COVID-19 in Pediatric Patients
Triage, Evaluation, Testing and Return to School

This tool is intended to assist clinicians in decision-making. It is not intended to replace clinical judgment. This is a changing environment, and as we gain new knowledge about this virus, expect adaptations. The algorithm does NOT apply to children diagnosed with COVID-19 by PCR within the past three months. Please consult CDC protocols in those situations.

1. Close contact with known COVID-19 patient? Yes
   - Any of following symptoms? Yes
     - Obtain COVID PCR test and may consult medical home as indicated regardless of vaccine status
     - Test at 3-5 days following last exposure.²
       - Per CDC guidance, wear a mask until test results are back (including in school)
     - Return to school when: ≥10 days have passed since symptoms first appeared and ≥24 hours afebrile without the use of antipyretics and symptoms resolved or markedly improved⁴
   - No
     - Return to school when: finished 14-day quarantine and meet symptom resolution criteria (>24 hours afebrile without the use of antipyretics and symptoms resolved or markedly improved)
       - 14 day quarantine begins after person with latest onset of symptoms clears isolation (10 days from onset, fever resolved ≥24 hr, symptom resolution or improvement)
     - Return to school when: ≥24 hours afebrile without the use of antipyretics and symptoms resolved or markedly improved and 14 days passed since last exposure or negative test at day 7

2. Vaccinated?²
   - Yes
     - Close contact with known COVID-19 patient?³
     - Any of following symptoms? Yes
       - Obtain COVID PCR test and may consult medical home as indicated regardless of vaccine status
       - Test at 3-5 days following last exposure.²
         - Per CDC guidance, wear a mask until test results are back (including in school)
       - Return to school when: ≥10 days have passed since symptoms first appeared and ≥24 hours afebrile without the use of antipyretics and symptoms resolved or markedly improved⁴
     - No
       - Return to school when: finished 14-day quarantine and meet symptom resolution criteria (>24 hours afebrile without the use of antipyretics and symptoms resolved or markedly improved)
         - 14 day quarantine begins after person with latest onset of symptoms clears isolation (10 days from onset, fever resolved ≥24 hr, symptom resolution or improvement)
     - Return to school when: ≥24 hours afebrile without the use of antipyretics and symptoms resolved or markedly improved and 14 days passed since last exposure or negative test at day 7
   - No
     - Exposure in home?
       - Yes
         - Option 1: Quarantine from infected person in household for their entire isolation period/leave household and then Option A or B
         - Option 2: Remain in household
           - Negative Test
           - Positive Test
             - Return to school when: finished 14-day quarantine, which begins after person with latest onset of symptoms clears isolation (10 days from onset, fever resolved ≥24 hr, symptom resolution or improvement) or negative PCR test at day 7 of quarantine.
       - No
         - Return to school when: finished 14-day quarantine, which begins after person with latest onset of symptoms clears isolation (10 days from onset, fever resolved ≥24 hr, symptom resolution or improvement) or negative PCR test at day 7 of quarantine.

³As determined by contact tracing
²Vaccinated means two weeks after final dose of vaccine series
³If ongoing exposure in the home, test 3-5 after initial exposure and then again 3-5 days after last exposure
⁴Loss of taste or smell may persist for months following COVID diagnosis

Note: Pediatric patients who have returned from international travel should follow the After International Travel guidance from the CDC.

Current as of August, 2021

† Please consult return to play documents located here.
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As determined by contact tracing
Parent/caregivers may consult medical home for persistent symptoms
Loss of taste or smell may persist for months following COVID diagnosis
Consult usual infectious disease protocols (e.g. Red Book or Caring for Our Children)

Note: Pediatric patients who have returned from international travel should follow the After International Travel guidance from the CDC.