

Date

Dear Staff Member,

This letter is to notify you that [school] follows Centers for Disease Control and Prevention (CDC) and Tennessee Department of Health guidelines for the management of individuals who have been diagnosed with, or exposed to, COVID-19. Our school district follows these strict guidelines to protect the safety of our students, families, and staff.

We will continue to do everything in our power to ensure the safest environment possible while providing continuity of education to our students. When we can work quickly and collaboratively with the Tennessee Department of Health to identify and advise ill and exposed students and staff, we can avoid the need to close our schools.

If you have been diagnosed with COVID-19:

- You must ISOLATE AT HOME for 10 days from the onset of your symptoms of COVID-19 or the date of collection of your positive test if you are asymptomatic. Additionally, you must be fever-free (without the use of fever-reducing medications) for at least 24 hours and your symptoms must be improving.
- You MAY NOT return to school or school activities while in isolation.
- A subsequent negative COVID-19 test does NOT alter this isolation period.
- Additionally, your household contacts who are unable to avoid ongoing contact with you, including students and other staff residing in the home, are to self-quarantine for a period of 10 days BEYOND the end of your isolation period.
- Additionally, household contacts who are unable to avoid ongoing contact with you, including staff and other students residing in the home, are to self-quarantine for the recommended quarantine period BEYOND the end of your isolation period. TDH and CDC recommend a 14-day quarantine. Acceptable alternatives to a 14-day quarantine include: (1) Ending quarantine after Day 10 (returning to regular activities on Day 11) without testing if the contact does not have symptoms. (2) Ending quarantine after Day 7 (returning to regular activities on Day 8) if the contact does not have symptoms and if they test negative by a PCR or antigen test collected after day 5.

Date of your symptom onset or positive test (if asymptomatic): _____

Date you may return to school: _____

Note: return dates are subject to change based upon public health investigation.

Should you develop symptoms that are concerning to you, please contact your medical provider. If you have questions about these instructions, please contact the school or your local health department.

Sincerely,