KNOW THE SYMPTOMS OF COVID-19

- Fever
- Dry Cough
- Shortness of Breath

SCREENING QUESTIONS

- Are you experiencing any cough?
- Do you have a fever?
- Any difficulty breathing?
- Have you been in contact with anyone with confirmed Coronavirus (COVID-19)?

Have you traveled outside the United States in the last 14 days or traveled anywhere that there have been confirmed cases of Coronavirus (COVID-19)?

- If YES: Where?
- If NO: No further action required

If the answer is YES to any of the questions, contact medical and a supervisor immediately, provide inmate with Surgical mask (located in Nurse’s Office), house the inmate separately.

*If the inmate refuses to wear a mask – everyone else in close contact must*