COVID-19 INFORMATION

COVID-19 CONTINUING CARE DAILY SYMPTOM CHECKLIST Residents

Overview

This tool was developed to support continuing care sites and reduce the risk of transmission of COVID-19.

Residents are required to complete this checklist daily for 14 days:

- 1. Post-return from an absence of more than 24 hours; or
- 2. Post-exposure if they are an <u>asymptomatic</u>, fully immunized¹ close contact² of a confirmed case of COVID-19.

Any person who is a confirmed case of COVID-19 must follow isolation requirements as per CMOH Order 02-2022.

1.	Do you have any new onset (or worsening) of the following symptoms:		
	• Fever	YES	NO
	Cough	YES	NO
	Shortness of breath	YES	NO
	Runny nose	YES	NO
	Sore throat	YES	NO
	Chills	YES	NO
	Painful swallowing	YES	NO
	Nasal congestion	YES	NO
	Feeling unwell / fatigued	YES	NO
	 Nausea / vomiting / diarrhea 	YES	NO
	Unexplained loss of appetite	YES	NO
	 Loss of sense of taste or smell 	YES	NO
	Muscle / joint aches	YES	NO
	Headache	YES	NO
	 Conjunctivitis (commonly known as pink eye) 	YES	NO

If you answered "YES" to any symptom in question 3:

Stay in your room, notify your operator contact and arrange testing.

If you answered "NO":

 Continue to wear a well fitted surgical/procedure mask while outside your room, except when eating and drinking, for 14 days post-return from an absence greater than 24 hours or post-exposure to COVID-19.

Albertan

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.

² 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.