COVID-19 INFORMATION

COVID-19 CONTINUING CARE DAILY CHECKLIST Visitors

Overview

This tool was developed to support continuing care sites and reduce the risk of transmission of COVID-19. **Visitors** are required to complete this checklist before entering the continuing care site. Children may need a parent or guardian to assist them to complete this screening tool.

Any person who is a confirmed case of COVID-19, or has been tested for COVID-19 and is awaiting the results, must not enter the site and must follow isolation requirements as per <u>current CMOH Orders</u>.

1.	Have you traveled outside Canada in the last 14 days <u>AND</u> have you been directed to quarantine?	YES	NO
If yo	u answered "YES":		
-	Do not enter the site unless you have been authorized for an exemption from quarantine.		
• F	Please see the Government of Canada Travel, Testing, Quarantine and Borders for more inf	ormatior	า
	egarding quarantine requirements,		
lf yo	ou answered "NO", proceed to question 2.		
-			
2.	Have you had any known close contact with a confirmed case of COVID-	YES	NO
	19 in the last 10 days?		
	Close Contact - means a person who: without the consistent and appropriate use of		
	personal protective equipment, provides care to, lives with, or has close physical		
	contact with, a person who is a confirmed case of COVID-19; or has come into contact		
	with the infectious body fluids of a person who is a confirmed case of COVID-19.		
	Confirmed case- means a person who has had a positive result on a COVID-19 test		
	that confirms the person is infected with COVID-19. Tests can be rapid antigen tests or molecular tests.		
lf vo	u answered "YES":		
	Do not enter the site for 10 days from the last day of exposure, regardless of your immunizat	ion statu	IC
• -	of the enter the site for the days from the last day of exposure, regardless of your infindinzat	ion statu	13.
lf vo	ou answered "NO", proceed to question 3.		

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•		YES	NC
	Cough	YES	NC
	Shortness of breath	YES	NC
•	Runny nose	YES	NC
•	Sore throat	YES	NC
•	Chills	YES	NC
•	Painful swallowing	YES	NC
•	Nasal congestion	YES	N
•	Feeling unwell / fatigued	YES	NC
•	Nausea / vomiting / diarrhea	YES	N
•	Unexplained loss of appetite	YES	NC
•	Loss of sense of taste or smell	YES	N
•	Muscle / joint aches	YES	NC
•	Headache	YES	N
•	Conjunctivitis (commonly known as pink eye)	YES	N
isolation <u>DULTS:</u> If ste/smell, If you ar whichev required of other	you have fever , cough , shortness of breath , runny nose , sore throat or loss , you are required to isolate as per the current <u>CMOH Order</u> : re fully immunized ¹ , you must isolate for 5 days from the onset of symptoms or user is longer. After this isolation period, up to a total of 10 days past symptom onset to wear a mask when you are outside of the home, in a public place or otherwise persons out of your household, with no exceptions; OR	of sense of ntil they re t, you are in the com	of esol
isolation DULTS: If ste/smell, If you ar whichev required of other If you ar resolve ² Whethe	you have fever , cough , shortness of breath , runny nose , sore throat or loss , you are required to isolate as per the current <u>CMOH Order</u> : re fully immunized ¹ , you must isolate for 5 days from the onset of symptoms or use re is longer. After this isolation period, up to a total of 10 days past symptom onset to wear a mask when you are outside of the home, in a public place or otherwise persons out of your household, with no exceptions; OR re NOT fully immunized ¹ , you must isolate for 10 days from the onset of symptor whichever is longer. r you are fully immunized or not, even if you have a negative molecular (e.g. PCR	of sense of ntil they re t, you are in the com ns or until) COVID-	of esolv npar they 19 te
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isolation <u>OULTS:</u> If ste/smell , If you ar whichev required of other If you ar resolve ² Whether or two n symptor <u>HILDREN:</u> quired to is If you ar whichev required of other	you have fever , cough , shortness of breath , runny nose , sore throat or loss , you are required to isolate as per the current <u>CMOH Order</u> : re fully immunized ¹ , you must isolate for 5 days from the onset of symptoms or use the ver is longer. After this isolation period, up to a total of 10 days past symptom onset to wear a mask when you are outside of the home, in a public place or otherwise persons out of your household, with no exceptions; OR re NOT fully immunized ¹ , you must isolate for 10 days from the onset of sympton whichever is longer. r you are fully immunized or not, even if you have a negative molecular (e.g. PCR legative rapid antigen tests, taken not less than 24 hours of each other, you still m ns resolve ³ .	of sense of ntil they re t, you are in the com ns or until) COVID- ust isolate I, you are ntil they re t, you are in the com	of essolv npan they 19 te e unt essolv

¹ A fully immunized person who has received the complete vaccine series for COVID-19 and it has been 14 days after the second dose in a two dose series or one dose in a one dose series (e.g. Janssen). If you do not meet this criteria, you are considered NOT fully immunized.

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² Symptoms resolved means symptoms have improved and with no fever for 24 hours without the use of fever reducing medication