COVID-19 Screening Questions

patient experiencing ny fever

OR

espiratory symptoms: ough, shortness of reath? 2)

density?

Has patient traveled in the last 14 days?
-International Travel or been on a cruise ship

OR

-States in the US with high

Has patient been in close contact (within 6 feet) with someone who is suspected of or has tested positive for Covid-19 including health care worker for Covid-19? 3)

Is the symptomatic individual an o adult (age ≥ 60 years) and/or with medical conditions and/or an immunocompromised state that m them at higher risk for poor outcor - (e.g., diabetes, heart disease, recimmunosuppressive medications, or the symptom of the symp

lung disease, chronic kidney diseas pregnancy) REQUIRES CLINICAL JUDGEME

OR Special populations:

- HCW (regardless of exposure of use)/First Responders
- use)/First Responders
 Resident/worker in congregate (senior living, long term care fa
 - shelter, jail, group home, not s Frequent health care contact (dialysis, chemo, including thei frequent caregivers)

For ED/Acute Care: The patient has a severe rapidly progressive respiratory illness of unknown etiology. Warm Handoff to ED required.