COVID-19 Screening Questions for In-person Research

1. Have you had a positive COVID test or any of the following symptoms in the past 14 days, which were not diagnosed as something other than Covid-19, even if they were mild? ☐ Yes ☐ No
   
   a. Check the symptoms you experienced:
      ☐ Fever ☐ Cough ☐ Shortness of breath or difficulty breathing ☐ Loss of the sense of smell or taste ☐ Sore throat ☐ Chills ☐ Muscle pain not due to injury or strain

2. Are you currently living with someone who has tested positive for COVID or has any of the following symptoms in the past 14 days, which were not diagnosed as something other than Covid-19, even if they were mild? ☐ Yes ☐ No
   
   a. Check the symptoms the person experienced:
      ☐ Fever ☐ Cough ☐ Shortness of breath or difficulty breathing ☐ Loss of the sense of smell or taste ☐ Sore throat ☐ Chills ☐ Muscle pain not due to injury or strain

3. In the last 14 days, have you lived with, visited, cared for, or been in a room for a prolonged period with someone who is under investigation or has been confirmed for COVID-19/coronavirus infection? ☐ Yes ☐ No

   If YES is checked for questions 1-3, postpone your in-person session for a minimum of 14 days.

4. Are you considered in a higher risk category for severe illness from COVID-19?
   ☐ Yes ☐ No

   Please answer yes to question 4 if any of the following applies to you:
   a. You are over 60
   b. You have chronic kidney disease, COPD, weakened immune system, Obesity, Heart failure, Coronary artery disease, cardiomyopathy, sickle cell disease, type 2 diabetes

   If YES is checked for question 4, remote data collection is recommended. If in-person research activities are required, then additional protections should be in place to protect participants.