

# COVID-19 Screening Checklist for Employers

Name: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

*Purpose: Based on the Febrile Respiratory Illness Health Order that took effect on 03/26/2020, all employers, on a daily basis, are to screen all employees for signs of respiratory illness accompanied by fever.*

**Instructions: ALL employees and government officials entering the building must be asked the following below. Please maintain this record for 14 days from completion of this form and have this form available upon request from the Public Health Department.**

**1. Have you washed your hands or used alcohol-based hand sanitizer on entry?**

YES  NO – Ask them to do so.

**2. Do you have any of the following respiratory symptoms?**

Fever  New or worsening cough  New or worsening shortness of breath

- If YES to any, restrict them from entering the building and send person home.\*
- If NO to all, proceed to remaining questions

**3. Employee's temperature: \_\_\_\_\_°F. If you do not have a thermometer to take their temperature, go to step #3B.**

**3A. Does the employee have a fever (temperature 100.4°F or greater)  YES  NO**

- If YES to any, restrict them from entering the building and send person home.\*
- If NO, proceed to question #3C.

**3B. Ask the employee the following:**

1. Are you feeling feverish?  YES  NO

2. Are you having chills?  YES  NO

- If YES to any, restrict them from entering the building and send person home.\*
- If NO, proceed to question 3C.

**3C. Ask the employee the following:**

1. Have you worked in facilities with confirmed COVID-19 cases?  YES  NO

- If YES, ask question #2 below.
- If NO, proceed to step #4.

2. Have you worked with persons with confirmed COVID-19 by lab test?  YES  NO

- If YES to any, restrict them from entering the building and send person home.\*
- If NO, proceed to step #4.

**4. Allow entry to building and remind individual to:**

- Wash their hands or use alcohol-based hand sanitizer throughout their time in the building.
- Not to shake hands with, touch, or hug others during their time in the building.

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**\* The person being sent home, must inform their supervisor and/or Human Resources that they were sent home and is responsible for following-up with their primary care physician if needed.**

Person Performing Screening: \_\_\_\_\_