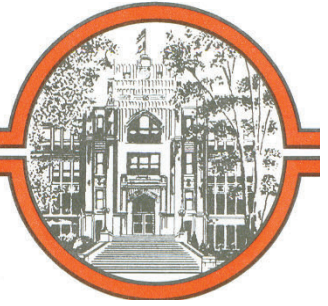


LEWIS AND CLARK HIGH SCHOOL

521 W. Fourth Ave., Spokane, Washington 99204 354-7000



Wrestling and Basketball Parents,

Lewis and Clark High School along with the entire state of Washington will start a mandatorily Covid Testing protocol for all athletes in wrestling and basketball. This document will provide all pertinent information.

Fully Vaccinated – No testing required

You are considered fully vaccinated:

- Two weeks after you have received the second dose in a two-dose series (Pfizer-BioNTech or Moderna)
- Two weeks after you have received a single-dose vaccine (Johnson and Johnson/Janssen)

School personnel will verify vaccine status by athlete providing vaccine card or photo of card.

Not Fully Vaccinated

To ensure safe participation in athletics, schools must institute screening testing protocols for athletes, coaches, trainers, and other personnel who work with athletes who are not fully vaccinated participating in high-contact indoor sports.

If your athlete will need to be tested, please click on the following link and register them for our testing data base.

<https://simplereport.gov/register/RTTZZ>

Students and parents will be signing the Covid-19 Testing Consent Form and returning it to their coach.

We look forward to an exciting wrestling and basketball season and need your help to provide a safe and enjoyable season.

Dave Hughes
Athletic Director
Lewis and Clark High School
Davehu@spokaneschools.org

COVID-19 Testing Consent Form

CONSENT

The novel coronavirus (“COVID-19”) pandemic presents a new disease with the state of scientific and medical knowledge regarding COVID-19 being limited and constantly evolving. There remain unknowns regarding how the disease is spread and contracted and there is currently no known treatment or cure. COVID-19 is reported to be highly contagious and spread easily from person to person. COVID-19 may result in serious illness, debilitating injury, or death. Older adults and people of any age, including children, who have serious underlying medical conditions might be at higher risk for severe illness or death from COVID-19.

Name of Person Being Tested: Staff Student

Name of Parent (if student)::

By completing this form, I consent to allow a trained school staff member to test myself/my child for COVID-19. COVID-19 testing may be offered to staff or students in three circumstances: (1) if staff/student(s) develop(s) new symptoms of COVID-19; (2) if staff/student(s) is exposed or potentially exposed to COVID-19 in a school group and the local public health department recommends testing; (3) as surveillance testing required for participation in certain sports as directed by DOH and WIAA. I understand that I may consent to one or all types of testing for myself/my child.

I understand that COVID-19 testing for the staff/student(s) is optional and that I may refuse to give consent, in which case, the named staff/student(s) will not be tested. I understand that staff/student(s) must then stay home from school as directed by the contact tracing team and/or may be not eligible to participate in certain sports or activities.

I understand that the school is not acting as the staff/student’s healthcare provider, this testing does not replace treatment by the staff/student’s healthcare provider, and I assume complete and full responsibility to take appropriate action regarding the staff/student’s test results. I understand that it remains my responsibility to seek medical advice, care and treatment for myself/my child from their healthcare provider.

I understand that there is a possibility of false negative COVID-19 test results and that staff/student(s) could still be infected with COVID-19 even if the test result is negative. I also understand that if I/my child tests positive for COVID-19, the test result will be reported to the local public health authority as required by law. Personal health information will not be released without written consent except when required by law.

I give permission for trained school staff to test myself/my child for COVID-19 per Spokane Regional Health District and WA Department of Health Guidelines. I understand that permission for testing is required for my student to participate in certain sports or activities as directed by WA Department of Health and WIAA.

I do not give permission for my student to be tested. I understand this may result in my student having to quarantine as directed by the contact tracing team. I understand that if I do not give permission for testing, my student may not participate in certain sports or activities as directed by WA Department of Health and WIAA.

I understand that testing is voluntary and is not required. By signing below, I acknowledge that I have carefully read the above and knowingly assume an risks associated with this testing. I hereby voluntarily agree to waive and discharge any and au claims against the District related to or arising out of COVID-19 testing, and voluntarily release the District from liability for any exposure to or illness or injury from COVID-19, including claims for negligent actions of the District or its employees, agents, representatives, and volunteers related to or arising out of COVID-19, on behalf of myself and my child to the fullest extent allowed by law. By signing below, and in consideration for providing testing to me/my child, I agree to release, discharge, indemnify, and hold harmless the District and its employees, agents, volunteers, and representatives from an liability, claims, causes of action, or demands, including attorney fees, fines, fees, or other costs (e.g. medical costs) arising in any way from COVID-19 testing.

Signature (Parent/Guardian if student)

Date

Contact the nurse at your child’s school if you have questions.



Athletic Screening Test Information Sheet

Your student participated in athletic screening testing today using the either BinaxNOW or CareStart antigen test. Based on today's results, below are your next steps:

Positive test result:

- Student should remain at home and isolate.
- An SPS school nurse and/or contact tracer will reach out to you with further instructions and a return to school date.

Negative test result, but is having symptoms that could be associated with COVID-19:

- Student should remain at home until contacted by your school nurse with more information regarding the following three options for return to school:
 - Retesting using a PCR test, a rapid molecular test, or a second antigen test separated by 24 hours from today's test.
 - A note from your health care provider indicating your student does not have COVID-19.
 - Remain home for 10 days from the onset of symptoms and at least 24 hours after symptoms have resolved.
- **Please note – Per SRHD and DOH guidance, a single negative antigen test like the one used today is not approved for use to return a symptomatic individual back to school or work.**

Identified as a close contact to an individual who tested positive, and your student is:

Unvaccinated:

- Student should remain at home until contacted by your school nurse or an SPS contact tracer and given further instructions including a return to school date.

Vaccinated, but is having symptoms that could be associated with COVID-19:

- Student should remain at home until contacted by your school nurse or an SPS contact tracer and given further instructions including a return to school date due to having symptoms.
- A negative PCR or Rapid Molecular test or a health care provider's note indicating student does not have COVID-19 **AND** symptom resolution will be needed for student to return to school prior to the standard 10-day symptom waiting period.

Vaccinated and is not currently having any symptoms:

- Student may continue attending school and most extracurricular activities as long as they remain symptom-free.
- Student must test between days 5–7 from last exposure to the positive individual. Student does not need to stay home while waiting for test results, but does need to wear a mask at **ALL** times while at school (including outside and during sports) and watch for symptoms for the duration of what would be their quarantine period.
- If symptoms develop, student should stay home and contact their school nurse.