



Screening Questionnaire

GENERAL QUERIES

1. Do you have a fever (38° C / 100.4° F and above) or have you experienced chills or general discomfort in the last few hours?
2. Have you travelled outside of Canada in the last month?
3. Have you been in contact with a person who has travelled outside Canada in the last month?

If the person answers YES to any of the above questions, refuse access and return the person to his or her home.

SPECIAL QUESTIONS RELATED TO COVID-19

4. Have you had a cough in the last 14 days?
5. Have you had any breathing difficulties in the last 14 days?
6. Have you experienced abnormal extreme fatigue in the last 14 days?
7. Have you had a sudden loss of sense of smell without nasal congestion in the last 14 days?

If the person answers YES to any of the above questions, refuse access and return the person to his or her home.