PHYSICAL THERAPY CARE & AQUATIC REHAB OF FORT BEND

Date:

Employee Initials:

Coronavirus – COVID-19 Questionnaire

PTCare's priority is the health and safety of our patients, staff, and communities. To reduce the potential risk of exposure to and transmission of Coronavirus (COVID-19), we are requiring completion of a simple screening questionnaire. We also ask that you adhere to all COVID-19 related preventative measures in effect at our office, which includes wearing face mask/covering while in our clinic, screening for COVID upon arrival into the clinic and washing/sanitizing hands before your treatment session begins. Thank you for your support and understanding in these measures to protect yourself, our team members, and the community at large.

Patient name: _____ Appt date: _____

1. Have you experienced any of the symptoms listed below in the past 48 hours?
    - Headache
    - Sore throat
    - Muscle or body aches
    - Cough
    - Shortness of breath
    - Fever or Chills
    - New loss of taste or smell
    - Fatigue
    - Congestion or runny nose
    - Nausea or vomiting

    Inform the patient*: Prior to any of your appointments, if you are feeling sick and/or experiencing any of the above symptoms, or you have a sick family member at home, stay home and we will need to reschedule your appointment*
2. Are you isolating or quarantining because you tested positive for COVID-19 or awaiting results form a COVID-19 test?
3. Have you been in close physical contact in the last 10 days with anyone who has symptoms consistent with COVID-19?
   OR
   Have you been in close physical contact in last 10 days with anyone who is known to have laboratory-confirmed COVID-19?
4. Within the past 10 days has a public health or medical professional told you to self-monitor, self-isolate or self-quarantine because of concerns about COVID-19 infection?

If No to all the questions treat as usual.

If yes to any of the question, the patient will need to reschedule their appointment until after the isolation/quarantine period; clinicians should use their professional judgement when determining if the patient has had an exposure.