



COVID-19: SCREENING CHECKLIST FOR VISITORS AND EMPLOYEES

ALL visitors and employees entering the building must be asked the following questions:

On March 27, the Fresno County of Fresno Health Officer issued an [order](#) requiring businesses to conduct workplace screenings to exclude those with febrile respiratory illness.

1. YES or NO, since your last day of work, or since your last visit to this facility, have you experienced any of the following*:

YES / NO Fever (100.4 F or higher), a sense of having a fever, or chills?

YES / NO Cough, sore throat, runny nose not from an existing health condition?

YES / NO Shortness of breath you cannot attribute to another health condition?

YES / NO Excessive fatigue you cannot attribute to another health condition?

YES / NO You had close, unprotected contact with a suspected or known COVID-19 patient (spent longer than 15 minutes within 6 feet of someone who was sick with a fever and cough)?

*** If a visitor answers YES to any of the questions do not allow them to enter the facility.**

*** If an employee answers YES to any of the questions:**

- Do not allow them to enter the facility;
- Instruct them to go home;
- Inform them they will need to use annual leave;
- Inform them before returning they must be symptom free for 72 hours without the use of fever-reducing medications AND have improvement in respiratory symptoms AND, at least 7 days must have passed since symptoms FIRST appeared;
- Instruct them to speak with their supervisor before returning to work; and
- Ensure information about employees sent home is updated in the COVID-19 Roster.

*** If the visitor or employee answers NO to all the questions remind them to:**

- Wash their hands or use alcohol-based hand rub.
- Maintain social distancing of 6 feet.
- Should they feel any of these symptoms during the day they are to leave work immediately and contact their employer through appropriate channels.

Date _____ Name(Print): _____ Signature: _____