1.) Do you have any of the following new or worsening symptoms or signs?*  
- Fever or chills
- Runny or stuffy nose
- Difficulty breathing or shortness of breath
- Cough
- Decrease or loss of taste or smell
- Sore throat or trouble swallowing
- Nausea, vomiting or diarrhea
- Not feeling well, extreme tiredness or sore muscles
- Pink eye or headache

If “YES” to any symptom:
- Stay home & self-isolate
- Get tested Or
- Contact a health care provider

*If you have an existing health condition that gives you the symptoms you should not answer YES, unless the symptom is new, different or getting worse. Look for changes from your normal symptoms.

2.) Do you live with someone who has a new COVID-19 symptom or is waiting for COVID-19 test results because they had a symptom?  

3.) Has a doctor, health care provider or public health unit told you that you should currently be isolating (staying at home)?

4.) In the last 14 days, have you had close contact with a confirmed or probable case of COVID-19 without wearing appropriate PPE?

5.) In the last 14 days, have you travelled outside of Canada?

If “YES” to Questions 2,3,4 or 5:
- Stay home  +  Follow Toronto Public Health advice

Operators should keep a copy of staff screening results for 30 days and then shred.

Developed in accordance with recommendations and instructions issued by the Office of the Chief Medical Officer of Health

Updated March 3, 2021