



Employee:

Date:

Department:

Person Performing the Screening:

1. **Symptoms:** Is employee experiencing or showing any symptoms in the last 24h?
 - a. Fever (**100.4°F (38°C)** or higher if measured using contactless thermometer)
 - b. Chills/Repeated shaking with chills
 - c. Cough
 - d. Shortness of Breath (Test by taking a quick deep breath through your mouth)
 - e. Chest Pain
 - f. Out of the ordinary tiredness
 - g. Bluish lips or face
 - h. Muscle pain
 - i. Runny nose/Nasal congestion (Test by taking a quick deep breath through your nose)
 - j. Sore throat
 - k. Headache
 - l. Lost sense of smell or taste
 - m. Gastrointestinal problems (diarrhea)

2. **Exposure:** Has employ had Close Contact with a person that potentially has COVID-19?
 - a. A person that has symptoms compatible with COVID-19? Exposure would also be considered close contact within 48h before they developed compatible symptoms.
 - b. A person that tested positive for COVID-19? Exposure would also be considered close contact within 48h before they tested positive.
 - c. A person that was tested for COVID-19?

Close Contact:

- *Household member. Includes mother, father, husband, wife, children, cousins, roommates etc. Anyone who is in your household.*
- *Intimate partner.*
- *Individual providing care in a household without using recommended infection control precautions.*
- *Individual who was directly coughed on.*
- *Individual who spent 15 minutes or more within 6 feet or less of the positive individual that did not wear a facemask to block respiratory secretions from contaminating others and the environment.*

Employee allowed to return after approved by the local health provider/Department of Health or after employee has:

- *NO fever for 72h (without the use of medications).*
- *NO other symptom when returning to work.*
- *7 days or more have passed since the symptoms first began.*

Company: Six Friends Cabernet LLC and Six Friends Cabernet (DBA)

Department:

Employee:																															
Date: May 2020	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
Screener Initials																															
Present/Absent																															
Fever ($\geq 100.4^{\circ}\text{F}$)																															
Chills																															
Cough																															
Shortness of Breath																															
Chest Pain																															
Tiredness																															
Bluish lips/face																															
Muscle pain																															
Runny nose																															
Sore throat																															
Headache																															
Lost smell/taste																															
Gastrointestinal Problems																															
Exposure:																															

Comments: _____

*******EXAMPLE*********EXAMPLE*********EXAMPLE*******

Department:

Employee: Joe Smith																																				
Date: May 2020	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31					
Screener Initials	FC	FC	LL	LL	FC	FC	FC	FC	FC	FC	FC	FC	FC	FC	FC	LL	LL	LL	LL	TZ	FC	FC	FC	FC	FC											
Present/Absent	P	A	A	P	P	P	P	P	P	P	A	P	A	A	A	A	A	A	A	A	P	P	P	P	P											
Fever (≥100.4°F)	-			-	-	-	-	X	-	-		X	X								-	-	-	-	-											
Chills	-			-	-	-	-	-	-	-		-									-	-	-	-	-											
Cough	-			X	-	-	-	-	-	-		-	X								-	-	-	-	-											
Shortness of Breath	-			-	-	-	-	-	-	-		-	Not allowed until May 19 th ; call May 19										-	-	-	-	-									
Chest Pain	-			-	-	-	-	-	-	-		-									-	-	-	-	-											
Tiredness	-			-	-	-	-	-	-	-		X									-	-	-	-	-											
Bluish lips/face	-			-	-	-	-	-	-	-		-									-	-	-	-	-											
Muscle pain	-			-	-	-	-	-	-	-		-									X	-	-	-	-	-										
Runny nose	-			-	-	-	-	-	-	-		-									-	-	-	-	-											
Sore throat	-			-	-	-	-	-	-	-		-	X								-	-	-	-	-											
Headache	-			-	-	-	-	-	-	-		-	X								-	-	-	-	-											
Lost smell/taste	-			-	-	-	-	-	-	-		-									X	-	-	-	-	-										
Gastrointestinal Problems	-			-	-	-	-	-	-	-		-									-	-	-	-	-											
Exposure:	-			-	-	-	-	-	-	-		-									-	-	-	-	-											

Comments: **May 4th**: Slight cough; says it started when he stopped smoking two weeks ago; allowed to work./ **May 8th**: First temperature check 100.8°F; says he was running to be on time, Second temperature check 99.5°F; allowed to work/ **May 12th**: Fever 101.5°F; able to bread but appears to be low on energy; sent home asked to call the doctor/ **May 13th**: Ted reported seeing a doctor (fever 101.8°F, asked to stay home, swab taken for testing), also developed sore throat, cough and headache / **May 14th**: Ted reported the test came back positive; asked to stay home and call back on May 19th / **May 19th** Ted reports the body temperature is back to normal, stopped taking Tylenol three days ago, some muscle ache still present; Ted talked to his doctor in the morning (allowed to go back to work when he feels he is ready); LL asked him to stay home until the muscle ache resolves and the Department of Health approves him coming back. / **May 20th**: Approved to come back to work on May 21st by the Department of Health. / **May 21st**: No symptoms; reports low appetite; allowed to work.