



COVID-19

**Do you have any
of the following (new or worsening):**



Fever



Cough



Difficulty breathing



**Sore throat,
trouble swallowing**



**Runny nose or
red eyes**



**Loss of taste or
smell**



**Not feeling well,
tired or sore muscles**



**Nausea, vomiting,
diarrhea**



Have you been in close contact with someone who has confirmed COVID-19 in the past 14 days without wearing appropriate PPE?



Have you returned from travel outside Canada in the past 14 days?



If you answered YES to any of these questions, go home & self-isolate right away. Call Telehealth or your health care provider, to find out if you need a test.