Covid-19 Daily Self-Screening Questions

☐ Do you have a **fever** (temperature over 100.4°F or 38°C) without having taken any fever-reducing medications?

☐ Have you experienced new onset of any **gastrointestinal symptoms** such as nausea, vomiting, diarrhea, or loss of appetite in the last few days?

☐ Do you have a **loss of smell or taste**?

☐ Have you, or anyone you have been in close contact with, been **diagnosed with Covid-19 or placed in quarantine** for possible exposure to Covid-19 within the last two weeks?

☐ Do you have a **cough**?

☐ Have you been **asked to self-isolate or quarantine** by a medical professional or a local public health official within the last two weeks?

☐ Do you have **muscle aches**?

☐ Do you have a **sore throat**?

☐ Do you have **shortness of breath**?

☐ Do you have **chills**?

☐ Do you have a new or unusual **headache**?

☐ Have you been **asked to self-isolate or quarantine** by a medical professional or a local public health official within the last two weeks?

**If you reply YES to any of the questions on the checklist, stay home.**

If you begin to feel ill while at work, you should immediately go home. If possible, avoid all public transportation, ridesharing, or taxis.

See the “If You Get Sick” section at [health.gatech.edu/campus-guidelines](http://health.gatech.edu/campus-guidelines) for more information on the steps you should take. You will be expected to leave campus and self-isolate until all appropriate criteria for your return are met.