

## 14-Day Self-Quarantine Checklist

## Daily list:

- No contact with other people or pets; do not leave unless medical care is needed; no visitor.
- Temperature taken 2x daily and self-monitored for symptoms
- Self-monitor well-being! Connect with others via social media and get outside!
- Wash hands or use hand sanitizer prior to any interactions with others.
- Do not touch anything that is used by another person of the household. If you must, clean and sanitize all touched items after use. This includes doorknobs, bathrooms, handrails, etc.
- Use a mask and social distancing when passing through a room with other people.
- Eat in a separate location from others.
- Wash hands after using a tissue; do not touch face, eyes, nose, mouth.
- In the chart below, note daily temperatures, any symptoms of illness (such as cough, sore throat, shortness of breath, loss of taste/smell, fever, nausea, chills, vomiting, muscle pain, diarrhea), and affirmation of following the above checklist (yes/no).

Start date of	f Day 1:						
Date of CO	VID test (NAA	AT or Antigen	test) taken o	on day 3, 4	or 5		
Date of vac	cinations (sta	rt after negat	tive COVID to	est)			
Day	1	2	3	4	5	6	7
A.M. Temp & Symptoms							
P.M. Temp & Symptoms							
Complied with daily list above							
Day	8	9	10	11	12	13	14
A.M. Temp & Symptoms							
P.M. Temp & Symptoms							
Complied with daily list above							
		Follow	wing the 14-D	ay Self-Qua	rantine		
	Clean and dis	sinfect the ent	ire bathroom		Disinfect all common surfaces		
		y (leave in bin re washing in			Place all dishes in dishwasher; return to usual house rules regarding where to eat in the home		
	Empty trash				Read Health Guidelines to follow post guarantine		

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