

Energy Northwest COVID-19 Site Access Screening Checklist –Revision 5

PART I		
Yes	No	
		In the last 14 days, has the employee tested positive due COVID-19 OR waiting on test results for COVID-19 due to exhibiting symptoms <i>*Discretionary testing or antibody testing is not applicable to this question.</i>
Within the last 72 hours have you, or a person you have CLOSE daily contact with (spouse, resident parents, children) displayed any of the following symptoms?		
Yes	No	Symptom
		Fever (100.4°F) or higher
		Deep Persistent Cough (respiratory aggravation / distress)
		Difficulty breathing (feeling “winded”; struggling to draw in full breath)
		New loss of taste or smell not attributed to other medical condition (allergies, cold)
If you answered YES to ANY question DO NOT REPORT TO WORK and call your supervisor and personal medical health professional.		
PART II		
Yes	No	Question
		In the last 14 days, to the best of your knowledge, have you had CLOSE* contact with someone who tested positive for COVID-19?
		In the last 14 days, to the best of your knowledge, have you had CLOSE* contact with someone who has been tested for COVID-19, the test results are not yet available, and the person had the symptoms of Part I at the time of the contact?
If you answered YES to ANY of these questions DO NOT REPORT TO WORK and call your supervisor and personal medical health professional.		

**CLOSE contact: Being within approximately 6 feet (2 meters) of a COVID-19 case for prolonged period of time; close contact can occur while caring for, living with, visiting, or sharing a healthcare waiting area or room with a COVID-19 case OR having direct contact with infectious secretions of a COVID-19 case (e.g., being coughed on).*

Screening for Emergency First Responders is NOT required at the Security Check Point.

For further information, see “Guidance for Screening and Actions for Employees with Risk of COVID-19 Exposure or Symptoms” and [“Return to Work Criteria Document”](#).