

Have you traveled outside of NH, CT, ME, VT, RI and MA in the last 10 days?

Have you had any UNPROTECTED close prolonged contact with anyone with suspected or confirmed COVID-19 in that last 10 days? **Please note that wearing a cloth face mask is NOT considered protection.***

Have you had a fever or chills in the past 24 hours without using fever reducing medicine?

Are you having any of the following symptoms that are new or unexplained?*

- Shortness of breath
- Muscle aches
- Cough
- Sore throat
- Fatigue
- Headache
- Nausea
- Vomiting
- Diarrhea
- Nasal congestion
- Runny nose
- Changes in your sense of taste or smell

Does the person currently have a fever?*

A fever is defined as a temperature above 100.0F or 37.8C