

# Attention Visitors



If you have at least one of the following symptoms: fever and/or new onset of cough or difficulty breathing

**OR**

At least two of the following symptoms:

- chills
- fatigue
- headache
- sore throat
- runny nose
- stuffy or congested nose
- lost sense of taste or smell
- hoarse voice
- difficulty swallowing
- digestive issues (nausea/vomiting, diarrhea, stomach pain), or
- for young children and infants: sluggishness or lack of appetite

**please delay your visit AND contact your health care provider, or Telehealth Ontario (1-866-797-0000)**

Ontario





Date Effective: May 17<sup>th</sup> 2020

## Dispatch question for Long-Term Care or Retirement Home\*

**Q1: Do you have a concern for a potential COVID-19 infection for the person?**

\* This question is only to be asked to Long-Term Care or Retirement Home staff by Dispatch Centres.

### Regular Screening Questions

**Q2: Did the person have close contact with anyone with acute respiratory illness or travelled outside of Ontario in the past 14 days?**

**Q3: Does the person have a confirmed case of COVID-19 or had close contact with a confirmed case of COVID-19?**

**Q4: Does the person have any of the following symptoms:**

- Fever
- New onset of cough
- Worsening chronic cough
- Shortness of breath
- Difficulty breathing
- Sore throat
- Difficulty swallowing
- Decrease or loss of sense of taste or smell
- Chills
- Headaches
- Unexplained fatigue/malaise/muscle aches (myalgias)
- Nausea/vomiting, diarrhea, abdominal pain
- Pink eye (conjunctivitis)
- Runny nose/nasal congestion without other known cause

**Q5: If the person is 70 years of age or older, are they experiencing any of the following symptoms: delirium, unexplained or increased number of falls, acute functional decline, or worsening of chronic conditions?**