3/11/2020 2:00 PM

Post-Acute and Long-Term Care Facility Visitor Screening Questions

Based on guidance issued March 4, 2020 by the Centers for Medicare and Medicaid Services https://www.cms.gov/medicareprovider-enrollment-and-certificationsurveycertificationgeninfopolicy-and/qso-20-14-nh.pdf and direction from the Nebraska DHHS HAI-AR Program.

1.	Have you traveled within the last 14 days to the following places? https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html
	☐ China
	□ Iran
	□ South Korea
	□ Italy
	□ Japan
	☐ Hong Kong
	If YES to any listed country: restrict entry
2.	Have you traveled within the last 14 days to the following places?
	☐ Seattle, Washington area
	☐ California
	□ New York
	☐ Singapore
	☐ Thailand
	□ Taiwan
	If YES- please consider not entering, especially if you had contact with anyone who was ill during your trip
	If you still wish to visit, please wear a mask.
3.	Do you have signs or symptoms of respiratory infection?
	□ Fever
	□ Cough
	☐ Sore Throat
	☐ Difficulty breathing
	If YES to any listed symptom: restrict entry
4.	Have you had contact with someone
	☐ With COVID-19
	☐ Under investigation for COVID-19
	If YES to any contact: restrict entry