

# COVID-19 SAFETY

## ADULT SCREENING QUESTIONNAIRE

<b>1</b>	Does the attendee have any new onset (or worsening) of any of the following symptoms:	<b>CIRCLE ONE</b>
	Fever**	YES NO
	Cough**	YES NO
	Shortness of Breath / Difficulty Breathing**	YES NO
	Runny Nose**	YES NO
	Sore throat**	YES NO
	Chills	YES NO
	Painful swallowing	YES NO
	Nasal Congestion	YES NO
	Feeling unwell / Fatigued	YES NO
	Nausea / Vomiting / Diarrhea	YES NO
	Unexplained loss of appetite	YES NO
	Loss of sense of taste or smell	YES NO
	Muscle / Joint aches	YES NO
	Headache	YES NO
	Conjunctivitis (commonly known as pink eye)	YES NO
<b>2</b>	Has the attendee travelled outside Canada in the last 14 days? (Individuals are legally required to quarantine for 14 days when entering or returning to Alberta from outside Canada unless exempted by the Alberta COVID-19 Border Testing Pilot Program.)	YES NO
<b>3</b>	Has the attendee had close contact* with a confirmed case of COVID-19 in the last 14 days?	YES NO

If you have answered **YES** to any of the above questions, please **DO NOT** enter the school at this time. You should stay home and use the [AHS COVID-19 Self-Assessment Tool](#) to determine whether you need to be tested for COVID-19.

**\*\* Individuals with fever, cough, shortness of breath, runny nose, or sore throat, are required to isolate for 10 days per [CMOH Order 05-2020](#) or they receive a negative COVID-19 test and feel better before returning to activities.**

Use the [AHS Online Assessment Tool](#) to determine if testing is recommended and follow information on [isolation requirements](#).

\* Face-to-face contact within 2 metres. A health care worker in a occupational setting wearing the recommended personal protective equipment is not considered to be a close contact.

The screening questionnaire is subject to change as needed.



## PLEASE HELP PROTECT YOUR COMMUNITY