

## **Coronavirus Screening Questions**

**1. Have you traveled to any of these locations in the last 30 days?**

- China
- Iran
- South Korea
- Europe
- Japan
- UK

**2. Have you been in contact with someone who has traveled to these countries and is now sick?**

**3. Have you recently traveled to an area with known local spread of COVID-19?**

**4. Have you had contact with anyone with confirmed COVID-19 in the last 14 days?**

**5. Have you had any of these symptoms in the last 14 days?**

- Fever greater than 100
- Difficulty breathing
- Cough
- Sore throat
- Runny nose

**6. Are you currently experiencing fever over 100, difficulty breathing or cough?**

**7. Are you a first responder, healthcare worker, or employee or attendee of a child or adult care facility?**