



**COVID-19 SCREENING TOOL (3.18.20)**

Use this screening tool to evaluate for cough, respiratory symptoms, fever, sore throat, and travel.

**ASSESSMENT QUESTIONS:**

1. Have you recently developed a cough or other respiratory symptoms (e.g., cough or shortness of breath)?
2. Has there been a recent onset of fever (100.0° F or higher) or a sore throat?
3. Have you travelled internationally or to a location with a community outbreak of COVID-19 in the past 30days? If Yes; where to and when? (Document travel location and date).

Only if assessment questions #1 and/or #2 responses are “**Yes**” follow the directions below:  
(Assessment indicates a new onset fever or symptoms of lower respiratory illness)



**Ask:** In the past **14days** since the first onset of symptoms have you had a history of **EITHER:**

Travel to  
Any location with sustained community transmission (click on the link)  
<https://www.cdc.gov/coronavirus/2019-ncov/travelers/after-travel-precautions.html>  
China  
Iran  
South Korea  
Europe  
United Kingdom and Ireland:



Contact with a person known to have confirmed COVID-19 or under investigation for COVID-19.  
  
Reside in a community where community-based spread of COVID-19 is occurring.

If **EITHER** of these are answered “**Yes**” follow directions below:  
(Assessment indicates both exposure and illness are present)



**ACTION TO TAKE: CLIENTS**

Contact your manager  
Contact client’s physician  
Recommend **quarantine** on **home isolation** resulting from direction from your manager and the provider.

**ACTION TO TAKE: EMPLOYEES:**

Report symptoms to your supervisor  
Contact your health care provider  
Obtain a physician's statement stating that there is no health exposure risk before returning to work