## **GOOD MEN GOOD CITIZENS**

## **DAILY COVID-19 SCREENING**

- Y / N 1. A new fever (100.4) or higher or a sense of having a fever?
- Y/N 2. A new cough that cannot be attributed to another health condition?
- Y / N 3. New shortness of breath or difficulty breathing that cannot be attributed to another health condition?
- Y / N 4. New chills that cannot be attributed to another health condition?
- Y / N 5. A new sore throat that cannot be attributed to another health condition?
- Y / N 6. New muscle aches (myalgia) that cannot be attributed to another health condition or specific activity (such as physical exercise)?
- Y / N 7. A new loss of taste or smell?
- Y / N 8. Close contact (within 6 feet for 15 minutes or more) with someone in the past 14 days with suspected or confirmed COVID-19?

IF YOU ANSWERED "YES" TO ANY OF THE ABOVE, STAY IN YOUR ROOM AND CALL THE HEALTH CENTER (434-223-6167) FOR FURTHER INSTRUCTIONS. IF IN DISTRESS CALL 911

## When to Seek Emergency Medical Attention

Look for **emergency warning signs\*** for COVID-19. If someone is showing any of these signs, **seek emergency medical care immediately:** 

- Trouble breathing
- Persistent pain or pressure in the chest
- New confusion
- Inability to wake or stay awake
- Bluish lips or face

**Call 911 or call ahead to your local emergency facility:** Notify the operator that you are seeking care for someone who has or may have COVID-19.

<sup>\*</sup>This list is not all possible symptoms. Please call your medical provider for any other symptoms that are severe or concerning to you.