

CORONAVIRUS SELF ASSESSMENT

Please do not enter if you:

Have been in contact close contact with someone diagnosed with COVID-19 or been notified that you may have been exposed to it

Have travelled to any countries outside Canada (including the United States) within the last 14 days

Have any of the following symptoms

- Fever or chills
- Fatigue
- Shortness of breath
- Sore throat
- Headache
- Muscle aches
- Cough
- Nausea or vomiting
- Congestion or runny nose
- New loss of taste or smell
- Loss of appetite
- Diarrhea

Note that this self-assessment is intended for COVID-19 only. Your symptoms may not be related to COVID-19 and could require you to seek medical attention. If you are uncertain and/or feel very sick, contact your family doctor/nurse practitioner or call 8-1-1.

