

Date \_\_\_\_\_

Dear Parent/Guardian of \_\_\_\_\_,

Your student was sent home today with the following symptom(s) circled:

- Headache
- Nausea
- Fatigue
- Muscle aches.

**Your student may return to school the following school day if:**

- They above circled symptom(s) are gone
- They are not running a fever
- No new symptoms have developed overnight

In order to return to school, you must send them with a letter that the above 3 criteria have been met.

**Your student MAY NOT return to school if any of the following exist:**

- The above symptom(s) are still present
- They have a fever greater than 100.4
- New symptoms have developed

**PLEASE CALL YOUR STUDENT'S SCHOOL NURSE FOR FURTHER INFORMATION ON WHAT STEPS TO TAKE NEXT.**

Thank you,

CMUSD Health Services