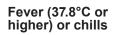
## COVID-19 Screening Tool

Any individual attending child care should review the following checklist each day. Parents should review on behalf of their child.

For an online version, visit covid-19.ontario.ca/school-screening

## Do you have any of the following:





Runny, congested or stuffy nose\*



Nausea, vomiting,

diarrhea, stomach pain\*

Yes No Cough that is new or worsening, or barking cough\*

**Decrease or loss** 

of taste or smell\*

Extreme tiredness

that is unusual\*

Yes

No

Yes

No

Yes

No

Shortness of breath, making whistling noise while breathing\*



Pink eye\*



Sluggishness or lack of appetite

0	Yes
$(\cdot)$	No

Sore throat or difficulty swallowing\*



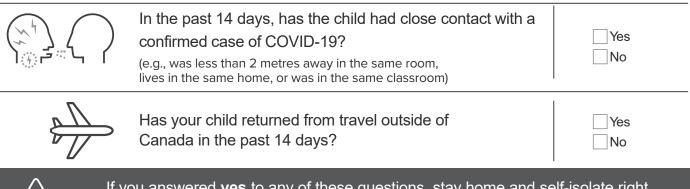
Headaches or muscle aches that are unusual or long lasting\*



Falling down often (for older people)



\*Not related to other known causes or conditions (for example, a runny nose that is not related to allergies, being outside in cold weather, etc.)





If you answered **yes** to any of these questions, stay home and self-isolate right away. Please refer to the **My Child Did Not Pass the COVID-19 Screening** Tool. Call your health care provider or contact a COVID-19 assessment centre.

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2020-09-21

