underlying medical condition](#) that is considered to increase your risk for severe disease, it is recommended that you stay home where you can provide remote instruction.