

NAME:	DATE OF BIRTH	PHONE #	JOB/ROLE and DEPARTMENT	Other Employer(s)

COVID-19: SELF SCREENING SHEET (version date March 15, 2020, 4 pm)

The Federal government has issued a **Pandemic COVID-19 advisory for all countries: avoid non-essential travel outside Canada.**

All people returning from travel to Hubei Province (China), Iran or Italy, are required to self-identify to Toronto Public Health at 416-338-7600 within 24 hours of arriving in Canada.

People returning from travel anywhere outside of Canada are required to self-screen for 14 consecutive days from date of arrival in Canada.

Asymptomatic (with an absence of Reportable Symptoms*) people must:

- Return to work on your next scheduled shift
- Self-screen daily using the table below for 14 consecutive days from date of arrival in Canada
- Submit this completed *SELF-SCREENING SHEET* to Occupational Health by fax or email

IMPORTANT: If Reportable Symptoms* develop at any point in the 14 day self-screening period, immediately:

- If at work, don a mask and STOP PROVIDING CARE as soon as it is safe to do so
- Call the Sick Line or email Occupational Health (do not visit in person)
- Advise your Manager/ Department that you are not permitted to return to work until you have been assessed
- Proceed to your nearest Assessment Centre to be assessed
- Contact Occupational Health with any changes in your condition and to report COVID-19 test results

Monitoring Day #	Date : Month/ Day	Temperature (Celsius)	List Symptoms (or "none")	Your initial
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				

***Reportable Symptoms:**

- | | |
|--|---|
| <input type="checkbox"/> Fever (equal to or greater than 38°C) | <input type="checkbox"/> Shortness of Breath |
| <input type="checkbox"/> Cough | <input type="checkbox"/> Sore Throat |
| <input type="checkbox"/> Runny Nose or Nasal Congestion | <input type="checkbox"/> Gastrointestinal symptoms (vomiting or diarrhea) |

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Site	Sick Line (voicemail only)	Reception (answered during business hours)	Fax	Email
BAH	416 - 461-8252 x 2803	416 - 461- 8252 x 2802	416 - 470 - 6725	backtowork@sinaihealth.ca
MSH	416 - 586-4800 x 7425	416 - 586- 4800 x 3907	416 - 361 - 2663	backtowork@sinaihealth.ca