

If yes to any of these questions, please notify registration person immediately.

	Health Screening Questions: * Not related to current therapy
1	Do you or any accompanying visitors have new onset of a respiratory illness including sniffles, runny nose, cough, or sore throat not related to allergies in last 7 days?*
2	Have you had a fever > 100.4 any time in the last 48 hours?
3	Have you had new onset of a widespread rash*
4	Have you traveled to China, Iran, Italy, South Korea, Japan, or Snohomish County, WA, Solano County, CA, Westchester County, NY in the past 14 days?

<b>5</b>	<b>Have you had close contact with anyone who tested positive for the Coronavirus or who has traveled to any of the above locations?</b>
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Instructions if the response to questions is “YES”

For Patients - To protect you and our other patients and visitors, we are asking everyone the following questions. Please let me know if your answer is yes to any of these questions.

- If a **patient** answers **YES** to any of the above questions or if BMDA mPage tracking board for mask or biohazard icon appears under tracking column:
  - **At Registration Desk**
    - Request patient wear a mask “For patient safety we need to ask that you wear a mask while you are on the Banner Gateway/MDA campus”
    - Point out tissues and gel for hand hygiene in waiting area.
    - If patient has further questions - “The clinical team would be happy to answer any questions during your visit”
  - **For Clinical Staff**
    - Implement Contact, Droplet Isolation with Eye protection (masks with eye shield or goggles)
    - Educate patient on appropriate hand hygiene and respiratory etiquette
    - Ensure that tissues and masks are available
  
- If a **visitor** answers **YES** to any of the above:
  - **At Registration Desk**
    - Request visitor wear a mask if they must accompany a patient. “For the safety of our patients, we ask that you wear a mask while you are on the Banner Gateway/MDA campus”
    - Point out tissues and gel for hand hygiene in waiting area.
    - Provide handout to patient with the following information

For the safety of our patients we ask that you:

- Limit visits to only those areas necessary for the patient's care
- Limit your time at the facility
- Use appropriate hand hygiene
- Use tissues to cover coughs and sneezes
- Avoid touching your eyes, nose, face