



## Pharmacist screening questionnaire for 2019-nCoV

### Directions:

1. Ask the following questions for patients presenting to the pharmacy with the following symptoms:

**Fever**

**Cough**

**Shortness of breath**

### Screening Questions:

Have you, in the last 20 days, lived in or travelled to China?

Y  N  Unknown

Have you, in the last 14 days, had close contact with a person who is under investigation for 2019-nCoV while that person is ill?

Y  N  Unknown

Have you, in the last 14 days, had close contact with a laboratory-confirmed 2019-nCoV person while that person was ill?

Y  N  Unknown

2. If yes to any of the questions, notify the patient's physician or the Surveillance unit immediately at telephone numbers: 376-3533 or 376-4705