```
ENTER SCREENING
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        order to use the Coronavirus
                                                                                                                                                                                                                                                                                                                                                                                                              INTRO messaging: purpose, disclaimer/agree to move forward
                                       CARE MESSAGES
MSG0. << Please make a selection so I can help give you care advice.>>
                                                                                                                                                                                                                                                                                                                                                                                                                            Q0: Are you in the United States
 You have not made a selection. Please start again and select options for each question so that I can help
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      CDC SELF-CHECKER TEMPLATE - [V63]
                                                                                                                                                                                                                                                                                                                                                                                                                            or a U.S. territory right now?
 give you advice.
MSG1: <<Sounds like you (they) are feeling ok.>>
                                                                                                                                                                                                                                                                                                                                                                     Note for International Users
 Learn more about COVID-19 and what you can do to stay safe on the <u>CDC website</u>.
                                                                                                                                                                                                                                                                                                                                                             Given to every user in their first care message
                                                                                                                                                                                                                                                                                                                                                                                                                           Q0A: Where in the United States
                                                                                                                                                                                                                                                                                                                                                             if not from United States or U.S. territory.
                                                                                                                                                                                                                                                                                                                                                                                                                          or in which U.S. territory are you
                                                                                                                                                                                                                                                                                                                                                             MSG11:Please check with your Ministry of
                                                                                                                                                                                                                                                                                                                                                             Health or local health department for
                                                                                                                                                                                                                                                                                                                                                              additional information and guidelines about
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  If the user fails to answer a question 3X, then
 MSG4: << Urgent medical attention may be needed. Please call 911 or go to the Emergency
                                                                                                                                                                                                                                                                                                                                                              COVID-19 in your location.
                                                                                                                                                                                                                                                                                                                                                                                                                              Q4: Are you answering for
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  stop triage and MSG0:
 Based on your (their) symptoms, you may need urgent medical care. Please call 911 or go to the nearest
                                                                                                                                                                                                                                                                                                                                                             MSG_T2 message will be: (for non-U.S.
                                                                                                                                                                                                                                                                                                                                                              respondents)You may be eligible for COVID-
 Tell the 911 operator or emergency staff if you have had contact with someone with COVID-19.
                                                                                                                                                                                                                                                                                                                                                                                                                            Q2: What is your (their) age?
                                                                                                                                                                                                                                                                                                                                                              Contact your local health department or your
MSG5: <<Call a medical provider.>>
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            give you care advice.
                                                                                                                                                                                                                                                                                                                                                                                                                             Younger than 2 years old
                                                                                                                                                                                                                                                                                                                                                             medical provider for more information.
 Sorry you (they) are not feeling well. Your (their) symptoms may be related to COVID-19. You (they) also
                                                                                                                                                                                                                                                                                                                                                                                                                            2 - 4 years
 have medical conditions that may put you (them) at risk of becoming more seriously ill.
 • Call your (their) medical provider, clinician advice line, or telemedicine provider.

    Stay home (or keep them home) except to get medical care.

    Do not go to work, school, or public areas including grocery stores, pharmacies, or restaurants.

                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         → Go to Clara Pediatric
        Consider delivery options for food and medicine.

    Do not use public transportation or ride sharing

 • If you (they) feel worse and you think it is an emergency, call 911 or seek medical care immediately.

    Consider using telehealth services if available.

 • Learn how to take care of yourself or someone else who is sick.
                                                                                                                                                                                                                                                                                                                                                                                                                                                                             AGE <18 YO
 • Take these steps to help <u>protect others from getting sick</u>.
MSG6: <<Contact the occupational health provider at your workplace immediately>>
 Tell the occupational health provider (or supervisor) in your workplace that you're feeling sick as soon as
                                                                                                                                                                                                                                                                                                                                                                                                                              Q5: What is your (their)
                                                                                                                                                                                                                                                                                                                                                                                                                                       gender?
MSG7: <<Contact a medical provider in the care center, nursing home, or homeless shelter where you
                                                                                                                                                                                                                                                                                                                                                                                                                                     AGE ≥ 18 YO
 Tell a caregiver in your (their) facility that you (they) are sick and need to see a medical provider as soon
 as possible. Living in a long-term care facility or nursing home may put you (them) at a higher risk for
                                                                                                                                                                                                                                                                                                                                                                                                            Q1: Do you (they) have any of these life-threatening symptoms?
                                                                                                                                                                                                                                                                                                                                                                                                             *Bluish lips or face
 Help protect others from getting sick:
                                                                                                                                                                                                                                                                                                                                                                                                             *Severe and constant pain or pressure in the chest
 • Stay in your room as much as possible except to get medical care.
                                                                                                                                                                                                                                                                                                                                                                                                            *Extreme difficulty breathing (such as gasping for air, being
 • Cover your coughs and sneezes with a tissue or the inside of your elbow.
                                                                                                                                                                                                                                                                                                                                                                                                            unable to talk without catching your (their) breath, severe

    Wash your hands often with soap and water.

                                                                                                                                                                                                                                                                                                                                                                                                            wheezing, nostrils flaring)

    Avoid close contact with other people. Stay at least 6 feet away from other people.

                                                                                                                                                                                                                                                                                                                                                                                                             *New disorientation (acting confused)
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        —Yes → MSG4: Urgent medical attention may be needed
 • Wear a mask when around others.
                                                                                                                                                                                                                                                                                                                                                                                                             *Unconscious or very difficult to wake up
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    ise call 911 or go to the Emergency Depart

    Clean and disinfect frequently touched surfaces in your room.

                                                                                                                                                                                                                                                                                                                                                                                                             *Slurred speech or difficulty speaking (new or worsening)
   Monitor your health and notify a medical provider if you think you are getting sicker
                                                                                                                                                                                                                                                                                                                                                                                                            *New or worsening seizures
                                                                                                                                                                                                                                                                                                                                                                                                             *Signs of low blood pressure (too weak to stand, dizziness,
                                                                                                                                                                                                                                                                                                                                                                                                             lightheaded, feeling cold, pale, clammy skin)
MSG8: << Stay home (keep them home) and take care of yourself (them). Call your (their) medical
                                                                                                                                                                                                                                                                                                                                                                                                             *Dehydration (dry lips and mouth, not urinating much, sunken
 provider if you (they) get worse>>
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     G8: Stay home (or Keep your child home)
 Sorry you(they) are not feeling well. Your symptoms may be related to COVID-19.
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      e care of yourself (or your child). Call you

    Stay at home (or Keep them home) except to get medical care.

                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      child's) medical provider if you get (or yo
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       G10: Sorry you are (or your child is) feeli
    • Do not go to work, school, or public areas including grocery stores, pharmacies, or restaurants.
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      d gets) worse.
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       y home (or Keep your child home) and n
         Consider delivery options for food and medicine.
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       ır (or your child's) symptoms. Call your (oı

    Do not use public transportation or ride sharing

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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        d's) medical provider if you get worse
    • If you (they) feel worse and you think it is an emergency, call 911 or seek medical care
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      r workplace immediately.
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      MSG_T2: You may be eligible for COVID-19 testing.

    Learn how to take care of yourself or someone else who is sick.

                                                                                                                                                                                                                                                                                                                                                                                                                         Q3: Are you (they) feeling sick?
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  MSG_T0: No COVID-19 testing needed at this time.
 • Take these steps to help <u>protect others from getting sick</u>.
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                MSG_T2: You may be eligible for COVID-19 testing.
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                Contact a medical provider in the car
MSG9: << Stay home (keep them home) and take care of yourself (them). Call your (their) medical
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    If only "Other symptoms"
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              r, nursing home, or homeless shelter wh
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           Q23: Do any of these apply to you (them)? (check any)
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            *Chronic lung disease, such as moderate to severe asthma, COPD (chronic obstructive
 Sorry you (they) are not feeling well. Your (their) symptom(s) may be related to COVID-19.
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            pulmonary disease), cystic fibrosis, or pulmonary fibrosis
 • Call your (their) medical provider, clinician advice line, or telemedicine provider.
                                                                                                                                                                                                                                                                                                     Q7: Do you (they) have any of the following? (Check any)
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     Q14: Do you (they) have any of the following? (Check any)
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            *Serious heart condition, such as heart failure, cardiomyopathy, heart attack, or blocked

    Stay at home (or keep them home) except to get medical care.

                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     * Fever or feeling feverish (such as chills, sweating)
                                                                                                                                                                                                                                                                                                     * Fever or feeling feverish (such as chills, sweating)
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           arteries to the heart

    Do not go to work, school, or public areas.

                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            *Weakened immune system or taking medications that may cause immune suppression

    Do not use public transportation or ride sharing.

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                                                                                                                                                                                                                                                                                                     * Mild or moderate difficulty breathing
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     * Mild or moderate difficulty breathing
                                                                                                                                                                                                                                                                                                                                                                                                          Q6: In the two weeks before you (they) felt sick, did you (they) care
                                                                                                                                                                                                          G10: Sorry you are (or your child is) feeling
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     If only secondary COVID-19 or

    If you (they) feel worse and you think it is an emergency, call 911 or seek medical care

                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         Q21: Do you (they) live in a long-
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     * Sore throat
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         volunteered, or been a patient in a healthcare facility
                                                                                                                                                                                                           home (or Keep your child home) and
                                                                                                                                                                                                                                                                                                                                                                                                          for or have close contact (within 6 feet of an infected person for at
                                                                                                                                                                                                                                                              ——If only "Other symptoms"-
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            *Diabetes, chronic kidney disease, or liver disease
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     secondary COVID-19 and Other
                                                                                                                                                                                                                                                                                                                                                                 _____ or ___
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       or worked as a first responder? Healthcare facilities
                                                                                                                                                                                                           (or your child's) symptoms. Call your (c
                                                                                                                                                                                                                                                                                                                                                                                                          least 15 minutes) with someone with symptoms of COVID-19, tested
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     * Muscle aches or body aches
                                                                                                                                                                                                                                                                                                     * Muscle aches or body aches
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        term care facility, nursing home or
   Consider using telehealth services if available.
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         include a hospital, medical or dental clinic, long-term
                                                                                                                                                                                                                                                                                                                                                                                                          for COVID-19, or diagnosed with COVID-19?
                                                                                                                                                                                                           's) medical provider if you get worse
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      * Vomiting or diarrhea
                                                                                                                                                                                                                                                                                                     * Vomiting or diarrhea
  • Learn how to take care of yourself or someone else who is sick.
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     * New loss of taste or smell
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         care facility, or nursing home.
                                                                                                                                                                                                                                                                                                     * New loss of taste or smell
                                                                                                                                                                                                                                                                                                                                                                                                             Defining COVID-19 symptoms for bot (Adult)
 • Take these steps to help <u>protect others from getting sick</u>.
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     *Congestion or runny nose
                                                                                                                                                                                                                                                                                                     *Congestion or runny nose
                                                                                                                                                                                                     MSG_TO: No COVID-19 testing needed at this time.
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            *Blood disorder, such as sickle cell disease or thalassemia
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     * Other symptoms
                                                                                                                                                                                                                                                                                                     * Other symptoms
                                                                                                                                                                                                                                                                                                                                                                                                             Primary COVID-19 symptoms = fever, cough, mild or moderate
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            *Cerebrovascular disease or neurologic condition, such as stroke or dementia
MSG10: <<Sorry you (they) are feeling sick. Stay home (keep them home) and monitor your (their )
                                                                                                                                                                                                                                                                                                                                                                                                            difficulty breathing
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            *Smoking or vaping
 symptoms. Call your (their) medical provider if you (they) get worse.>>
 Watch for <u>COVID-19 symptoms</u>. If you (they) develop any of these symptoms or if you (they) start to feel
                                                                                                                                                                                                                                                                                                                                        If only secondary COVID-19 or

    Secondary COVID-19 symptoms = sore throat, muscle aches or

                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           *None of the above
 worse, call your (their) medical provider, clinician advice line, or telemedicine provider.
                                                                                                                                                                                                                                                       —If any primary COVID-19 symptom<sup>†</sup>
                                                                                                                                                                                                                                                                                                                                         secondary COVID-19 and Other_
                                                                                                                                                                                                                                                                                                                                                                                                           body aches, vomiting or diarrhea, stomach ache or pain in
                                                                                                                                                                                                                                                                                                                                                   symptoms<sup>†</sup>
                                                                                                                                                                                                                                                                                                                                                                                                            abdomen, new loss of taste or smell, rash, and red eye.
 Here are some steps that may help you (them) feel better:
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               If None and
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               If None and
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 —If ≥2 primary COVID-19 symptoms<sup>‡</sup>
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  If 1 primary COVID-19 symptom<sup>‡</sup>
 • Stay at home and rest.
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  <65 YO
                                                                                                                                                                                                                                                                                                                                                                                                              Symptoms have been labeled as primary (classic COVID-19

    Drink plenty of water and other clear liquids to prevent fluid loss (dehydration).

                                                                                                                                                                                                                                                                                                                                                                                                             symptoms) and secondary (additional COVID-19 symptoms) to

    Cover your coughs and sneezes.

                                                                                                                                                                                                                                                                                                                                                                                                              simplify communication in this decision tree.
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            68: Stay home (or Keep your child home)

    Clean your hands often.

                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   G9: Stay home (or Keep your child home)
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               are of yourself (or your child). Call your
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    care of yourself (or your child). Call your
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               nild's) medical provider if you get (or y
MSG11. << Please check with your Ministry of Health or local health department for additional
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    child's) medical provider.
 information and guidelines about COVID-19 in your location.>>
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       7: Contact a medical provider in the care
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           : Contact a medical provider in the ca
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      MSG_T2: You may be eligible for COVID-19 testing.
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     Q18: Do you (they) live in a long-term care
                                                                                                                                                                                                                                                                                                                                                                                                                                                                            Q15: Do you (they) live in a long-term care Yes—
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          nursing home, or homeless shelter wh
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             MSG_T2: You may be eligible for COVID-19 testing.
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              ursing home, or homeless shelt
MSG12: Please consent to use the Coronavirus Self-Checker. Refresh the page to start again.
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     facility, nursing home, or homeless shelter?
                                                                                                                                                                                                                                                                                                                                                                                                                                                                             facility, nursing home, or homeless
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           you (they) live.
                                                                                                                                                                                                                                                                                           7: Contact a medical provider in the care
MSG13: Thanks! Your location has its own self-assessment tool. Please click here** to be directed to it.
                                                                                                                                                                                                                   Q8: Do you (they) live in a long-term care facility,
                                                                                                                                                                                                                                                                                                                                              Q11: Do you (they) live in a long-term care facility,
                                                                                                                                                                                                                                                                                              nursing home, or homeless shelter w
 **Hyperlink to the state's website if they have their own triage tool.
                                                                                                                                                                                                                   nursing home, or homeless shelter?
                                                                                                                                                                                                                                                                                                                                                   nursing home, or homeless shelter?
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   MSG_T2: You may be eligible for COVID-19
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                MSG_T2: You may be eligible for COVID-19 testing.
MSG14: If you start to feel sick, tell a medical provider in the care center, nursing home, or shelter where
                                                                                                                                                                                                                                                                                     MSG_T2: You may be eligible for COVID-19 testing.
MSG15: <<Contact the occupational health provider at your workplace.>>
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               Q19: In the last two weeks, have you (they) worked,
 Tell your occupational health provider (or supervisor) that you have been in contact with someone
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          SG9: Stay home (or Keep your child home)
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               volunteered, or been a patient in a healthcare facility
 diagnosed with COVID-19. You may be asked to wear a mask or cloth covering over your nose and mouth
                                                                                                                                                                                                                                                                                                                                                                                                                                                                       Q16: In the last two weeks, have you (they) worked,
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           e care of yourself (or your child). Call you
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              or worked as a first responder? Healthcare facilities
 to protect yourself and those around you.
                                                                                                                                                                                                                                                                                                                                                                                                                                                                       volunteered, or been a patient in a healthcare facility
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  s) medical provider.
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             include a hospital, medical or dental clinic, long-term
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   are of yourself (or your child). Call you
                                                                                                                                                                                                                                                                                                                                                    Q12: In the last two weeks, have you (they) worked,
   Check your temperature twice a day for 14 days.
                                                                                                                                                                                                                                                                                                                                                                                                                                                                       or worked as a first responder? Healthcare facilities ——Yes—
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  child's) medical provider if you get (or yo
                                                                                                                                                                                                                                                                                         8: Stay home (or Keep your child home)
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              care facility, or nursing home.
 • Watch for COVID-19 symptoms. Learn more about COVID-19 and how you can protect yourself and
                                                                                                                                                                                                                                                                                                                                                   volunteered, or been a patient in a healthcare facility or
                                                                                                                                                                                                                   Q9: In the last two weeks, have you (they) worked,
                                                                                                                                                                                                                                                                                                                                                                                                                                                                       include a hospital, medical or dental clinic, long-term
                                                                                                                                                                                                                                                                                           re of yourself (or your child). Call you
                                                                                                                                             SG9: Stay home (or Keep your child home)
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  gets) worse.
 others on the <u>CDC website</u>.
                                                                                                                                                                                                                                                                                                                                                  worked as a first responder? Healthcare facilities
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         SG6: Contact the occupational health provid
                                                                                                                                                                                                                   volunteered, or been a patient in a healthcare facility or
                                                                                                                                                                                                                                                                                                                                                                                                                                                                       care facility, or nursing home.
                                                                                                                                                                                                                                                                                          hild's) medical provider if you get (or yo
                                                                                                                                                care of yourself (or your child). Call your
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           workplace immediately.
                                                                                                                                                                                                                                                                                                                                                   include a hospital, medical or dental clinic, long-term
                                                                                                                                                                                                                 —worked as a first responder? Healthcare facilities
                                                                                                                                                                                                                                                                                           ets) worse.
                                                                                                                                                 child's) medical provider.
MSG16: <<Monitor for symptoms.>>
                                                                                                                                                                                                                                                                                                                                                   care facility, or nursing home.
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 G6: Contact the occupational health prov
                                                                                                                                                                                                                   include a hospital, medical or dental clinic, long-term
 Watch for COVID-19 symptoms. If you(they) develop symptoms, call your (their) medical provider,
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     MSG_T2: You may be eligible for COVID-19 testing.
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  workplace immediately.
                                                                                                                                                                                                                  care facility, or nursing home.
                                                                                                                                                                                                                                                                                         6: Contact the occupational health provide
 clinician advice line, or telemedicine provider.
                                                                                                                                                                                                                                                                                         workplace immediately.
 Learn more about COVID-19 and steps you (they) can take to protect yourself (themselves) and others on
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           MSG_T2: You may be eligible for COVID-19 testing.
                                                                                                                                               66: Contact the occupational health provid
 the <u>CDC website</u>.
                                                                                                                                               workplace immediately.
                                                                                                                                                                                                                                                                                   MSG_T2: You may be eligible for COVID-19 testing.
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  Q20: Do any of these apply to you (them)? (check any)
MSG17: <<Monitor for symptoms, wear a mask.>>
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   *Chronic lung disease, such as moderate to severe asthma, COPD (chronic obstructive
                                                                                                                                                                                                                                                                                                                                                                                                                                                     Q17: Do any of these apply to you (them)? (check any)
                                                                                                                                                                                                                                                                                                                                 Q13: Do any of these apply to you (them)? (check any)
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   pulmonary disease), cystic fibrosis, or pulmonary fibrosis
    Watch for COVID-19 symptoms. If you (they) develop symptoms, call your (their) medical provider,
                                                                                                                                                                                                                                                                                                                                                                                                                                                     *Chronic lung disease, such as moderate to severe asthma, COPD (chronic obstructive
                                                                                                                                                                                                                                                                                                                                 *Chronic lung disease, such as moderate to severe asthma, COPD (chronic obstructive
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   *Serious heart condition, such as heart failure, cardiomyopathy, heart attack, or blocked
    clinician advice line, or telemedicine provider. When around other people, you (they) will be asked to
                                                                                                                                                                                                                                                                                                                                                                                                                                                     pulmonary disease), cystic fibrosis, or pulmonary fibrosis
                                                                                                                                         MSG_T2: You may be eligible for COVID-19 testing.
                                                                                                                                                                                                         Q10: Do any of these apply to you (them)? (check any)
                                                                                                                                                                                                                                                                                                                                pulmonary disease), cystic fibrosis, or pulmonary fibrosis
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  arteries to the heart
    wear a mask over your (their) nose and mouth to protect yourself (themselves) and those around you
                                                                                                                                                                                                                                                                                                                                                                                                                                                    *Serious heart condition, such as heart failure, cardiomyopathy, heart attack, or blocked
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                                                                                                                                                                                                                                                                                                                                *Serious heart condition, such as heart failure, cardiomyopathy, heart attack, or blocked
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    (them). Masks should not be used for anyone who has trouble breathing, is unconscious,
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                                                                                                                                                                                                          pulmonary disease), cystic fibrosis, or pulmonary fibrosis
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    incapacitated, or otherwise unable to remove the mask on their own.
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                                                                                                                                                                                                                                                                                                                                 *Weakened immune system or taking medications that may cause immune suppression
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                                                                                                                                                                                                         arteries to the heart
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   *High blood pressure
MSG18: <<Monitor for symptoms, stay at home>>
                                                                                                                                                                                                                                                                                                                                                                                                                                                    *Diabetes, chronic kidney disease, or liver disease
                                                                                                                                                                                                          *Weakened immune system or taking medications that may cause immune suppression
                                                                                                                                                                                                                                                                                                                                *Diabetes, chronic kidney disease, or liver disease

    Stay home for 14 days.

                                                                                                                                                                                                                                                                                                                                                                                                                                                    *High blood pressure
                                                                                                                                                                                                                                                                                                                                *High blood pressure

    Take your (their) temperature twice a day and watch for <u>symptoms of COVID-19</u>.

                                                                                                                                              G5: Call medical provider.
                                                                                                                                                                                                 -γes----*Diabetes, chronic kidney disease, or liver disease
• If possible, stay away from people who are at higher risk for getting very sick from COVID-19.
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   *Blood disorder, such as sickle cell disease or thalassemia
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    *Cerebrovascular disease or neurologic condition, such as stroke or dementia
                                                                                                                                                                                                                                                                                                                                                                                                                                                    *Blood disorder, such as sickle cell disease or thalassemia
 • If you (they) develop symptoms, follow <u>CDC guidance</u>.
                                                                                                                                                                                                                                                                                                                               *Blood disorder, such as sickle cell disease or thalassemia
                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   *Smoking or vaping
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                                                                                                                                                                                                                                                                                                                                *Cerebrovascular disease or neurologic condition, such as stroke or dementia
 MSG19: << Contact a medical provider.>>
                                                                                                                                          MSG_T2: You may be eligible for COVID-19 testing.
                                                                                                                                                                                                                                                                                                                                                                                                                                                    *Smoking or vaping
                                                                                                                                                                                                         *Blood disorder, such as sickle cell disease or thalassemia
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 • This tool is intended for people 2 years or older. Please call the child's medical provider, clinician
                                                                                                                                                                                                          *Cerebrovascular disease or neurologic condition, such as stroke or dementia
                                                                                                                                                                                                                                                                                                                                 *Pregnancy
                                                                                                                                                                                                                                                                                                                                                                                                                                                    *None of the above
 advice line, or telemedicine provider.
                                                                                                                                                                                                          *Smoking or vaping
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 Please ask your parent or guardian to help you complete these questions.
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Please ask your parent or guardian to answer these questions with you.
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 MSG22: << Ask a parent or guardian to assist you, or if taking by yourself, share these results with your
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    Please share your results with your parent or guardian

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MSG23: <<Contact a medical provider if you(they) get sick.>>
 Help protect others from getting sick:
                                                                                                                                                                                                                                                                                                                         MSG_T2: You may be eligible for COVID-19 testing. MSG_T2: You may be eligible for COVID-19 testing.
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                                                                                                                                                                                                                                                                                                                                                                                                                                        MSG_T2: You may be eligible for COVID-19 testing.
 • Stay in your room as much as possible except to get medical care.
 • Cover your coughs and sneezes with a tissue or the inside of your elbow.
   Wash your hands often with soap and water.

    Avoid close contact with other people. Stay at least 6 feet away from other people.
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TESTING MESSAGES

Tell an administrator or nurse at your (their) school or daycare that you (they) may have been in contact

• Wear a mask over your (their) nose and mouth to protect you (they) and those around you (them).

Watch for COVID-19 symptoms. Learn more about COVID-19 and how you (they) can protect yourself

TO. <<No COVID-19 testing needed at this time>>
Based on the answers given, you (they) do not need to get tested for COVID-19 at this time.

[No testing message T1]

Wear a mask when around others.

having COVID-19 symptoms.

• Clean your hands often.

Help <u>protect others from getting sick</u>:

with someone with suspected COVID-19.

Clean and disinfect frequently touched surfaces in your room.

Stay in your room as much as possible except to get medical care.

Clean and disinfect frequently touched surfaces in your room.

Wear a cloth face covering when around others.

• Check your (their) temperature twice a day for 14 days.

(themselves) and others on the CDC website.

• Cover your coughs and sneezes with a tissue or the inside of your elbow.

• Avoid close contact with other people. Stay at least 6 feet away from other people.

Monitor your health and notify a medical provider if you think you are getting sicker.

MSG26: <<Contact an administrator or nurse at your (their) school or daycare.>>

• Monitor your health and notify a medical provider if you think you are getting sicker.

MSG24: <<Contact an administrator or nurse at your (their) school or daycare as soon as possible>>

MSG25: <<Contact a medical provider in the care center, nursing home, or homeless shelter where you

Tell a caregiver in your (their) facility that you (they) may have been in close contact with someone

Tell the administrator or nurse at your (their) school or daycare that you (they) are feeling sick.

T2. <<You (they) may be eligible for COVID-19 testing.>>
Visit your health department's website or talk to your healthcare provider for more information. To find a testing location near you, visit the HHS website.
T2. (for non-U.S. respondents). <<You (They) may be eligible for COVID-19 testing>>

Contact your local health department or your medical provider for more information.

CARE MESSAGES

MSG0. << Please make a selection so I can help give you care advice.>> You have not made a selection. Please start again and select options for each question so that I can help give you advice.

MSG1: <<Sounds like you (they) are feeling ok.>> Learn more about COVID-19 and what you can do to stay safe on the CDC website.

[No MSG2]

[No MSG3]

MSG4: << Urgent medical attention may be needed. Please call 911 or go to the Emergency

Department>> Based on your (their) symptoms, you may need urgent medical care. Please call 911 or go to the nearest emergency department.

Tell the 911 operator or emergency staff if you have had contact with someone with COVID-19.

MSG5: <<Call a medical provider.>> Sorry you (they) are not feeling well. Your (their) symptoms may be related to COVID-19. You (they) also have medical conditions that may put you (them) at risk of becoming more seriously ill.

Call your (their) medical provider, clinician advice line, or telemedicine provider. Stay home (or keep them home) except to get medical care. • Do not go to work, school, or public areas including grocery stores, pharmacies, or restaurants. Consider delivery options for food and medicine.

 Do not use public transportation or ride sharing • If you (they) feel worse and you think it is an emergency, call 911 or seek medical care immediately.

• Consider using telehealth services if available.

• Learn how to take care of yourself or someone else who is sick. Take these steps to help protect others from getting sick.

MSG6: <<Contact the occupational health provider at your workplace immediately>> Tell the occupational health provider (or supervisor) in your workplace that you're feeling sick as soon as

MSG7: <<Contact a medical provider in the care center, nursing home, or homeless shelter where you

(they) live.>> Tell a caregiver in your (their) facility that you (they) are sick and need to see a medical provider as soon as possible. Living in a long-term care facility or nursing home may put you (them) at a higher risk for severe illness.

Help <u>protect others from getting sick</u>:

Stay in your room as much as possible except to get medical care.

Cover your coughs and sneezes with a tissue or the inside of your elbow. Wash your hands often with soap and water.

Avoid close contact with other people. Stay at least 6 feet away from other people. Wear a mask when around others.

Clean and disinfect frequently touched surfaces in your room. Monitor your health and notify a medical provider if you think you are getting sicker

MSG8: << Stay home (keep them home) and take care of yourself (them). Call your (their) medical provider if you (they) get worse>>

Sorry you(they) are not feeling well. Your symptoms may be related to COVID-19. • Stay at home (or Keep them home) except to get medical care. • Do not go to work, school, or public areas including grocery stores, pharmacies, or restaurants.

Consider delivery options for food and medicine. • Do not use public transportation or ride sharing

 If you (they) feel worse and you think it is an emergency, call 911 or seek medical care immediately.

Learn how to take care of yourself or someone else who is sick.

Take these steps to help <u>protect others from getting sick</u>.

MSG9: << Stay home (keep them home) and take care of yourself (them). Call your (their) medical provider. >>

Sorry you (they) are not feeling well. Your (their) symptom(s) may be related to COVID-19. Call your (their) medical provider, clinician advice line, or telemedicine provider.

Stay at home (or keep them home) except to get medical care. Do not go to work, school, or public areas.

• Do not use public transportation or ride sharing.

• If you (they) feel worse and you think it is an emergency, call 911 or seek medical care

Consider using telehealth services if available.

Learn how to take care of yourself or someone else who is sick.

Take these steps to help <u>protect others from getting sick</u>. MSG10: <<Sorry you (they) are feeling sick. Stay home (keep them home) and monitor your (their)

symptoms. Call your (their) medical provider if you (they) get worse.>> Watch for <u>COVID-19 symptoms</u>. If you (they) develop any of these symptoms or if you (they) start to feel worse, call your (their) medical provider, clinician advice line, or telemedicine provider.

Here are some steps that may help you (them) feel better:

• Stay at home and rest. Drink plenty of water and other clear liquids to prevent fluid loss (dehydration).

Cover your coughs and sneezes. • Clean your hands often.

MSG11. << Please check with your Ministry of Health or local health department for additional information and guidelines about COVID-19 in your location.>>

MSG12: Please consent to use the Coronavirus Self-Checker. Refresh the page to start again.

MSG13: Thanks! Your location has its own self-assessment tool. Please click <u>here</u>** to be directed to it. **Hyperlink to the state's website if they have their own triage tool.

MSG14: If you start to feel sick, tell a medical provider in the care center, nursing home, or shelter where

MSG15: <<Contact the occupational health provider at your workplace.>>

Tell your occupational health provider (or supervisor) that you have been in contact with someone diagnosed with COVID-19. You may be asked to wear a mask or cloth covering over your nose and mouth

to protect yourself and those around you.

• Check your temperature twice a day for 14 days. • Watch for COVID-19 symptoms. Learn more about COVID-19 and how you can protect yourself and others on the CDC website.

MSG16: <<Monitor for symptoms.>>

Watch for COVID-19 symptoms. If you(they) develop symptoms, call your (their) medical provider, clinician advice line, or telemedicine provider.

Learn more about COVID-19 and steps you (they) can take to protect yourself (themselves) and others on the CDC website.

MSG17: <<Monitor for symptoms, wear a mask.>>

Watch for COVID-19 symptoms. If you (they) develop symptoms, call your (their) medical provider, clinician advice line, or telemedicine provider. When around other people, you (they) will be asked to wear a mask over your (their) nose and mouth to protect yourself (themselves) and those around you (them). Masks should not be used for anyone who has trouble breathing, is unconscious, incapacitated, or otherwise unable to remove the mask on their own.

MSG18: <<Monitor for symptoms, stay at home>>

• Stay home for 14 days. Take your (their) temperature twice a day and watch for symptoms of COVID-19.

• If possible, stay away from people who are at higher risk for getting very sick from COVID-19. • If you (they) develop symptoms, follow <u>CDC guidance</u>.

MSG19: << Contact a medical provider.>>

• This tool is intended for people 2 years or older. Please call the child's medical provider, clinician advice line, or telemedicine provider.

Please ask your parent or guardian to help you complete these questions.

Please ask your parent or guardian to answer these questions with you.

MSG22: << Ask a parent or guardian to assist you, or if taking by yourself, share these results with your parent/guardian.>>

• Please share your results with your parent or guardian

MSG23: <<Contact a medical provider if you(they) get sick.>> Help <u>protect others from getting sick</u>:

• Stay in your room as much as possible except to get medical care. Cover your coughs and sneezes with a tissue or the inside of your elbow.

Wash your hands often with soap and water. Avoid close contact with other people. Stay at least 6 feet away from other people. Wear a mask when around others.

Clean and disinfect frequently touched surfaces in your room. Monitor your health and notify a medical provider if you think you are getting sicker.

MSG24: <<Contact an administrator or nurse at your (their) school or daycare as soon as possible>> Tell the administrator or nurse at your (their) school or daycare that you (they) are feeling sick.

MSG25: << Contact a medical provider in the care center, nursing home, or homeless shelter where you Tell a caregiver in your (their) facility that you (they) may have been in close contact with someone

having COVID-19 symptoms. Help protect others from getting sick:

(themselves) and others on the CDC website.

Stay in your room as much as possible except to get medical care.

Cover your coughs and sneezes with a tissue or the inside of your elbow. Clean your hands often.

Clean and disinfect frequently touched surfaces in your room.

Avoid close contact with other people. Stay at least 6 feet away from other people. Wear a cloth face covering when around others.

Monitor your health and notify a medical provider if you think you are getting sicker.

MSG26: <<Contact an administrator or nurse at your (their) school or daycare.>> Tell an administrator or nurse at your (their) school or daycare that you (they) may have been in contact with someone with suspected COVID-19.

• Wear a mask over your (their) nose and mouth to protect you (they) and those around you (them).

• Check your (their) temperature twice a day for 14 days. • Watch for COVID-19 symptoms. Learn more about COVID-19 and how you (they) can protect yourself

TESTING MESSAGES

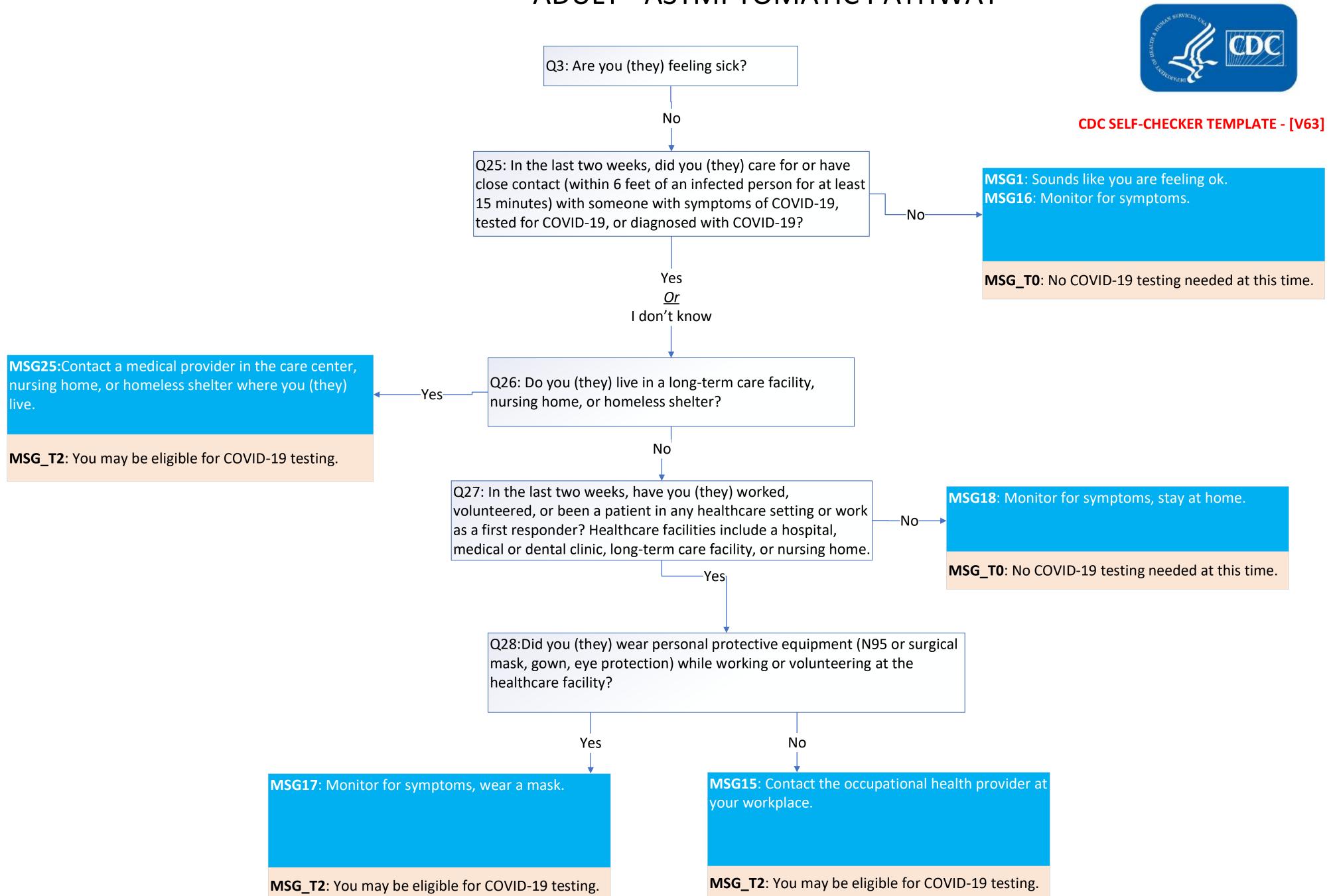
T0. <<No COVID-19 testing needed at this time>> Based on the answers given, you (they) do not need to get tested for COVID-19 at this time.

[No testing message T1]

T2. <<You (they) may be eligible for COVID-19 testing.>> Visit your health department's website or talk to your healthcare provider for more information. To find a testing location near you, visit the HHS website.

T2. (for non-U.S. respondents). << You (They) may be eligible for COVID-19 testing>> Contact your local health department or your medical provider for more information.

ADULT - ASYMPTOMATIC PATHWAY



CARE MESSAGES

You have not made a selection. Please start again and select options for each question so that I can help give you advice.

MSG1: <<Sounds like you (they) are feeling ok.>> Learn more about COVID-19 and what you can do to stay safe on the CDC website.

MSG4: << Urgent medical attention may be needed. Please call 911 or go to the Emergency

Based on your (their) symptoms, you may need urgent medical care. Please call 911 or go to the nearest Tell the 911 operator or emergency staff if you have had contact with someone with COVID-19.

MSG5: <<Call a medical provider.>> Sorry you (they) are not feeling well. Your (their) symptoms may be related to COVID-19. You (they) also have medical conditions that may put you (them) at risk of becoming more seriously ill.

• Call your (their) medical provider, clinician advice line, or telemedicine provider.

 Stay home (or keep them home) except to get medical care. Do not go to work, school, or public areas including grocery stores, pharmacies, or restaurants. Consider delivery options for food and medicine.

 Do not use public transportation or ride sharing • If you (they) feel worse and you think it is an emergency, call 911 or seek medical care immediately. • Consider using telehealth services if available.

• Learn how to take care of yourself or someone else who is sick. • Take these steps to help <u>protect others from getting sick</u>.

MSG6: <<Contact the occupational health provider at your workplace immediately>> Tell the occupational health provider (or supervisor) in your workplace that you're feeling sick as soon as

MSG7: <<Contact a medical provider in the care center, nursing home, or homeless shelter where you Tell a caregiver in your (their) facility that you (they) are sick and need to see a medical provider as soon as possible. Living in a long-term care facility or nursing home may put you (them) at a higher risk for

Help <u>protect others from getting sick</u>:

 Stay in your room as much as possible except to get medical care. Cover your coughs and sneezes with a tissue or the inside of your elbow.

 Wash your hands often with soap and water. • Avoid close contact with other people. Stay at least 6 feet away from other people. • Wear a mask when around others.

• Clean and disinfect frequently touched surfaces in your room. Monitor your health and notify a medical provider if you think you are getting sicker

MSG8: << Stay home (keep them home) and take care of yourself (them). Call your (their) medical provider if you (they) get worse>>

Sorry you(they) are not feeling well. Your symptoms may be related to COVID-19. • Stay at home (or Keep them home) except to get medical care.

• Do not go to work, school, or public areas including grocery stores, pharmacies, or restaurants. Consider delivery options for food and medicine. Do not use public transportation or ride sharing

If you (they) feel worse and you think it is an emergency, call 911 or seek medical care

Learn how to take care of yourself or someone else who is sick. • Take these steps to help <u>protect others from getting sick</u>.

MSG9: << Stay home (keep them home) and take care of yourself (them). Call your (their) medical

Sorry you (they) are not feeling well. Your (their) symptom(s) may be related to COVID-19.

• Call your (their) medical provider, clinician advice line, or telemedicine provider.

 Stay at home (or keep them home) except to get medical care. Do not go to work, school, or public areas. Do not use public transportation or ride sharing.

If you (they) feel worse and you think it is an emergency, call 911 or seek medical care Consider using telehealth services if available.

• Learn how to take care of yourself or someone else who is sick. Take these steps to help <u>protect others from getting sick</u>.

MSG10: <<Sorry you (they) are feeling sick. Stay home (keep them home) and monitor your (their) symptoms. Call your (their) medical provider if you (they) get worse.>> Watch for <u>COVID-19 symptoms</u>. If you (they) develop any of these symptoms or if you (they) start to feel worse, call your (their) medical provider, clinician advice line, or telemedicine provider.

Here are some steps that may help you (them) feel better: • Stay at home and rest.

 Cover your coughs and sneezes. • Clean your hands often.

• Drink plenty of water and other clear liquids to prevent fluid loss (dehydration).

MSG11. << Please check with your Ministry of Health or local health department for additional information and guidelines about COVID-19 in your location.>>

MSG12: Please consent to use the Coronavirus Self-Checker. Refresh the page to start again.

**Hyperlink to the state's website if they have their own triage tool. MSG14: If you start to feel sick, tell a medical provider in the care center, nursing home, or shelter where

MSG13: Thanks! Your location has its own self-assessment tool. Please click here** to be directed to it.

MSG15: <<Contact the occupational health provider at your workplace.>>

Tell your occupational health provider (or supervisor) that you have been in contact with someone diagnosed with COVID-19. You may be asked to wear a mask or cloth covering over your nose and mouth to protect yourself and those around you.

• Check your temperature twice a day for 14 days. • Watch for COVID-19 symptoms. Learn more about COVID-19 and how you can protect yourself and others on the CDC website.

MSG16: <<Monitor for symptoms.>> Watch for COVID-19 symptoms. If you(they) develop symptoms, call your (their) medical provider,

clinician advice line, or telemedicine provider. Learn more about COVID-19 and steps you (they) can take to protect yourself (themselves) and others on the <u>CDC website</u>.

MSG17: << Monitor for symptoms, wear a mask.>> Watch for COVID-19 symptoms. If you (they) develop symptoms, call your (their) medical provider, clinician advice line, or telemedicine provider. When around other people, you (they) will be asked to wear a mask over your (their) nose and mouth to protect yourself (themselves) and those around you

*Obesity

Q9-PED-No and

Q10-None

ISG9: Stay home (or Keep your child home) and

MSG_T2: You may be eligible for COVID-19 testing.

child's) medical provider

e care of yourself (or your child). Call your (or

MSG9: Stay home (or Keep your child home) and

child's) medical provider

take care of yourself (or your child). Call your (c

G24: Contact an administrator or nurse at you

our child's) school or daycare as soon as

MSG_T2: You may be eligible for COVID-19 testing.

incapacitated, or otherwise unable to remove the mask on their own. MSG18: << Monitor for symptoms, stay at home>>

Wear a mask when around others.

with someone with suspected COVID-19.

• Stay home for 14 days. • Take your (their) temperature twice a day and watch for <u>symptoms of COVID-19</u>. • If possible, stay away from people who are at higher risk for getting very sick from COVID-19.

(them). Masks should not be used for anyone who has trouble breathing, is unconscious,

MSG19: << Contact a medical provider.>> • This tool is intended for people 2 years or older. Please call the child's medical provider, clinician

advice line, or telemedicine provider. Please ask your parent or guardian to help you complete these questions.

• If you (they) develop symptoms, follow <u>CDC guidance</u>.

Please ask your parent or guardian to answer these questions with you.

MSG22: << Ask a parent or guardian to assist you, or if taking by yourself, share these results with your parent/guardian.>>

 Please share your results with your parent or guardian MSG23: <<Contact a medical provider if you(they) get sick.>> Help <u>protect others from getting sick</u>:

 Stay in your room as much as possible except to get medical care. • Cover your coughs and sneezes with a tissue or the inside of your elbow. Wash your hands often with soap and water. Avoid close contact with other people. Stay at least 6 feet away from other people.

 Clean and disinfect frequently touched surfaces in your room. • Monitor your health and notify a medical provider if you think you are getting sicker.

MSG24: <<Contact an administrator or nurse at your (their) school or daycare as soon as possible>> Tell the administrator or nurse at your (their) school or daycare that you (they) are feeling sick.

MSG25: <<Contact a medical provider in the care center, nursing home, or homeless shelter where you Tell a caregiver in your (their) facility that you (they) may have been in close contact with someone having COVID-19 symptoms. Help <u>protect others from getting sick</u>:

 Stay in your room as much as possible except to get medical care. Cover your coughs and sneezes with a tissue or the inside of your elbow. • Clean your hands often. • Avoid close contact with other people. Stay at least 6 feet away from other people.

 Wear a cloth face covering when around others. Clean and disinfect frequently touched surfaces in your room. • Monitor your health and notify a medical provider if you think you are getting sicker. MSG26: <<Contact an administrator or nurse at your (their) school or daycare.>>

• Wear a mask over your (their) nose and mouth to protect you (they) and those around you (them). • Check your (their) temperature twice a day for 14 days. Watch for COVID-19 symptoms. Learn more about COVID-19 and how you (they) can protect yourself (themselves) and others on the CDC website.

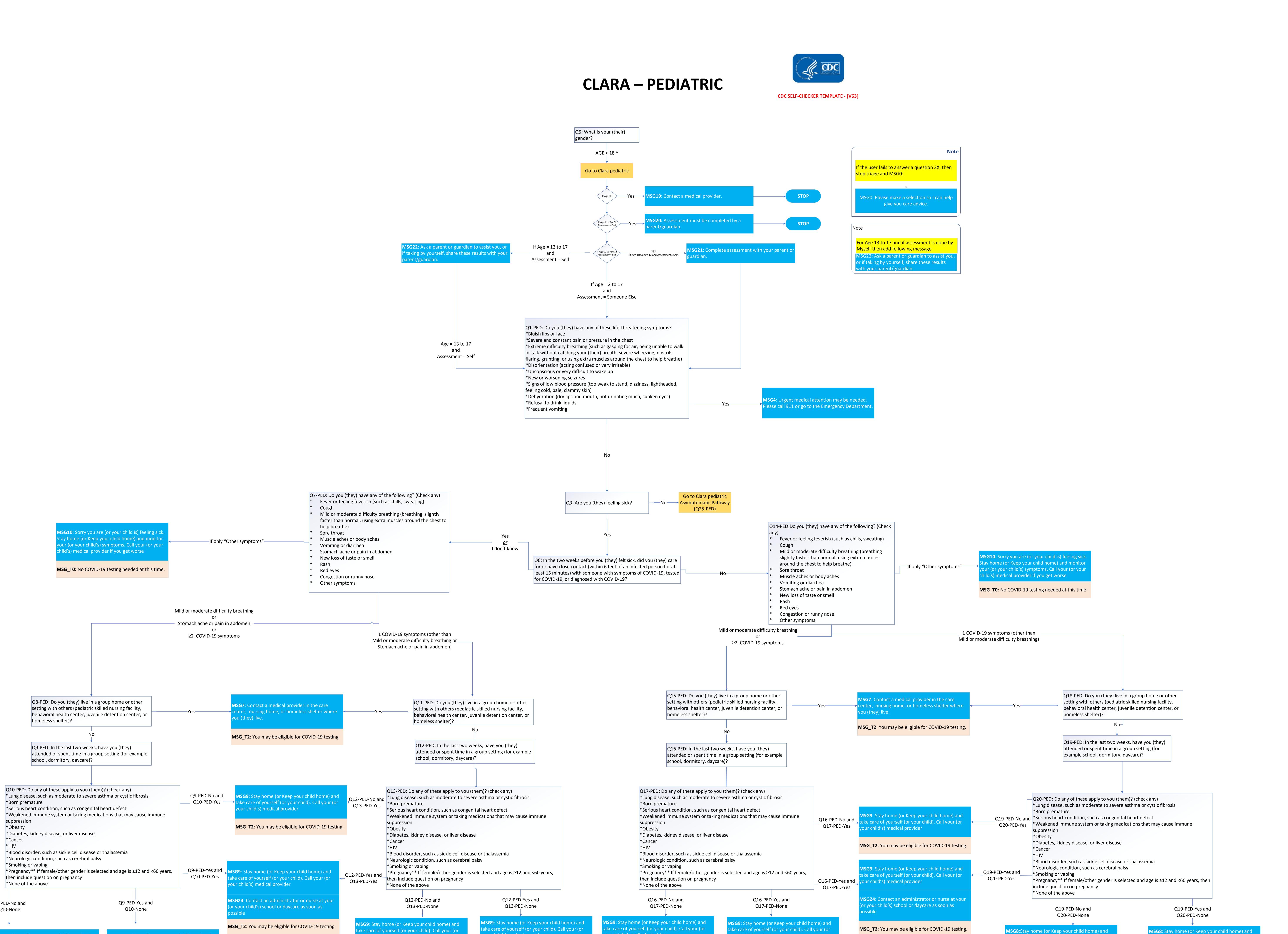
Tell an administrator or nurse at your (their) school or daycare that you (they) may have been in contact

TESTING MESSAGES

TO. <<No COVID-19 testing needed at this time>> Based on the answers given, you (they) do not need to get tested for COVID-19 at this time. [No testing message T1]

Contact your local health department or your medical provider for more information.

T2. <<You (they) may be eligible for COVID-19 testing.>> Visit your health department's website or talk to your healthcare provider for more information. To find a testing location near you, visit the HHS website. T2. (for non-U.S. respondents). <<You (They) may be eligible for COVID-19 testing>>



r child's) medical provider

MSG_T2: You may be eligible for COVID-19 testing.

child's) medical provider

24: Contact an administrator or nurse at yo

our child's) school or daycare as soon as

MSG_T2: You may be eligible for COVID-19 testing.

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G24: Contact an administrator or nurse at yo

your child's) school or daycare as soon as

MSG_T2: You may be eligible for COVID-19 testing.

child's) medical provider

624: Contact an administrator or nurse at

our child's) school or daycare as soon as

MSG_T2: You may be eligible for COVID-19 testing.

child's) medical provider

MSG_T2: You may be eligible for COVID-19 testing.

CARE MESSAGES MSG0. << Please make a selection so I can help give you care advice.>> You have not made a selection. Please start again and select options for each question so that I can help give you advice. MSG1: <<Sounds like you (they) are feeling ok.>> Learn more about COVID-19 and what you can do to stay safe on the CDC website. [No MSG2] [No MSG3] MSG4: << Urgent medical attention may be needed. Please call 911 or go to the Emergency Based on your (their) symptoms, you may need urgent medical care. Please call 911 or go to the nearest Tell the 911 operator or emergency staff if you have had contact with someone with COVID-19. MSG5: <<Call a medical provider.>> Sorry you (they) are not feeling well. Your (their) symptoms may be related to COVID-19. You (they) also have medical conditions that may put you (them) at risk of becoming more seriously ill. • Call your (their) medical provider, clinician advice line, or telemedicine provider. Stay home (or keep them home) except to get medical care. Do not go to work, school, or public areas including grocery stores, pharmacies, or restaurants. Consider delivery options for food and medicine. Do not use public transportation or ride sharing • If you (they) feel worse and you think it is an emergency, call 911 or seek medical care immediately. Consider using telehealth services if available. • Learn how to take care of yourself or someone else who is sick. • Take these steps to help <u>protect others from getting sick</u>. MSG6: <<Contact the occupational health provider at your workplace immediately>> Tell the occupational health provider (or supervisor) in your workplace that you're feeling sick as soon as MSG7: << Contact a medical provider in the care center, nursing home, or homeless shelter where you Tell a caregiver in your (their) facility that you (they) are sick and need to see a medical provider as soon as possible. Living in a long-term care facility or nursing home may put you (them) at a higher risk for severe illness. Help <u>protect others from getting sick</u>: Stay in your room as much as possible except to get medical care. Cover your coughs and sneezes with a tissue or the inside of your elbow. Wash your hands often with soap and water. Avoid close contact with other people. Stay at least 6 feet away from other people. Wear a mask when around others. • Clean and disinfect frequently touched surfaces in your room. Monitor your health and notify a medical provider if you think you are getting sicker MSG8: << Stay home (keep them home) and take care of yourself (them). Call your (their) medical provider if you (they) get worse>> Sorry you(they) are not feeling well. Your symptoms may be related to COVID-19. • Stay at home (or Keep them home) except to get medical care. • Do not go to work, school, or public areas including grocery stores, pharmacies, or restaurants. Consider delivery options for food and medicine. Do not use public transportation or ride sharing If you (they) feel worse and you think it is an emergency, call 911 or seek medical care • Learn how to take care of yourself or someone else who is sick. • Take these steps to help <u>protect others from getting sick</u>. MSG9: << Stay home (keep them home) and take care of yourself (them). Call your (their) medical Sorry you (they) are not feeling well. Your (their) symptom(s) may be related to COVID-19. • Call your (their) medical provider, clinician advice line, or telemedicine provider. • Stay at home (or keep them home) except to get medical care. Do not go to work, school, or public areas. Do not use public transportation or ride sharing. • If you (they) feel worse and you think it is an emergency, call 911 or seek medical care Consider using telehealth services if available. • Learn how to take care of yourself or someone else who is sick. • Take these steps to help <u>protect others from getting sick</u>. MSG10: <<Sorry you (they) are feeling sick. Stay home (keep them home) and monitor your (their) symptoms. Call your (their) medical provider if you (they) get worse.>> Watch for COVID-19 symptoms. If you (they) develop any of these symptoms or if you (they) start to feel worse, call your (their) medical provider, clinician advice line, or telemedicine provider. Here are some steps that may help you (them) feel better: • Stay at home and rest. • Drink plenty of water and other clear liquids to prevent fluid loss (dehydration). Cover your coughs and sneezes. • Clean your hands often. MSG11. << Please check with your Ministry of Health or local health department for additional information and guidelines about COVID-19 in your location.>> MSG12: Please consent to use the Coronavirus Self-Checker. Refresh the page to start again. MSG13: Thanks! Your location has its own self-assessment tool. Please click here** to be directed to it. **Hyperlink to the state's website if they have their own triage tool. MSG14: If you start to feel sick, tell a medical provider in the care center, nursing home, or shelter where MSG15: <<Contact the occupational health provider at your workplace.>> Tell your occupational health provider (or supervisor) that you have been in contact with someone diagnosed with COVID-19. You may be asked to wear a mask or cloth covering over your nose and mouth to protect yourself and those around you. • Check your temperature twice a day for 14 days. Watch for <u>COVID-19 symptoms</u>. Learn more about COVID-19 and how you can protect yourself and others on the CDC website. MSG16: <<Monitor for symptoms.>> Watch for COVID-19 symptoms. If you(they) develop symptoms, call your (their) medical provider, clinician advice line, or telemedicine provider. Learn more about COVID-19 and steps you (they) can take to protect yourself (themselves) and others on the <u>CDC website</u>. MSG17: << Monitor for symptoms, wear a mask.>> Watch for COVID-19 symptoms. If you (they) develop symptoms, call your (their) medical provider, clinician advice line, or telemedicine provider. When around other people, you (they) will be asked to wear a mask over your (their) nose and mouth to protect yourself (themselves) and those around you (them). Masks should not be used for anyone who has trouble breathing, is unconscious, incapacitated, or otherwise unable to remove the mask on their own. MSG18: <<Monitor for symptoms, stay at home>> • Stay home for 14 days. Take your (their) temperature twice a day and watch for <u>symptoms of COVID-19</u>. • If possible, stay away from people who are at higher risk for getting very sick from COVID-19. • If you (they) develop symptoms, follow <u>CDC guidance</u>. MSG19: << Contact a medical provider.>> • This tool is intended for people 2 years or older. Please call the child's medical provider, clinician advice line, or telemedicine provider. Please ask your parent or guardian to help you complete these questions. Please ask your parent or guardian to answer these questions with you. MSG22: << Ask a parent or guardian to assist you, or if taking by yourself, share these results with your parent/guardian.>> Please share your results with your parent or guardian MSG23: <<Contact a medical provider if you(they) get sick.>> Help <u>protect others from getting sick</u>: Stay in your room as much as possible except to get medical care. Cover your coughs and sneezes with a tissue or the inside of your elbow. Wash your hands often with soap and water. Avoid close contact with other people. Stay at least 6 feet away from other people. Wear a mask when around others. Clean and disinfect frequently touched surfaces in your room. Monitor your health and notify a medical provider if you think you are getting sicker. MSG24: <<Contact an administrator or nurse at your (their) school or daycare as soon as possible>> Tell the administrator or nurse at your (their) school or daycare that you (they) are feeling sick. MSG25: <<Contact a medical provider in the care center, nursing home, or homeless shelter where you Tell a caregiver in your (their) facility that you (they) may have been in close contact with someone having COVID-19 symptoms. Help <u>protect others from getting sick</u>: • Stay in your room as much as possible except to get medical care. • Cover your coughs and sneezes with a tissue or the inside of your elbow.

TESTING MESSAGES

Tell an administrator or nurse at your (their) school or daycare that you (they) may have been in contact

• Wear a mask over your (their) nose and mouth to protect you (they) and those around you (them).

• Watch for COVID-19 symptoms. Learn more about COVID-19 and how you (they) can protect yourself

Avoid close contact with other people. Stay at least 6 feet away from other people.

Monitor your health and notify a medical provider if you think you are getting sicker.

MSG26: <<Contact an administrator or nurse at your (their) school or daycare.>>

• Clean your hands often.

with someone with suspected COVID-19.

Wear a cloth face covering when around others.

• Check your (their) temperature twice a day for 14 days.

(themselves) and others on the CDC website.

• Clean and disinfect frequently touched surfaces in your room.

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To. <<No COVID-19 testing needed at this time>>
Based on the answers given, you (they) do not need to get tested for COVID-19 at this time.

[No testing message T1]

T2. <<You (they) may be eligible for COVID-19 testing.>>
Visit your health department's website or talk to your healthcare provider for more information. To find a testing location near you, visit the HHS website.

T2. (for non-U.S. respondents). <<You (They) may be eligible for COVID-19 testing>>
Contact your local health department or your medical provider for more information.
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