

# Infection Screening Questions

All patients and staff entering the building

In the last 30 days, have you or anyone in your immediate family traveled outside of the USA or been on a cruise?

We will need to reschedule or do visit through a televisit.

In the last two (2) weeks, have you or anyone in your immediate family traveled to areas within the USA with a high rate of infection with COVID-19?

New York, Louisiana, Florida, California or other.

Have you been in close contact with anyone with a laboratory-confirmed case or suspected infection with:

1. Coronavirus COVID-19
2. MERS (Middle East Respiratory Syndrome)
3. SARS (Severe Acute Respiratory Syndrome)
4. If yes, see above (same answer)

Have you been in close contact with OR do you or anyone in your home have any of the following symptoms?

1. Fever
2. Shortness of breath
3. Cough
4. Nasal congestion
5. Runny nose
6. Sore throat
7. Nausea or vomiting
8. Diarrhea
9. New onset headache
10. New onset loss of smell or taste