



Self-screening Checklist

- Do you have a fever (temperature over 100.4 F or 38 C) without having taken any fever-reducing medications?

- Do you have a loss of smell or taste?

- Do you have a cough?

- Do you have muscle aches?

- Do you have a sore throat?

- Do you have shortness of breath?

- Do you have chills?

- Do you have a headache?

- Have you experienced nausea, vomiting, diarrhea, or loss of appetite?

- Have you, or anyone you have been in close contact with, been diagnosed with Covid-19 or placed in quarantine for possible exposure to Covid-19?

- Have you been asked to self-isolate or quarantine by a medical professional or a local public health official?

If you reply **YES** to any of the questions in the checklist, please stay home.