

COVID-19 Triage

Narrative:

Have you been in contact with someone with confirmed COVID-19 (Coronavirus)?

Have you had a fever?

Have you had a new cough?

Have you had new or worsening shortness of breath?

Have you had Chills?

Have you had muscle aches?

Have you had a loss of taste or smell?

Have you had a sore throat?

Have you had any vomiting?

Have you had diarrhea?

Are you having any other symptoms?

Follow-Up:

Does this patient require follow-up?