



COVID-19 Screening

Q1: Have you had travelled outside of Canada in the past 14 days?

Q2: Have you tested positive for COVID-19 or had close contact with a confirmed case of COVID-19 without wearing appropriate PPE?

Q3: Do you have any of the following symptoms?

- Fever
- New onset of cough
- Worsening chronic cough
- Shortness of breath
- Difficulty breathing
- Sore throat
- Difficulty swallowing
- Decrease or loss of sense of taste or smell
- Chills
- Headaches
- Unexplained fatigue/malaise/muscle aches (myalgias)
- Nausea/vomiting, diarrhea, abdominal pain
- Pink eye (conjunctivitis)
- Runny nose/nasal congestion without other known cause

Q4: If you are 70 years or older, are you experiencing any of the following symptoms: delirium, unexplained or increased number of falls, acute functional decline, or worsening chronic conditions?

If you answered YES to ANY of the above questions:

- **Do not enter this office** for at least 14 days;
- get tested for COVID-19;
- complete the Ontario Government's self-assessment; and
- contact an appropriate authority such as your family physician, local medical officer of health or Telehealth Ontario (1-866-797-0000)