

# COVID-19 Screening Questions



## Symptom and exposure screening questions (check all that apply)

A. Do you have a new onset, or worsening, of any ONE of the following symptoms?		Yes	No
<input type="checkbox"/>	• Fever > 38°C or subjective fever/ chills		
<input type="checkbox"/>	• Cough		
<input type="checkbox"/>	• Sore throat/ hoarse voice		
<input type="checkbox"/>	• Shortness of breath/ breathing difficulties		
<input type="checkbox"/>	• Loss of taste or smell		
<input type="checkbox"/>	• Vomiting or diarrhea for more than 24 hours		
<b>If "yes" to any one of the above, DO NOT ENTER</b>			
B. Do you have a new onset, or worsening, of any TWO of the following symptoms?		Yes	No
<input type="checkbox"/>	• Runny nose		
<input type="checkbox"/>	• Muscle aches		
<input type="checkbox"/>	• Fatigue		
<input type="checkbox"/>	• Conjunctivitis (pink eye)		
<input type="checkbox"/>	• Headache		
<input type="checkbox"/>	• Skin rash of unknown cause		
<input type="checkbox"/>	• Nausea or loss of appetite		
<input type="checkbox"/>	• Poor feeding (if an infant)		
<b>If "yes" to any two of the above, DO NOT ENTER *</b>			
<p>* If you have only one symptom in section B and it has been less than 24 hours since it started, stay home and avoid contact with others. Re-evaluate after 24 hours, and use the on-line COVID-19 Screening Tool. <a href="https://sharedhealthmb.ca/covid19/screening-tool/">https://sharedhealthmb.ca/covid19/screening-tool/</a>.</p>			
Exposure history		Yes	No
1.	Have you, or a member of your household, been in close contact (within 2 meters/ 6 feet for more than 10 minutes) in the last 14 days with a confirmed COVID-19 case?		
2.	Have you been exposed to COVID-19 in a work or public setting?		
3.	Have you, or a member of your household, travelled outside of Canada or within Canada in the past 14 days? **		
4.	Is a member of your household sick with COVID-19 symptoms, and waiting for COVID-19 test results? ***		
5.	Are you, or a member of your household, waiting for COVID-19 testing results? ***		
<b>If "yes" to any of the above, DO NOT ENTER. Take the online screening tool <a href="https://sharedhealthmb.ca/covid19/screening-tool/">https://sharedhealthmb.ca/covid19/screening-tool/</a></b>			

\*\* Essential workers, such as those involved with transportation, are exempt from self-isolation (quarantine) orders, provided that they have no symptoms.

\*\*\* Exemptions are in place for asymptomatic household members if they are an essential worker required to wear medical grade PPE while at work, such as health care workers and first responders.

If the checklist advises you Not to Enter: stay home, isolate and refer to the **online COVID-19 Screening Tool** at <https://sharedhealthmb.ca/covid19/screening-tool/> or call Health Links – Info Santé at 204-788-8200 or toll free at 1-888-315-9257 for further guidance.

Up to date information on COVID-19 can be found at: [www.manitoba.ca/covid19/index.html](http://www.manitoba.ca/covid19/index.html)