

COVID-19 risk assessment questionnaire before hospital procedure

1. Have you travelled outside the province in the last 14 days?

2. Have you been in contact with anyone who has travelled out of the province in the last 14 days? If yes, has this person been tested for COVID-19? If yes, is there a result available?

3. Did someone living with you have to self-isolate?

4. Have you been in contact with a patient who tested positive for COVID-19? If so, when was that contact?

5. Do you currently have flu symptoms such as a new or worsening cough, fever, muscle pain or difficulty breathing?

6. Do you have any new symptoms such as fatigue, abdominal pain, diarrhea, sore throat, loss of sense of smell, runny nose or dizziness?

7. Do you engage in social distancing? When was the last time you've had visit at your home?

8. Does everyone living under the same roof as you practice social distancing?

9. Are you the person who has to do the grocery shopping and other essential errands in your home? If so, what measures do you take to protect yourself when going outdoors?

- For questions 1 to 6, if you get a yes, inform your consultant doctor.
- For questions 7 and 8, if you get a no, inform your consultant doctor.
- For question 9, if yes and no action, inform your consultant doctor.