

### Coronavirus screening questions

	YES	NO
Have you, your child, or anyone else in your house traveled outside of the US in the past 14 days? If yes, where?		
Have you, your child, or anyone else in your house traveled outside of Pennsylvania in the past 14 days? If yes, where*?		
In the past 14 days, have you, your child, or anyone else in your house had contact with any person suspected to have COVID-19? This includes anyone who is waiting for a test result or who is in isolation for possible COVID.		
In the past 14 days, have you, your child, or anyone else in your house had contact with any person that has a positive COVID test?		
Have you or your child been exposed to anyone with flu-like symptoms recently? (Fever, cough, or shortness of breath)		
Do you, your child, or anyone in your house have any of the following symptoms: Fever, cough, sore throat, difficulty breathing, shortness of breath, wheezing, muscle aches, stomach pains, vomiting, diarrhea, pink or red eyes, rash, fatigue, or feeling unwell?		
Are you, your child, or anyone in your house awaiting the results of a COVID test?		

If you have traveled outside of Philadelphia within the last 14 days, you may need to quarantine upon your return. You can check out the most up to date travel restrictions from the Philadelphia Department of Health [here](#). If you have traveled to any of the "red" states, we will be happy to help you reschedule your appointment for after your 14 day quarantine.