



# Have you passed the COVID-19 Health Screen?

1. Do you or your child have one or more of the COVID-19 symptoms below? Yes  No

- fever and/or chills
- cough or barking cough (croup)
- shortness of breath
- sore throat
- difficulty swallowing
- decrease or loss of smell or taste
- runny or stuffy/congested nose
- headache
- nausea/vomiting, diarrhea
- muscle aches
- extreme tiredness
- pink eye (for adults)
- stomach pain (for adults)
- falling down often (for older adults)

2. Has a doctor, health care provider, or public health unit told you that you should currently be isolating (staying at home)? Yes  No

3. Have you been identified as a “close contact” of someone who currently has COVID-19 in the last 14 days? Yes  No

4. Have you received a COVID Alert exposure notification on your cell phone in the last 14 days (and have not been tested or waiting for your result)? Yes  No

5. Have you or anyone you live with travelled outside of Canada in the last 14 days? Yes  No

\*Not applicable if you or anyone you live with are exempted from federal quarantine as per the *Quarantine Act*. Is anyone you live with currently experiencing any new COVID-19 symptoms and/or waiting for test results after experiencing symptoms?

If you answer **YES** to any one of the questions above, **PLEASE DO NOT** enter this location **AND** contact either your health care provider or the Durham Public Health Connection Line (905-668-2020) to get advice or an assessment, including if you need a COVID-19 test.

