

Dr Giorgio Petricca Inc, #503 – 495 Dunsmuir Street, Nanaimo (250) 754-1233

This Form is to be completed by ALL PATIENTS before their appointment and on arrival of their appointment

Staff screener: _____

Patient Name: _____ Patient age: _____

Who answered: Patient Other (specify) _____

Contact Method: Phone email Other _____

Identify yourself and explain the purpose of the call, which is to determine whether there are any special considerations for their dental appointment. Have the patient answer the following questions.

| Screening Questions | Pre-Screen | | In-Office | |
|--|------------|----|-----------|----|
| 1. Do you have a fever or have felt hot or feverish anytime in the last two weeks? Patient temperature at appointment: _____. If elevated, provide mask to patient. | YES | NO | YES | NO |
| 2. Do you have any of these symptoms: Dry cough? Shortness of breath? Difficulty breathing? Sore throat? Runny nose? Sneezing? Post-nasal drip? | YES | NO | YES | NO |
| 3. Have you experienced a recent loss of smell or taste? | YES | NO | YES | NO |
| 4. Have you been in contact with any confirmed COVID-19 positive patients, or persons self-isolating because of a determined risk for COVID-19? | YES | NO | YES | NO |
| 5. Have you returned from travel outside of Canada in the last 14 days? | YES | NO | YES | NO |
| 6. Have you returned from travel within Canada from a location known affected with COVID-19? | YES | NO | YES | NO |
| 7. Is your workplace considered high risk? | YES | NO | YES | NO |

Patient Vulnerability

| | | | | |
|---|-----|----|-----|----|
| 8. Are you over the age of 70? | YES | NO | YES | NO |
| 9. Do you have any of the following? Heart disease, lung disease, kidney disease, diabetes or any auto-immune disorder? | YES | NO | YES | NO |

- Any “yes” response for questions 1-7 must be discussed with the managing dentist immediately.
 - Tell the patient when they arrive at the office, they will be asked to: sanitize their hands; answer the questions again; have their temperature taken; complete a form acknowledging the risk of COVID-19.
- Advise the patient:
 - Only patients are allowed to come to the office.
 - If possible to wait in their car until their appointment, call the office when they arrive.