

**CYHA**



## COVID-19 SYMPTOM SCREENING QUESTIONS

Fever (100.4°F or higher) or Feeling feverish?	Yes / No
Chills?	Yes / No
A new cough?	Yes / No
Shortness of breath?	Yes / No
A new sore throat?	Yes / No
New muscle aches?	Yes / No
New headache?	Yes / No
New loss of smell or taste?	Yes / No