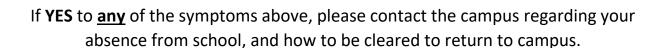
## **PNGISD & TEA**

## **Staff and Student Self-Screening Checklist**

In evaluating whether an individual has symptoms consistent with COVID-19, any of the following symptoms may indicate a possible COVID-19 infection:

Have they recently begun experiencing any of the following in a way that is not normal for them?

- Feeling feverish or a measured temperature greater than or equal to 100.0 degree Fahrenheit
- Loss of taste or smell
- Cough
- Difficulty breathing
- Shortness of breath
- Fatigue
- Headache
- Chills
- Sore throat
- Congestion or runny nose
- Shaking or exaggerated shivering
- Significant muscle pain or ache
- Diarrhea
- Nausea or vomiting
- Had close contact with a person who is lab-positive for Covid-19 (spent longer than 15 minutes within 6 feet)



If **NO**, you are clear to report to school or work.

