



COVID-19 SCREENING QUESTIONNAIRE

- Do you have a confirmed case of COVID-19 or had close contact with a confirmed case of COVID-19?
- Are you or a member of your household awaiting test results after experiencing symptoms?
- Has a healthcare provider told you that you should currently be isolating?
- Have you travelled outside of Ontario in the past 14 days AND been advised to quarantine (per federal quarantine requirements)?

Are you experiencing any of the following symptoms:

- Fever and/or chills? (a temperature of 37.8 deg C or higher)
- Cough that is new or worsening? (continuous, more than usual)
- Barking cough, making a whistling noise when breathing (croup)?
- Shortness of breath?
- Decrease or loss in sense of taste and/or smell?
- For adults >18 years:** Fatigue, lethargy, malaise (feeling unwell)?
- For children <18 years:** nausea, vomiting, diarrhea?

If YES to any of the above please contact us to cancel your appointment.
It is encouraged you also contact your primary health care provider or
Telehealth Ontario (1-866-797-0000) to determine next steps.