

COVID-19 Protocol Questions

1

Have you or someone that lives in your household had any travel in a communal transportation vehicle - plane, train or cruise ship - within the past 14 days?

2

Have you had any signs or symptoms of a respiratory infection, such as a fever, cough, shortness of breath, sore throat, chills, muscle pain, or loss of taste?

3

In the last 14 days have you had contact with someone with a confirmed diagnosis of COVID-19, or who is under assessment for COVID-19, or has been ill with respiratory illness?

4

Do you consider yourself as being in the high-risk category for COVID-19 as defined by the CDC?

- Older adult 65+
- Have a serious chronic medical condition, or a chronic organ disease (heart, lung, liver, kidney), diabetes, or other immunocompromised disease
- Receiving treatments that compromise your immune system
- Are pregnant