

**Frequently Asked Questions About Safe School Attendance for Children (<18 years old) with
Solid Organ Transplants during the COVID-19 Pandemic:
Guidance from the Canadian Society of Transplantation Paediatric Group**

School closures were a reasonable early pandemic response, but current evidence and experience support the concept that children can return to school in a manner that maximizes their overall health and minimizes risks from a public health perspective. We believe that education is critical for the development of children, is a human right, and is essential for the future wellbeing of our society. A safe return to school is critical for the social, developmental and mental health needs of our children.

Many of you have questions about safe school attendance during the coronavirus disease 2019 (COVID-19) pandemic. While the risk of getting COVID-19 in school is not zero, we would like to provide you with information based on current available evidence to help you make informed decisions about school attendance for your family and your child with a solid organ transplant. When reviewing this document, it is important to remember that:

1. There remain many unknowns about COVID-19 and new information continues to be discovered. Therefore, we will follow-up with newer, revised information as we learn more.
2. Local provincial stakeholders (ie. provincial Ministry of Education, Ministry of Health, public health and teachers) will ultimately decide about when and how to safely return to school in each province and/ or jurisdiction.
3. These recommendations may not apply to every child's situation and therefore are not meant to replace specific advice from your child's transplant specialist.

While we hope that this document will be helpful, please feel free to discuss specific individual details regarding your school plans with your child's transplant specialist.

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SUMMARY OF GUIDANCE

Children (< 18 years old):

Majority of children with COVID-19 have mild illness, including children with solid organ transplants.

Most children (< 18 years of age) with solid organ transplants have the same risk of COVID-19 infection as healthy children.

* some children may have increased risk of severe respiratory infections (incl. COVID-19) (refer to page 5 & guidance from your transplant team)

What can EVERYONE do to minimize the risk of infection and severe illness for children with solid organ transplants during the COVID-19 pandemic?

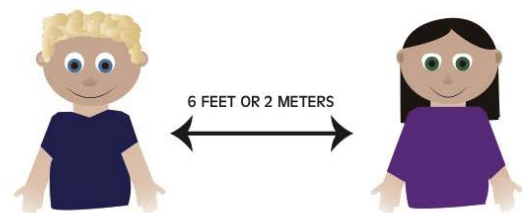
WASH HANDS FREQUENTLY



WEAR A FACE COVERING



MAINTAIN PHYSICAL DISTANCING



STAY UPDATED WITH VACCINATIONS INCLUDING THE FLU VACCINE



GET TESTED IF YOU FEEL UNWELL



CLEAN FREQUENTLY TOUCHED SURFACES/OBJECTS OFTEN

ENSURE ADEQUATE PERSONAL SUPPLY OF HAND SANITIZER, FACE MASKS & DISINFECTANT WIPES

FOLLOW PUBLIC HEALTH & SCHOOL GUIDELINES:

[Government of Canada: COVID-19 Prevention and risks](#)

[Government of Canada: COVID-19 guidance for schools Kindergarten to Grade 12](#)

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Are children (< 18 years old), including those with solid organ transplants, at higher risk of developing COVID-19 illness?

Children of all ages can get COVID-19, but most children have milder disease than adults. Based on observations in Canada and other countries, there are no data to suggest that children with solid organ transplants are at increased risk of contracting COVID-19 if they get exposed to the virus (SARS-CoV-2). The factors to consider when determining the risk of COVID-19 for children, including children with solid organ transplants, include:

A. The likelihood of being exposed to a person infected with COVID-19

The likelihood of being exposed to someone infected with COVID-19 depends on the number of active cases in the community. The number of active cases differs significantly between provinces, and between different communities within the same province.

One way of understanding the level of active COVID-19 transmission in the community is the '*test positivity rate*' – the percentage of all COVID-19 tests performed that are actually positive. A high positivity rate suggests higher community transmission, and points to more people in the community with active COVID-19 infection who have not been tested yet. According to the World Health Organization, a test positivity rate above 5% is considered high.

For epidemiological updates, please refer to: [Govt of Canada: COVID-19 Epidemiology update](#)

For provincial information, please refer to: [Provincial/territorial COVID-19 websites](#)

For summary data about COVID-19 in your area, please refer to: [Govt of Canada: COVIDTrends](#)

B. The risk of developing severe COVID-19 if they get infected

1. Children are **less likely** than adults to have severe COVID-19. Relatively few children have been admitted to hospital because of COVID-19. Most cases are mild.
2. There have been **few children (<18 years old) with solid organ transplants for whom COVID-19 infection have been reported in Canada.**

To our current knowledge, and when compared to adults, relatively few children with solid organ transplants have been diagnosed with COVID-19 across the world. Most children who were diagnosed with COVID-19 had mild disease. This information suggests that children with solid organ transplants are not at increased risk of getting COVID-19 when compared to healthy children.

Ongoing surveillance will help provide data to inform future updates.

Summary:

- Current evidence suggests that most children (<18 years old) with COVID-19 have mild illness.
- Information about COVID-19 in children with solid organ transplants is limited, but available evidence suggests that they have similar risks to other children.
- The likelihood of being exposed to someone with COVID-19 depends on the number of active COVID-19 infections in your local community, which can be assessed by the '*test positivity rate*'

Are the symptoms of COVID-19 in children with solid organ transplants similar to those in other children?

Yes. In fact, many children have no symptoms. When symptoms do occur, they most often include fever, cough, sore throat, and/or diarrhoea.

There is also a rare inflammatory illness called Multisystem Inflammatory Syndrome in children (MIS-C) which appears to be linked to previous COVID-19 infection. This does not seem to be any more common in children with solid organ transplants than in other children.

Are there some children with solid organ transplants who may have a higher risk of developing severe COVID-19 infection that would justify home schooling?

There is no single right answer that applies to all children, for all situations. Our general advice is that if your child attended school normally before COVID-19, then home schooling during the COVID-19 pandemic is not necessary. The final decision should take these factors into consideration:

- The number and rate of increase in COVID-19 cases in the community
- The school's ability to support infection control measures
- The child's ability to adhere to precautions to prevent transmission of the virus in school
- The child's potential risk of developing severe COVID-19 (discussed below)

We are using our experience with other common respiratory illnesses that affect children to guide our decision. These include viruses such as influenza (the "flu") and respiratory syncytial virus (RSV). Your transplant team will help you decide if your child is at increased risk. Below, we list the factors that may increase the risk of infection with all respiratory viruses, including COVID-19:

- **Receiving high level of immunosuppressive medications for active disease:**
 - Received a solid organ transplant recently
 - Received treatment for acute rejection recently
- **Have concurrent conditions that further weakens the immune system:**
 - Primary immunodeficiency
 - Undergoing treatment for cancer
- **Have concurrent conditions that may suggest a weakened immune system:**
 - Severely low white blood cell count
- **Have poorly controlled, severe or multiple other medical conditions**

Other considerations:

- **Your transplant team has determined that you or your child is at increased risk**
- If the level of COVID-19 activity in your community is **high** (as defined by Public Health). This would typically be announced publicly with details published on their website:
 - [Govt of Canada: COVID-19 website](#)
 - [Provincial/territorial COVID-19 websites](#)
- If your child is awaiting urgent major surgery
- If there is someone else in your house who may be considered 'high risk' for developing severe COVID-19

Can a sibling of a child with a solid organ transplant return to school?

Siblings are encouraged to return to school with infection prevention measures (face masks or coverings, physical distancing, proper hand hygiene) practiced and reinforced, as per public health guidelines.

If the child with a solid organ transplant is potentially at higher risk of developing severe COVID-19, online learning should be considered for siblings as well to reduce the risk of household transmission. Should this occur, you should seek guidance from your transplant team.

What can be done to reduce the risk of getting or transmitting viral infections at home?

Protecting vulnerable persons from respiratory infections means preventing respiratory infections in the people they live with and come in contact with. To reduce the chances of transmission of infection to the vulnerable child, family members and close household contacts should:

- maintain excellent hand hygiene
- maintain appropriate cough/sneeze etiquette
- avoid sharing of food and drinks (use separate dishes and cutlery for individuals)
- get all their recommended immunizations (including the seasonal influenza vaccine)
- symptomatic members of the family/household should seek COVID-19 testing and public health guidance as soon as possible, and might need to consider self-isolating from other family members.

What can be done to reduce the risk of getting or transmitting viral infections when at school?

Parents should actively seek specific information about their schools plan to limit the risk of infection during school hours.

In general, school strategies may include:

- Screening to exclude individuals who are ill
- Physical distancing in the classroom, lunch area or any other enclosed room
- Regular hand washing throughout the day
- Use of a non-medical mask in accordance with [Health Canada guidance](#)

Your school should provide you with the specific measures that will be used to reduce risk in your child's classroom. You can get additional information from the Government of Canada website by following this link: [Government of Canada: COVID-19 guidance for schools Kindergarten to Grade 12](#)

Parents are also encouraged to provide their children with disinfectant wipes so they can frequently clean their desk, chair, stationery, and locker.

We strongly recommend that all children should receive the influenza vaccine, unless there is a contraindication. We strongly encourage all those eligible, to get the COVID-19 vaccine when it becomes available.

A great way to teach children about safe practice behaviors is to have parents and older siblings show by example. Children will learn how to maintain physical distancing, wear a face mask, perform frequent hand washing and practice good cough/sneeze etiquette. The goal is for these routine measures to become their new 'normal'.

What should we do if there is a confirmed COVID-19 case in my child's school or in their class?

Your school and Public Health will provide you with guidance on what to do. If they determine that your child was exposed to a COVID-19 case at school, it is likely that COVID-19 testing and/or self-isolation will be advised. They will also tell you what the other family members or household contacts should do.

What should I do if my child was exposed to someone with COVID-19?

- Do not send them to school
- Find out how to get your child tested for COVID-19 in your local community
- Contact your doctor or public health unit to alert them of the exposure and discuss next steps. With the guidance of public health, you/your child may have to stay home and self-isolate for 14 days after the last contact with the person with COVID-19
- Watch for symptoms - should symptoms develop, contact your transplant team

What should I do if my child develops symptoms that could be due to COVID-19?

- ***Do not send them to school – stay home and self-isolate***
- Find out how to get your child tested in your local community
- Contact public health to discuss next steps
- Contact your transplant team to determine if your child should be assessed further

What should I do if someone in family/home is sick?

- Isolate the sick person away from other household members as much as possible
- Ideally, the sick person should also use a different bathroom. If this is not possible, ensure that the bathroom is cleaned/disinfected frequently
- Avoid sharing a bed/bedroom with the sick person
- The sick person should not prepare food, and should avoid eating with others
- Contact public health for further guidance and whether the sick person should be tested for COVID-19

Is the COVID-19 vaccine available to children who have a solid organ transplant? Should my child get it once available?

Currently, the COVID-19 vaccines approved for use in Canada have been approved only for those older than 16 years. While not yet tested on either adult or paediatric transplant recipients, many transplant groups around the world are advocating for and are hopeful that approvals for these groups will be coming soon. When approved, we will strongly encourage all eligible people to get the vaccine, including household contacts of the child with a transplant. Even after getting the vaccine it will be important to continue all the social distancing, hand hygiene, masking etc. described above as the virus will still be circulating in the community for many months.

See: [Canadian Society of Transplantation National Transplant Consensus Guidance on COVID-19 Vaccine \(Dec 18, 2020\)](#)

What should I do if my child is having trouble coping with being out of school or returning to school during the pandemic?

It is normal for unusual situations, such as the COVID-19 pandemic, to cause worry and anxiety in children and adults. The pandemic has increased isolation from friends and family, which may increase stress. Having a chronic medical condition may further increase the worry and anxiety.

It is important to talk to your children about their worries in words appropriate for their age. It is also important for parents to talk to friends, family and their health care team when they are concerned about their child's health in this unusual situation.

Helpful resources for tips on how to talk to children and youths:

[Canadian Paediatric Society: How to help youth tackle the blues during COVID-19](#)

[British Psychological Society: Talking to children about Coronavirus](#)

Useful links with up-to-date information:

[Government of Canada COVID-19 information](#)

[Government of Canada: COVID-19 guidance for schools Kindergarten to Grade 12](#)

[Canadian Paediatric Society statement on safe return to school for Canadian children](#)

[Canadian Paediatric Society Information – COVID-19 and your child](#)

[Canadian Society of Transplantation COVID-19 information](#)

[American Society of Transplantation COVID-19 information](#)

[American Society of Transplantation FAQs regarding return to school for children after solid organ transplant in the US during the COVID-19 pandemic](#)

[Pediatric Heart Transplant Society: COVID-19](#)

[Canadian Society of Transplantation National Transplant Consensus Guidance on COVID-19 Vaccine \(Dec 18, 2020\)](#)

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