**Boise River Montessori, Inc.**

**January 18th 2022**

**BRMI COVID-19 QUARANTINE GUIDELINE**

**Boise River Montessori will be observing the following Self-Quarantine guidelines effective January 18, 2022**

**\*\* IN EVERY SCENARIO BELOW, MASK-WEARING IS REQUIRED FOR 5 Days upon returning to the school \*\***

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| **TYPE** | **CONDITIONS** | **QUARANTINE PERIOD** | **RETURN TO BRMI** |
| **SHOWING SYMPTOMS with**  **NO TESTING** | **See POSITVE TEST RESULTS**  ***= BELOW =*** | **Varies** | **Varies** |
| ***HI-RISK* EXPOSURE**  **with**  **NO TESTING and**  **NO SYMPTOMS** | **All Conditions must be met:**   * **No Testing followed last Day of Exposure/Travel** * **No Symptoms** | **5 DAYS**  **From Last Exposure Date if Unvaccinated or not current**  **----------------------**  **0 Days**  **if VACCINATION is CURENT/Boosted** | **RETURN FOLLOWING**  **5th DAY OF EXPOSURE,**  ***WEAR A MASK* , and monitor for symptoms**  **--------------------------**  **Can return immediately**  **if vaccinated,**  **WEAR A MASK, monitor for symptoms** |
| ***HI-RISK* EXPOSURE**  **with**  **NEGATIVE TEST RESULT and**  **ASYMPTOMATIC** | **All Conditions must be met:**   * **Exposure Only** * **No Symptoms** * **Test was taken 5 or more Days after the last Day of Exposure** * **Test was taken within 3 Days of return to BRMI** * **Test Result was Negative** | **5 DAYS**  **from**  **Last Exposure Date (counting the Last Day of Exposure)**  **----------------------**  **0 Days**  **if VACCINATION is CURENT/Boosted** | **RETURN FOLLOWING**  **5th DAY OF EXPOSURE, *WEAR A MASK*,**  **monitor for symptoms**  **--------------------------**  **Can return immediately**  **if vaccinated,**  ***WEAR A MASK,***  **monitor for symptoms** |
| **POSITIVE TEST RESULT**  **and**  **ASYMPTOMATIC** | **All Conditions must be met:**   * **Test(s) was taken** * **ANY Result was Positive** * **Subject is ASYMPTOMATIC prior to and throughout the entire Quarantine Period** | **5 DAYS**  **from**  **Positive TEST Date** | **RETURN FOLLOWING**  **5th DAY OF TEST DATE, *WEAR A MASK,***  **monitor for symptoms.** |
| **POSITIVE TEST RESULT**  **with**  **MILD SYMPTOMS**  **(to include but not limited to any of the following: fever, shortness of breath, coughing, flu-like conditions, loss of smell, etc.)** | **All Conditions must be met:**   * **Test(s) was taken** * **ANY Result was Positive** * **Subject is SYMPTOMATIC prior to or AT ANY TIME during the Quarantine Period** * **NO FEVER for the last 24-Hrs and unmedicated** * **Symptoms are mild and IMPROVING** | **5 DAYS**  **from the**  **ONSET OF SYMPTOMS** | **RETURN FOLLOWING**  **5h DAY OF ONSET OF SYMPTOMS**  **And**  **NO FEVER**  **for 24-Hours,**  ***WEAR A MASK,***  **monitor symptoms** |
| **POSITIVE TEST RESULT**  **with**  **SEVERE SYMPTOMS**  **(to include but not limited to any of the following: fever, flu-like conditions, loss of smell, etc., with hospitalization)** | **All Conditions must be met:**   * **Test(s) was taken** * **ANY Result was Positive** * **Subject is SYMPTOMATIC prior to or AT ANY TIME during the Quarantine Period** * **Requires Hospitalization, Critical Care, etc.** | **5 DAYS**  **from the**  **the Hospital or Critical Care**  **Release Date** | **RETURN FOLLOWING**  **5h DAY OF RELEASE FROM CRITIAL CARE**  **And**  **NO FEVER**  **for 24-Hours,**  ***WEAR A MASK,***  **monitor symptoms** |