

COVID-19



Continuing Care Check Point

If you answer **YES to ANY** of the 4 questions below you are **not allowed** to enter the home at this time

1. Are you **currently under federal orders to isolate/quarantine** due to recent **travel**?*
2. Should you be **isolating** due to a **recent positive test** for COVID-19?*
3. Should you be **isolating** because of having had **close contact** to a positive COVID-19 case?*
4. In the **last 48 hours**, have you had any of the following **symptoms**?
 - **Fever** (temperature ≥ 37.8 Celsius)
 - **New or worsening respiratory symptoms NOT RELATED** to seasonal or environmental allergies, i.e.
 - sore throat or difficulty swallowing
 - hoarse voice
 - runny nose or sneezing
 - nasal congestion
 - shortness of breath or difficulty breathing
 - cough

New onset atypical symptoms including:

- chills
- malaise
- diarrhea
- loss of sense of smell
- muscle aches
- fatigue
- headache
- loss of sense of taste
- nausea
- vomiting
- weakness
- loss of appetite

If you answered **NO to ALL** of the above, **please proceed**

THANK-YOU for helping us keep everyone safe!

* if you have travelled internationally, you may be asked to provide your **ArriveCan receipt**

** isolation requirements vary - check saskatchewan.ca/covid19 or use the QR code



You must follow all required infection control practices while on site



**Saskatchewan
Health Authority**

saskatchewan.ca/COVID19

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