

## Questionnaire

### Have you in the past 14 days:

1. Traveled out of the state for more than a day ?

**NO YES**

2. Been in contact with a novel coronavirus/ COVID-19 infected person?

**NO YES NOT SURE**

3. Have you been to a health care facility (hospital, walk-in clinic, emergency room) where people infected with novel coronavirus/ COVID-19 are treated in the past 14 days?

**NO YES**

4. Have you had the following symptoms: feel uncomfortable, especially with respiratory symptoms (cough, fever, shortness of breath, difficulty breathing)?

**NO YES**

5. Do you feel unwell, especially with respiratory symptoms (cough, high temperature, shortness of breath, difficulty breathing)?

**NO YES**

If **Yes** is answered to any of the questions above, our appointment at the subject property should be postponed until such time as answers to all questions are a definitive **NO** or alternative options have been developed.

If you answered **YES** to any of the above questions, quarantining is necessary before interacting with others for 14 days, or seven days of quarantine followed by a favorable coronavirus test.

If **Not Sure** is answered to question # 2 have a discussion to clarify.