



CLIENT HEALTH SCREENING CHECKLIST

Has the person attending Merrick, Inc., had any of the following symptoms within the last 48 hours that cannot be attributed to another health condition (i.e., asthma, allergies, migraines, etc.)?

Yes	No	
<input type="checkbox"/>	<input type="checkbox"/>	Feeling feverish?
<input type="checkbox"/>	<input type="checkbox"/>	Chills?
<input type="checkbox"/>	<input type="checkbox"/>	New cough?
<input type="checkbox"/>	<input type="checkbox"/>	Shortness of breath
<input type="checkbox"/>	<input type="checkbox"/>	New sore throat
<input type="checkbox"/>	<input type="checkbox"/>	New muscle aches?
<input type="checkbox"/>	<input type="checkbox"/>	New headache?
<input type="checkbox"/>	<input type="checkbox"/>	New loss of smell or taste?

If any of the boxes are checked “Yes”, you agree to notify Merrick, Inc., and not have the person attend the program until permitted according to Merrick’s Covid-19 Preparedness Plan (on website). For more information on when and where to get tested call MDH at 651.297.1304 or go to <https://mn.gov/Covid19/>.

Clients with a lab test confirming they have Covid-19, or a member of their household has tested positive for Covid-19, can report to the program 14-days after the test date, or onset of symptoms, if they have not had a fever within the last 24 hours, without using fever reducing medications, and symptoms have improved.

Clients that have previously tested positive and recovered do not need to undergo repeat quarantine in the case of another COVID-19 exposure within 3 months of their initial diagnosis (date of symptom onset).