



Coronavirus/COVID-19 update

Guidelines for patient and employee safety

Name: _____ Date: _____ Dept./Company: _____

Norton Healthcare Screening for Non-Employed Individuals

Norton Healthcare has implemented a travel policy for its employees. It complies with the Centers for Disease Control and Prevention (CDC) information for travel regarding novel coronavirus (COVID 19). Among the CDC recommendations is to consider international travel to countries designated with a level 2 and level 3 warning for travel as well as cruise ship travel. While there are no specific recommendations on domestic travel, there have already been a number of cases identified within the United States, including community transmission without identified risk.

To ensure the safety of our patients, staff and providers, Norton Healthcare is requiring all non-Norton personnel who work within our facilities to be screened prior to coming on site. Please answer the following questions:

1. Have you had any direct contact with a person or individual suspected or confirmed to have COVID-19?
NO **YES - you may NOT work with any Norton Healthcare entity for at least 14 days (symptom/fever-free).**
2. Have you traveled outside of the United States in the past 30 days?
NO **YES – you may NOT work at any Norton Healthcare entity for 14 days, from the day you returned to United States**
3. Have you traveled on a cruise ship in the past 30 days?
NO **YES – you may NOT work at any Norton Healthcare entity for 14 days, from the day you returned to United States**
4. Do you currently have any respiratory or flu-like symptoms and/or a fever (Greater than 100.4F)?
NO **YES - you may NOT work with any Norton Healthcare entity for at least 14 days (symptom/fever-free).**

If you answered “No” to all questions, you may work at Norton Healthcare. Please complete this form before every shift and provide to your leadership and keep for your personal records.

I attest that the answers above are truthful, to the best of my knowledge, on this date.

Signature _____

Date _____