



Downtown Traverse City Operation “Open Doors”

Sample Screening Checklist

In Response to COVID-19

This checklist is a sample only. It is not intended to take the place of legal advice, medical advice, diagnosis or treatment.

Screening Questions To Consider

In the past 24 hours, have you experienced:

- | | | | | |
|-----------------------------------|-----|--------------------------|----|--------------------------|
| Subjective fever (felt feverish): | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| New or worsening cough: | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| Shortness of breath: | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| Sore throat: | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| Vomiting/Diarrhea: | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| Repeated shaking with chills: | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| New loss of taste or smell: | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| Muscle pain: | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| Headache: | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |

Current Temperature _____

If you answer “yes” to any of the symptoms listed above, or your temperature is 100.4 Degrees or higher, please do not go into work. Self-isolate at home and contact your doctor for direction. If you test positive for COVID-19,

- You should isolate at home for minimum of 10 days since symptoms first appeared AND
- You must also have 3 days without fevers and improvement in respiratory symptoms before returning to work.

If you answer “yes” to any of the symptoms listed above and are not ordered to be tested for COVID-19 or tested negative for COVID-19,

- You may return to work after you are fever free for 72 hours without the use of medicine and
 - Other symptoms have improved
- Have you engaged in any activity or travel within the last 14 days which fails to comply with the Stay Home, Stay Safe Executive Order?
- Have you been directed or told by the local health department or your healthcare provider to self-isolate or self-quarantine?

How to Respond

If you answer “yes” to either of these questions.

Please do not go into work. Self-quarantine at home for 14 days and monitor your symptoms

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In Response to COVID-19

Have you had close contact with a positive COVID-19 case?

How to Respond

If an employee has had close contact with someone that was COVID-19 positive, the employee is allowed to work at the discretion of the employer.

The employer must:

- Assess employee for symptoms each day
- Check temperature of employee before the start of each work day and ideally before they enter the facility. If a touchless thermometer is not available, the employee should have a dedicated thermometer. Sharing of thermometers is strictly prohibited.

The employee must:

- Continue to self-monitor for symptoms.
- Immediately go home if he/she begins to experience symptoms.
- Wear a face covering at all times while in the workplace. This may be issued or approved by the employer.
- Maintain at least a six-foot distance from other staff and patrons as work permits.