

Novel Coronavirus (COVID-19)

Los Angeles County Department of Public Health Entry Screening

Recent Updates:

8/4/20: Form modified for use for both employee's and visitors.

Recommendation added to recommend face shield along with face coverings for screeners.

Entry screening of employees, volunteers, contract workers or visitors can be part of an organization's strategy to limit the spread of COVID-19 at their facilities. For those that choose to do this, this document provides some guidance and a sample screening template for evaluating an individual before they enter the facility. Please note that 1) entry screening can also be done remotely or through other methods that may be more appropriate and convenient and 2) taking an actual measurement of temperature at the point of entry is optional.

If entry screening is done in-person ensure that:

- The screening area can maintain privacy and confidentiality of the person being screened
- The person being screened should wear a cloth face covering and maintain six feet of physical distance from the screener during the entire screening process. The screener should be wearing both a cloth face covering and ideally a face shield. The screener uses gloves and ensures proper hand hygiene (soap and water or hand sanitizer with at least 60% alcohol) prior to, and after, each screening if there is any physical contact or exchange of documents.
- Screeners are properly trained in the use and cleaning of the thermometers if onsite temperature measurement is done. Cleaning should be done after each use if the thermometer requires contact with the individual (non-contact thermometers should be used preferentially).

All documentation related to the entry screening and measurement of body temperature are medical records and must comply with all regulations related to the confidentiality, handling and maintaining of medical records.

Individuals should be sent home immediately if they report any symptoms, have an elevated body temp (greater than or equal to 100.4°F or 38°C) or have had contact with a person with or suspected to have COVID-19 in the previous 14 days.

NAME OF COMPANY			
SCREENING LOCATION	SCREENING CONDUCTED BY	DATE OF SCREENING	TIME OF SCREENING
EMPLOYEE/VISITOR NAME			

I. Verbal Screening

1. Did any of the following symptoms first appear **within the last 10 days**?

- | | | | | |
|---------------------------------------|--------------------------|----|--------------------------|-----|
| a. Fever (at or over 100.4°F or 38°C) | <input type="checkbox"/> | No | <input type="checkbox"/> | Yes |
| b. Chills | <input type="checkbox"/> | No | <input type="checkbox"/> | Yes |
| c. Cough | <input type="checkbox"/> | No | <input type="checkbox"/> | Yes |
| d. Shortness of breath | <input type="checkbox"/> | No | <input type="checkbox"/> | Yes |
| e. Difficulty breathing | <input type="checkbox"/> | No | <input type="checkbox"/> | Yes |

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2. Has the individual had contact with a person known to be infected with or suspected to have Novel Coronavirus (COVID-19) **within the last 14 days**?

No

Yes

II. Temperature Screening

1. Thermometer Used:

2. Employee Body Temperature:

3. Is temperature **above normal**, i.e., at or over 100.4°F or 38°C?

No

Yes

III. Conclusion

- Negative Screen (Cleared). If the individual has no symptoms and no contact to a known or suspected COVID-19 case in the last 14 days they can be cleared to enter the facility.
- Positive Screen (Not Cleared).
 - If the individual has had contact to a known or suspected COVID-19 case in the last 14 days they should be sent home immediately and asked to quarantine at home. Provide them with the quarantine instructions found at ph.lacounty.gov/covidquarantine.
 - If the individual is showing any of the symptoms noted above they should be sent home immediately and asked to isolate at home. Provide them with the isolation instructions found at ph.lacounty.gov/covidisolation.

Check One:

- Individual Cleared to enter facility
- Individual Not Cleared to enter facility directed to go home and quarantine
- Individual Not Cleared to enter facility, directed to go home and isolate

Screening Conducted By:

PRINTED NAME	PAYROLL TITLE
SIGNATURE	DATE