

IN-PERSON GUIDANCE FOR EARLY INTERVENTION SESSIONS

On March 11, 2020, Governor Lujan Grisham declared a public health emergency to maximize the resources available to fight the spread of the novel COVID-19 virus and minimize public health risks for New Mexicans. Throughout the pandemic, the Early Childhood Education and Care Department (ECECD) made changes to how Family Infant Toddler (FIT) services are conducted. This guidance is designed to help providers and early childhood professionals maintain physical distancing practices and health and safety standards. Please understand that the situation is fluid, and as we learn more ECECD will share updated guidance.

As of March 9, 2021, early intervention services began to take place in the provider agency, outdoor setting, child care facilities/registered homes, or via telehealth. This guidance was updated on April 19, to allow early intervention services to take place in child care facilities/registered homes regardless of county color.

As of June 1, 2021, early intervention services may also be provided in the home by providers who are fully vaccinated.¹ In addition, as of September 8, 2021 masks must be worn by adults and children two (2) years and over in any indoor location, regardless of vaccination status. Masking is recommended in public outdoor locations such as Explora, the Zoo, a park, or any other public place where individuals are free to gather and congregate.

Providers are responsible to deliver services in the location of the family's choosing, and to deliver them in accordance with the guidelines provided in this document.

COVID-19 safe practices, however, must be followed when providing services in an indoor location, regardless of vaccination status. The guidance below must be used when planning for, and delivering, in-person FIT services. The purpose of this guidance is to ensure that FIT providers can safely offer the option of in-person services, either in a provider agency setting, home or an outdoor setting, or continue with telehealth services.

All families MUST be given a choice of service location, including services in their home. This choice must be documented via a Prior Written Notice, PWN, and the attached In-Person Consent Form, and placed in the child's file.

¹ Please note that ECECD has adopted the CDC's definition of "fully vaccinated," which is: "In general, people are considered fully vaccinated two weeks after their second dose in a 2-dose series, such as the Pfizer or Moderna vaccines; or two weeks after a single-dose vaccine, such as Johnson & Johnson's Janssen vaccine."

For more information, please see the CDC's vaccination resources: <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/fully-vaccinated.html#vaccinated>

****As of June 1, 2021, there are no longer travel restrictions for early intervention service providers.**

The table below guides providers in navigating the differences between guidance for vaccinated and unvaccinated early intervention staff.

| ALLOWABLE SERVICE DELIVERY LOCATIONS: VACCINATED STAFF | ALLOWABLE SERVICE DELIVERY LOCATIONS: UNVACCINATED STAFF |
|---|---|
| Inside a family's home | Family's outdoor space |
| Family's outdoor space | Child care setting if allowed by the child care |
| Child care setting | Outdoor location |
| Outdoor location | Agency setting |
| Agency setting | |

*****Masks are required for anyone 2 years and older for ALL indoor locations regardless of vaccination status.**

Providers must ensure if services are taking place inside a family's home, the services are being provided by early intervention practitioners who are fully vaccinated.

- Unvaccinated early intervention service providers, including those who are vaccinated but have not had a booster, must test for COVID-19 every week. Either rapid antigen or polymerase chain reaction (PCR) tests are acceptable. Tests that are administered at a public school location for the purpose of surveillance testing are also acceptable. Provider agencies are responsible for ensuring the early intervention personnel are not providing in-person services if they have tested positive for COVID-19.

5-Day Quarantine and Isolation Guidance

For anyone who tests positive for COVID regardless of vaccination status (Isolation):

- Stay home and isolate for 5 days. Day 0 is the day of symptom onset, or the day the positive test was taken (for asymptomatic persons).
- You DO NOT need to get an additional PCR test if you have had a positive at-home rapid test. Any positive test is considered positive.
- If you have no symptoms after 5 DAYS, you can leave your house but wear a mask for 5 more days (surgical or KN95 preferred).
- If you have a fever or other persistent symptoms, continue to stay home in isolation until your fever is gone for 24 hours and other symptoms are resolving.
- To prevent the spread of COVID, tell anyone you have recently had close contact with and encourage them to get tested, monitor for symptoms, and reduce exposure to other people.

For anyone who has been in close [contact](#) with someone with COVID-19 (Quarantine):
These guidelines differ depending on your vaccination status

If you are [up to date](#) on all COVID-19 vaccines that you are eligible for:

- Wear a mask around others for 10 days. Day 0 is the day of exposure; day 1 is the day after exposure.
- Test on Day 5 if possible.
- If you develop symptoms at any time, get tested if possible and stay at home until you get your results.
- If you can't get a test, but still have symptoms, assume you are positive and follow guidelines for a COVID-positive test.

*If you are unvaccinated, not fully vaccinated or without a booster (**not up to date** on all vaccinations you are eligible for):*

- Stay at home for 5 days.
- Then wear a mask around others for 5 MORE DAYS.
- Test on Day 5, if possible.
- If you develop symptoms at any time, get tested if possible and stay at home until you get your results.
- If you can't get a test, but still have symptoms, assume you are positive and stay home and follow guidelines for a COVID-positive test.
- If a close contact is continuously exposed (i.e., lives in the same household), the close contact must quarantine for the 5 days the positive person is infectious and in isolation, AND an additional 5 days in case the close contact turns positive. This means that household members living with a COVID positive individual must quarantine for a minimum of 10 days.

For anyone who has [symptoms of COVID-19](#) regardless of your vaccination status:

- Get either an at-home rapid test or PCR test if possible and stay at home until you know your test result.
- If you test positive, follow the guidelines for a positive test result.
- If you test negative but still have symptoms, continue to stay at home and get a PCR test OR a second at-home rapid test in 1-2 days.
 - If you test positive on the PCR or at-home rapid test, follow guidelines for a COVID-positive test.
 - If you test negative, no other test is needed at this time.
- If you can't get a test, but still have symptoms, assume you are positive and follow guidelines for a COVID-positive test.

**What to do with your covid-19 At-home test result?
NMDOH flyer provided below.**

For more information on what it means to be up to date on the COVID vaccine, please visit this site:
<https://www.cdc.gov/coronavirus/2019-ncov/vaccines/stay-up-to-date.html>

If you have any questions on home tests and quarantine or isolation, please visit cv.nmhealth.org/selftest or call the Coronavirus Hotline: 1-855-600-3453.

For more information on DOH guidance, please visit cv.nmhealth.org/covid-vaccine/.

- Early intervention service providers should contact families (e.g. by telephone, email, text) the day of the scheduled in-person visit to complete the Pre-Screening Questionnaire (See Attachment A, pages 9-10). Completed questionnaires must be kept in the child’s folder with the Family Service Coordinator Logs.

Early intervention service providers must adhere to New Mexico Department of Health’s epidemiologists’ recommendations based on current CDC guidance, scientific evidence, and a careful approach that acknowledges that there is still limited understanding of the virus, how it spreads, and who may be vulnerable to significant illness and harm. This guidance is designed to help New Mexico contain and prevent COVID-19 and can be found here: <https://cv.nmhealth.org/wp-content/uploads/2021/01/EPI-COVID19-Containment-Policies.1.21.21.pdf>.

The table below is meant to clarify the information provided in the section above

| Common COVID-19 Situations | FULLY VACCINATED AND BOOSTED | VACCINATED BUT NOT BOOSTED | UNVACCINATED |
|--|--|--|--|
| Exposure to COVID-19 via a close contact | Monitor for symptoms for 14 days; wear a mask for 10 days following exposure; test 3-5 days after exposure (optional) | Self-quarantine for 5 days; test 3-5 days after exposure (optional) | Self-quarantine for 5 days; test 3-5 days after exposure (optional) |
| Symptoms of COVID-19 | Self-Isolate and test | Self-Isolate and test | Self-Isolate and test |
| Positive for COVID-19 | Self-isolate for 5 days; return to work after the isolation period if: fever free for 24 hours and symptoms are resolving; wear a high-quality mask for another five days. | Self-isolate for 5 days; return to work after the isolation period if: fever free for 24 hours and symptoms are resolving; wear a high-quality mask for another five days. | Self-isolate for 5 days; return to work after the isolation period if: fever free for 24 hours and symptoms are resolving; wear a high-quality mask for another five days. |

During Visits

- In-person visits may take place either outdoors (community or child's home), at a licensed child care facility/registered home) or in a provider agency setting, regardless of the early intervention provider's vaccination status, if allowed by the child care center.
- In-person visits that take place inside a family's home MUST be delivered by a fully vaccinated provider.
- During in person visits, maintain social distancing and proper ventilation (open windows, doors, etc.,) as much as possible.
 - Persons involved in the early intervention services will practice social distancing as is practical based on the intervention.
- Provider agency locations must adhere to the Centers for Disease Control and Prevention (CDC) cleaning protocols. All service provider agencies must follow current public health and executive orders, found here: <https://cv.nmhealth.org/public-health-orders-and-executive-orders/>.
- Physical distancing (3 feet minimum) should be practiced, where possible, and early intervention service providers must adhere to social distancing best practices. Any family member present at the in-person visit should also maintain a social distance of at least 3 feet.
- All adults and children two (2) years and older present at the in-person visit, taking place indoors, must wear a mask/face covering. If a child cannot tolerate the mask the provider must document the reason and shall proceed with the in-person session. A child's masks can be removed for eating/drinking or if necessary, for speech therapy.
 - Note: Parents/Guardians or early intervention service providers may want to use clear masks for therapies or interventions that require visualization of the lips and mouth.
- Early intervention service providers may wear additional personal protective equipment (PPE) during in-person visits as they feel appropriate.
- Early intervention service providers must provide families with information about why wearing a mask/face covering (and other PPE, if applicable) is necessary. Masks/face coverings should fully cover the nose and mouth without gaps and stay in place without needing adjustments.
- If a family does not agree to wearing a mask/face covering during the early intervention visit taking place indoors, the visit may take place outdoors or via telehealth. Masking is recommended when providing services in a public outdoor location.
- Early intervention service providers must minimize contact with any frequently touched surfaces.
- Early intervention service providers may not take any items that are shared with other families to visits, with the exception to assistive technology and discipline specific supports. Prior to and after any scheduled visits, all items taken and used must be cleaned and sanitized according to the CDC guidelines found here: [Cleaning and Disinfecting Your Facility | CDC](#)



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- Early intervention service providers may conduct co-visits in-person if service providers have been fully vaccinated and the location of the visit allows for social distancing with an additional member(s) of the team present. Co-visits can also occur in an outdoor location, agency setting, or child care facility that allows for social distancing regardless of the vaccination status of the provider. All COVID-safe practices must be followed.
- Everyone participating in an in-person visit must wash their hands with soap and water for 20 seconds or use recommended hand sanitizer of at least 60 percent alcohol immediately before and after the session, after any direct contact, and anytime the face or mask is touched. This is also a great opportunity to work with the family and child on handwashing routines.
- Early intervention service providers must avoid touching their eyes, nose, and mouth at all times.
- If during an in-person visit a family member discloses that they are ill, the early intervention service provider must end the visit immediately and notify their supervisor.
- All masks/face coverings and PPE must be changed between visits.

Early Intervention Comprehensive Multidisciplinary Evaluation (CME)

****After 9/16/2020 interim IFSPs will no longer be used due to COVID-19 unless authorized by FIT. Teams may use an interim IFSP as indicated in NMAC 8.9.8.**

CMEs may be conducted in the provider's agency if:

- There is an identified room where COVID-19 Safe Practices, including regular cleaning, can occur;
- The room must have minimum surfaces that require cleaning;
- The furniture must be limited for ease of cleaning; and
- The evaluation items must only be available and present when needed.

****The room must be cleaned following CDC guidelines prior to and after the CME and may not be used without cleaning between families.**

Outside locations conducive for evaluations must have:

- Minimal noise;
- The ability to wash hands before/after the evaluation (may substitute handsanitizer); and
- Limited distractions for the child.

CMEs may be conducted in the child's home following COVID safe practices if:

- Both providers are fully vaccinated
- The home allows for social distancing;

- The home allows for the ability to wash hands before/after the evaluation (may substitute hand sanitizer);
- Use of evaluation items already in the home are preferred; and
- Use of evaluation items not in the home should be disposable or have the ability to be sanitized.
- Do not share evaluation items used unless they have been sanitized.

For Telehealth:

- Documentation of why the CME is being conducted via telehealth must be in the child's file. Documentation must include the family's request for telehealth;
- Video and audio must be available for the evaluation;
- Two practitioners of different disciplines must be on the video conference;
- The video conference connection must be stable for the family and the practitioners; and
- If the materials from the IDA Kit are not readily available in the home, a parent self-report (with sufficient description) may be used to determine if the child can complete the task.

Eligibility and Use of Informed Clinical Opinion

If the team believes the child is eligible due to a developmental delay, but is unable to determine the

actual percentage of delay (due to the inability to observe a task with the appropriate materials and/or the parent is unsure of the child's skills), the team may use the Informed Clinical Opinion (ICO) as the eligibility reason based on the information obtained along with a second level review by a qualified provider at the agency completing the in-person CME by documenting:

- The method(s) used for conducting the CME (e.g., in-person with IDA materials, telehealth with family materials, etc.);
- The items not scored and why (e.g., the child refused, materials unavailable, etc.);
- Any secondary tools used, if applicable; and
- A description of the child's abilities and why the team believes that there is a delay significant enough to warrant eligibility (for more guidance, see pg. 24 in the Evaluation & Assessment TA document).

During CMEs:

- Early intervention service providers may conduct the CME in-person if the location of the CME allows for social distancing with an additional member of the team present. All COVID-safe practices must be followed. CMEs may only take place inside the family's home if both providers are fully vaccinated.
- In the event that one provider is NOT fully vaccinated: One early intervention service provider conducts the CME in-person. The second early intervention service provider will participate via telehealth.
- When possible, request one parent/caregiver interact with the CME team with the child for

the evaluation. Exception may be made if the child or parent need additional support. Other adults may be present following social distancing and masks requirements.

- Persons involved in the early intervention services will practice social distance as is practical based on the intervention.
- All adults present at the CME must wear a mask/face covering.
- Note: Parents/Guardians or early intervention service providers may use alternate face coverings such as clear masks for therapies or interventions that require visualization of the lips and mouth, but a face covering is required.
- If a family does not agree to wearing a mask/face covering during the evaluation taking place indoors, the CME may take place outdoors or via telehealth.
- Everyone who will be participating in the session must wash their hands with soap and water or use an alcohol-based hand sanitizer (60% alcohol or higher), immediately before the session begins and immediately after it ends.
- All evaluation materials within the Infant-Toddler Developmental Assessment (IDA) kit must be cleaned prior to and after the CME. Materials must be cleaned/sanitized between CME's. Please substitute the cloth doll for a doll that can be easily sanitized. See Attachment C for chart regarding IDA evaluation materials.
- Some sections, such as the Social/Emotional section, which is reported by the parent, may be completed via telephone, and be included with the child's CME process.
- Hearing screenings may be conducted following guidance provided by the New Mexico School for the Deaf.

Early Intervention in Licensed Child Care Facilities and Registered Homes

Early intervention services may occur in licensed child care facilities or registered homes. Visits must be scheduled in advance with licensed child care facilities or registered homes.

- Early intervention service providers must follow child care COVID Safe Practices during the visits, which include:
 - Wear a mask
 - Handwashing
 - Maintain 3-foot distances
 - Comply with all health screening requirements
 - Adhere to PPE requirements
 - Adhere to COVID-19 testing requirements for licensed facilities
 - All licensed facilities and registered home provider unvaccinated staff are required to get tested for COVID-19 each week
- Unvaccinated early intervention providers must test every week for COVID-19. The Vault COVID-19 saliva test is a safe and effective way to self-test for COVID-19 in your home. Vault COVID-19 testing is free for all users, can be ordered online, administered from home, and dropped at a local UPS store for mailing. Customers incur no shipping costs and usually receive results within 24–48 hours. ECECD no longer provides unique codes to providers. However, DOH has a

statewide website where residents can order their tests. (Each individual orders a vault test and no unique link is required.) Rapid at-home antigen self-tests are not accepted for surveillance purposes.

- VAULT HEALTH LINK: <https://learn.vaulthealth.com/nm/>
- Information on Testing Sites can be found here: [COVID-19 Screening & Testing Sites - New Mexico Department of Health \(nmhealth.org\)](#)
- Children are to remain in their classroom and may not be pulled out for intervention services. The federal Office of Special Education (OSEP) maintains this requirement.

No In-Person Contact May Occur If Any of The Following Is True:

- Anyone in the family's or in the early intervention service provider's household has experienced symptoms of a respiratory illness in the last 14 days.
- Anyone in the family's or in the early intervention service provider's household has been in close contact with someone confirmed to have COVID-19 in the last 14 days. Staff and children who were in close contact with a confirmed COVID-19 positive case must quarantine for 10 days (unless they are fully vaccinated or have recovered from confirmed COVID-19 infection in the last 90 days).

Additional Precautions and Information for Early Intervention Personnel

- All unvaccinated early intervention personnel must monitor their temperature daily and notify supervisor of an elevated temperature of 100.4 Fahrenheit or more.
- Any early intervention personnel with signs and symptoms of a respiratory illness or other related COVID-19 symptom should not report to work and should follow the NM Department of Health guidance for testing, quarantine, and isolation: [NMDOH - Coronavirus Updates | Coronavirus Updates in New Mexico \(nmhealth.org\)](#)
- All early intervention personnel who develop signs and symptoms of illness while on the job must stop working immediately, notify their supervisor, follow Department of Health protocols, and self-isolate at home.
- All early intervention personnel who test positive for COVID-19 must notify FIT immediately via this link: <https://www.surveymonkey.com/r/35RV2CR>.
- All unvaccinated early intervention personnel must keep their own daily log of all people with whom they have been in close contact.
- Please visit the New Mexico Department of Health registration site to pre-register or schedule an appointment to receive a COVID-19 vaccine. The registration site is accessible from a computer or smartphone and is designed to be user-friendly. The site is located at [COVID-19 Vaccine | NMDOH - Coronavirus Updates \(nmhealth.org\)](#)
- For more information on COVID-19 Vaccines, please visit the CDC websites FAQ: <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/faq.html>.

Please contact your regional coordinator or FIT program manager if you have any questions or concerns about the guidance provided in this document.

| FIT Staff | Email Address | Phone Number |
|--|--|---------------|
| Hyacenth Sedillo- SE, NE | Hyacenth.Sedillo@state.nm.us | 505-795-0296 |
| Sabrina Curry-Metro, UNM DCCP, NMSD, NMSVBI, PEI, SW | Sabrina.Curry3@state.nm.us | 505- 469-5561 |
| Leah Davidson- FIT Manager | Leahc.Davidson@state.nm.us | 505-470-2933 |
| Kathey Phoenix- Doyle Bureau Chief | Kathey.PhoenixDoyle@state.nm.us | 505-604-7285 |

Please understand that the situation is fluid, and as we learn more ECECD will share updated guidance.

ATTACHMENT A: COVID-19 Pre-Screening Form

Pre-Screening Questionnaire for In-Person Visits

Child: _____ Date: _____ Time: _____

Person Interviewed/Relationship to Child _____

In Person Visit Scheduled (Date and Time) _____

Health Screening Questions

This child is being seen within the next 24 hours in a child care setting and therefore, will be monitored by their child care provider upon arrival at the child care facility. Yes _____ No _____

1. Is anyone in the family sick? If yes, please describe:

| | |
|--|--|
| <input type="checkbox"/> Fever | <input type="checkbox"/> Shaking with chills |
| <input type="checkbox"/> Cough | <input type="checkbox"/> Muscle pain |
| <input type="checkbox"/> Sore throat <input type="checkbox"/> Cold/flu symptoms | <input type="checkbox"/> Headache <input type="checkbox"/> New loss of taste or smell |
| <input type="checkbox"/> Shortness of breath or difficulty breathing | <input type="checkbox"/> Other _____ |

2. Has anyone in the family been screened for COVID-19 within the last 24 hours and what was the result?

3. Has anyone in the family been asked to quarantine/stay home and why?

4. Has anyone in the family been around anyone who is being investigated for or diagnosed with COVID-19?

5. Do you, your child, or anyone in your household have a compromised immune system or other risk factors making you or them more susceptible to serious complications to COVID-19?

6. Has your child’s doctor indicated that a home visit is **not** safe given your child’s diagnosis/medical condition? (If the answer to this question is “Yes”, do not have an in-person visit.)

EI Staff Name (Printed)

Signature with credential

In the event anyone in the household has tested positive for COVID-19 or has symptoms of COVID-19 the in-person visit must be changed to telehealth.

If the family has been in contact with others who have tested positive for COVID-19 or who have symptoms of COVID-19, the in-person visit must be changed to telehealth.

ATTACHMENT B: FIT In-Person Consent Form (English Version) Family Infant Toddler Program Services During Covid-19 Health Emergency

| | |
|---|-------------|
| Child's Name: | DOB: |
| Address: | |
| FIT Provider Agency | |
| Services to Be Delivered In-Person Indoors | |
| Services to Be Delivered In-Person Outdoors: | |
| Services to Continue via Telehealth: | |

Instructions: This consent must be completed prior to initiating or resuming ongoing in-person Early Intervention services.

I, Parent/Guardian (Print Full Name) _____,
 agree to meet in person for Family Infant Toddler Program early intervention
 services. I agree to the conditions below, which are in place to ensure my child's services can be
 delivered in the safest way possible.

- As of June 1st, 2021, early intervention services may take place in outside locations, in a provider agency, via telehealth or in a family's home. I understand that no early intervention provider may provide services in a family's home unless that provider is fully vaccinated.
- I understand I may return to telehealth services at any time. I may also have services provided via combination of in-person and telehealth. I will discuss with our early intervention team the way in which services will work best for my child/ren and family.
- I have received the enclosed "Facts About COVID-19" and will review with my family.
- In person services will only occur if everyone in the home is COVID-19 symptom- free. I will monitor the health of myself, my child, and others in my home for the following symptoms before each visit to ensure the visit does not need to be rescheduled or held via telehealth:
 - Fever, cough, shortness of breath, chills, muscle pain, sore throat, nausea/diarrhea, new loss of taste or smell.
- If anyone in our home is exposed or test positive to COVID-19, I will immediately notify my FIT service provider and understand that my child's scheduled services will be rescheduled or changed to telehealth.
- I will ensure family members will take their temperature before the scheduled visit and inform service provider of any family member with an elevated temperature of



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- 100.4 Fahrenheit or more. If our family does not have a thermometer, I will notify our Family Service Coordinator.
- I understand in-person visits will be rescheduled or changed to telehealth if anyone in the home (family or FIT service provider) has been exposed to COVID
- I understand that unvaccinated early intervention service providers will take their temperature before the scheduled visits and will conduct the visit via telehealth or reschedule if their temperature is elevated (100.4 Fahrenheit or more).
- I understand that no early intervention service provider, regardless of vaccination status, will provide services if they are ill.
- Everyone in our home or location where Early Intervention services are being delivered, but not directly involved in the session, will practice social distancing. Persons involved in the early intervention services will practice social distance as is practical based on the intervention.
- I understand that anyone who will be part of the in-person visit, taking place indoors, must wear a face covering except for children under the age of 2 years.
 - Note: Parents/Guardians or early intervention service providers may use alternate face coverings such as clear masks for therapies or interventions that require visualization of the lips and mouth, but a face covering is required.
- I understand everyone participating in any scheduled session must wash their hands with soap and water or use an alcohol-based hand sanitizer immediately before the session begins and immediately after it ends.
- I understand I may contact the Family Infant Toddler Program regarding any concerns I may have regarding COVID Safe Practices being followed during our in- person services. I may also contact the Family Infant Toddler Program regarding any other concerns regarding early intervention service providers. The Family Infant Toddler Program may be contacted at **1-877- 696-1472** or Fit.Program@state.nm.us.

Parent/Guardian Print Name

Parent/Guardian Signature Date

Early Intervention Service Provider Print Name

Early Intervention Service Provider Signature Date

ATTACHMENT C: IDA Materials and COVID Safe Practices

| IDA Kit Manipulatives to Clean Pre/Post CME | Objects to Substitute or Have as Disposable Options |
|---|---|
| Rattles; Small Ball; Squeaky Toy; Pull Toy with String | <p style="text-align: center;">Doll</p> <p><i>(While the cloth doll may be machine washable it may not be used back to back with evaluations thus a plastic doll that can be sanitized may be used.</i></p> <p><i>If using the cloth doll, it MUST be machine washed before and after its use with another child.)</i></p> |
| Solid Screen; All 3 Picture Cards; Small Car; Bell | <p>Piece of felt <i>(additional pieces of felt can be purchased and disposed of OR substitute with a similar weight and size piece of cloth that can be machine washable).</i></p> |
| Form Board; Small Bottle (inside and out) | <p>Blue Crayon: <i>(substitute with blue plastic markers that can be cleaned)</i></p> |
| Large Ball; 6 Beads and Sting | <p>Paper <i>(use a fresh sheet of paper for each child and dispose of properly after use)</i></p> |
| 10 Cubes | |
| Large and Small Cups | |
| Scissors | |
| Naming Items: Key, Pencil, Spoon | |



WHAT TO DO WITH YOUR COVID-19 AT-HOME TEST RESULT

Positive test result

Stay home for 5 days
(for both vaccinated and unvaccinated)



Stay at home in a room away from others in your household.



You **DO NOT** need to get an additional PCR test



If you have no symptoms after **5 DAYS**, you can leave your house **BUT** wear a mask for 5 more days.

If you have a fever, continue to stay home until your fever is gone for 24 hours

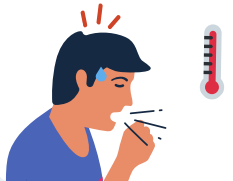


To prevent the spread of COVID, tell anyone you have recently had close contact with and encourage them to get tested, monitor for symptoms, and reduce exposure to other people.

Negative test result

Have Symptoms


(for both vaccinated and unvaccinated)




- Cough
- Fever/Chills
- Shortness of breath
- Muscle or body aches
- Vomiting, diarrhea
- New loss of taste or smell

If possible, Get a PCR test OR Repeat at-home test in 1-2 days

Stay at home until you know your test result.

 If you test positive, follow the guidelines for a positive test result.

 If you test negative again, no other test is needed at this time.

If you can't get a test, assume you are positive and stay home

No Symptoms

(depends on vaccination status; see below)

No other test is needed at this time, except:

If you had close contact with someone with COVID-19: If you are up to date on all vaccine that you are eligible for*:



- Wear a mask around others for 10 DAYS
- Test on Day 5 if possible



If you are unvaccinated, not fully vaccinated or without a booster (not up to date).



- **Stay at home for 5 DAYS**
- Then wear a mask around others for 5 MORE DAYS
- Test on Day 5 if possible

If you develop symptoms, stay home and go to "HAVE SYMPTOMS" column



If you have any questions, please visit [cv.nmhealth.org/selftest*](https://cv.nmhealth.org/selftest) or call the Coronavirus Hotline: 1-855-600-3453



¿QUÉ HACER CON LOS RESULTADOS DE SU PRUEBA CASERA COVID-19?



Si obtuvo un resultado POSITIVO:

Debe permanecer en casa durante 5 días (para los vacunados y los no vacunados)



Permanezca en casa, en una habitación alejada de los demás miembros de la familia.



NO es necesario realizar una prueba PCR adicional



Si no tiene síntomas después de **5 DÍAS**, puede salir de su casa **PERO** use una mascarilla durante 5 días más.

Si tiene fiebre, continúe en casa hasta que la fiebre desaparezca por 24 horas



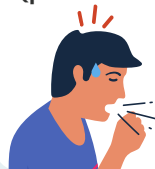
Para prevenir el contagio del COVID, informe a cualquier persona con la que haya tenido contacto cercano y anímela a hacerse la prueba, a vigilar los síntomas y a reducir la exposición a otras personas.



Si obtuvo un resultado NEGATIVO:

Tiene síntomas

(para los vacunados y los no vacunados)



- Tos
- Fiebre/escalofríos
- Dificultad para respirar
- Dolores musculares o corporales
- Vómitos, diarrea
- Nueva pérdida del gusto o del olfato

Si es positivo, Hágase una prueba PCR o repita la prueba casera en 1 a 2 días:

: Quédesse en casa hasta saber el resultado de la prueba.



Si el resultado es positivo, siga las recomendaciones para resultados positivos.



Si el resultado es negativo, no es necesario realizar otra prueba por el momento.

Si no puede hacerse una prueba, asuma que es positivo y quédesse en casa

No tiene síntomas

(depende del estado de vacunación; vea abajo)

No es necesario realizar otra prueba por el momento, excepto

Si ha tenido un contacto cercano con alguien con COVID-19:



Si está al día con todas las vacunas a las que puede optar*:

- Use una mascarilla cerca de los demás durante 10 DÍAS
- Si es posible, haga la prueba el día 5



Si no está vacunado, no está totalmente vacunado o no tiene la vacuna de refuerzo (no está al día):

- **Quédesse en casa por 5 DÍAS**
- Luego use una mascarilla alrededor de los demás durante 5 días más
- Si es posible, haga la prueba el día 5



Si desarrolla síntomas, quédesse en casa y vaya a la columna "Sintomático".



Si usted tiene preguntas, por favor visite cv.nmhealth.org/selftest o llame a la línea directa de Coronavirus: 1-855-600-3453