COVID-19 SCREENING BY HEALTH CARE PROVIDERS

- Assess for COVID-19 in all children with symptoms of COVID-19 with or without exposure (see symptoms below).
- If patient is tested for COVID-19, they MUST QUARANTINE from others until results back and interpreted.
- Data suggests nasopharyngeal swab is best but nasal swab to level of turbinates may be acceptable alternative (and more palatable by pediatric patients).
- PCR is the preferred diagnostic test. Positive Rapid Antigen results are diagnostic of COVID-19 but Negative Antigen results should be confirmed with PCR. Antibody tests should not be used as part of this algorithm.
- COVID-19 should be ruled out before considering alternative diagnosis. Consider COVID as underlying cause of ear infection/sinus infection. Consider COVID testing a child positive for strep without classic symptoms/exam findings as false positive strep and strep carrier state frequently occur. Even flu or RSV may be present along with COVID as coinfection.
- If a patient has been exposed to COVID-19, recommend patient quarantine for 14 days after LAST contact and consider sending COVID PCR around 5 days after exposure to determine if patient is COVID positive to allow for notification of your patient’s contacts. This test WILL NOT CHANGE the length of quarantine for asymptomatic contacts.

SYMPTOMS SUGGESTIVE OF COVID-19

Fever (subjective or objective of 100 or higher), chills, cough, breathing problems, loss of taste, loss of smell, nausea, vomiting, diarrhea, fatigue, sore throat, headache, muscle aches and congestion/runny nose. Any single symptom could be suggestive of COVID-19 EXCEPT runny nose. Runny nose alone is low risk for COVID-19.

***Fever is not a required symptom.***

SARS-CoV-2 PCR TEST or Antigen test and/or strep, flu, RSV, etc as clinically indicated

SARS-CoV-2 PCR NEGATIVE

*If Antigen test done initially and negative, will need to send PCR.

NOT LIKELY COVID-19

Return to school only after temp <100 without fever reducing medications x over 24 hours and symptoms improving.

*Will need a note to return*

SARS-CoV-2 PCR POSITIVE (either PCR or Antigen)

***Notify ADPH***

POSSIBLE OR CONFIRMED COVID-19

Duration of isolation: At least 10 days from onset of symptoms AND temp <100 x 24 hours without fever reducing medications AND improving symptoms.

*Quarantine household contacts from 14 days from last contact with COVID + patient. (If caregiver or household contacts unable to isolate from this patient, this time must start from the end of isolation of the COVID + patient).

OTHER PATHOGEN DETECTED (AND PATIENT WITH CLASSIC SYMPTOMS AND EXAM FINDINGS)

*SARS-CoV2 test not done initially

NOT LIKELY COVID-19 BUT CONSIDER POSSIBILITY OF COINFECITION.

Recommend follow up by phone to ensure following typical course of detected pathogen (if not- needs COVID test).

Can go back to school or daycare based on CDC criteria for other illness. At least when temp under 100 for more than 24 hours and symptoms improved.

*Will need note explaining why no COVID test to go back.

NO SARS-CoV-2 TEST DONE AND NO OTHER PATHOGEN IDENTIFIED

**Will need a note from primary care provider to go back explaining why no COVID test done.**

TEST UNAVAILABLE

CLINICALLY NOT COVID-19

Can go back to school or daycare if minimal runny nose/congestion or if non-infectious diagnosis (allergies, GERD, etc).

*Will need a note to return*