**Visitor Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**1. Has this individual washed their hands or used alcohol-based hand rub (ABHR) on entry?**

* Yes
* No – please ask them to do so.

**2. Ask the individual if they have any of the following respiratory symptoms?**

* Fever (checking for temperature is not necessary)
* Sore throat
* Cough
* New shortness of breath
* Flu-like symptoms

*If YES to any*, restrict them from entering the building.

*If NO to all,* proceed to question #3.

**3. Ask the individual if they have:**

* Travelled internationally within the last 14 days to areas where COVID-19 cases have been confirmed
* Worked in another setting that has confirmed COVID-19 cases (this may change as COVID spread)

*If YES to any*, restrict them from entering the building.

*If NO to all,* proceed to question #4.

**4. Purpose for their visit/entry:**

* Maintaining the operations of the facility, equipment, and/or instruments
* Business development meeting
* Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Routine social visits should be strongly discouraged*

**5. Remind the individual:**

* Must wear a face covering while in the building
* Restrict their visit to only the locations needed to perform their tasks
* Wash their hands or use ABHR throughout their time in the building
* Not shake hands with or touch individuals during their visit
* Maintain 6 feet distancing from other personnel
* Limit in person meetings to 5 people or fewer