

**Onsite Pre-entry Questionnaire**

Are you, your child, or any other member of your household experiencing any of the following symptoms?

Temperature above 100.0 degrees Fahrenheit
Sore throat
Cough (not related to chronic condition)
Nasal congestion or runny nose (not related to chronic condition)
Body aches
Loss of smell or taste
Shortness of breath
Nausea, vomiting, or diarrhea
Rash/change in skin coloration
Headache

Are you, your child, or any member of your immediate household awaiting test results for or deemed positive for COVID-19 in the last 14 days?
Have you, your child, or a member of your immediate household been exposed to an individual diagnosed with or suspected positive for COVID-19 in the last 14 days? (Exposure is defined as being in the same area as this person for more than 10 minutes.)
Have you, your child, or a member of your household traveled beyond the areas deemed lower risk for Covid 19 by the most up to date MA Travel order (8-1-2020, updated 11-20-2020) or traveled by airplane in the last 14 days? Areas considered lower risk= Vermont & Hawaii. All other travel requires 14 day quarantine.

If the answer to any of the above is yes, this onsite visit must be rescheduled to a telehealth visit. You must leave the clinic now and our Clinic Manager will reach out to you to reschedule.