

Coronavirus Disease (COVID-19):

English

Daily Workplace Health Self-Screening for Employees

Name:

Building:

Date:

Supervisor:

Department:

Have you tested positive for COVID-19 within the past 14 days?

Yes

No

Have you knowingly been exposed to an individual with a confirmed or suspected case of COVID-19 within the past 14 days?

Yes

No

Have you been asked to self-isolate or quarantine by a medical professional or public health official within the past 14 days?

Yes

No

Are you currently experiencing any of these symptoms (*excluding those known to be caused by a medical reason other than COVID-19*)?

- Fever (100.4 or greater) or chills
- Cough
- Shortness of breath or difficulty breathing
- Muscle or body aches
- New loss of taste or smell
- Sore throat
- Vomiting or diarrhea

Yes

No

The purpose of the self-health screen is to proactively identify situations in which an employee must remain off campus in an effort to mitigate the presence and spread of COVID-19 in the Butler community.

All employees are required to complete the self-health screen and temperature self-check every day before coming to campus, and at least one hour before the start of their work day. Employees do not need to complete the screening if they are not coming to campus that day or if they are working from home. If you answer "YES" for any item above then STAY HOME and contact your health care provider's office for direction. If you answer "NO" to all the questions above, then REPORT TO WORK. If you are using this paper form, then call your supervisor daily and at least one hour before the start of your regular work day.

For questions please contact askhr@butler.edu

Thank you for keeping our campus safe!

BUTLER UNIVERSITY

1. If you answered **yes** to any of the questions, **STAY HOME** and contact your health care provider. Your supervisor will be notified automatically.

2. Return to work instructions - If you answered 'Yes ' to any of the questions, you can return to work if and when:
 - You have recovered and completed the isolation or quarantine period as prescribed by a health care provider **OR**

 - Your symptoms have resolved and/or a health care provider has cleared you to return to work, you have not tested positive for COVID-19, you have not knowingly been exposed to COVID-19 **AND**

 - If you had a fever but at least 3 days (72 hours) have passed and you are fever-free (without using medication).

3. Additional information/guidelines:
 - While you are at home, you do not need to complete the daily health self-screening form.

 - Contact your supervisor regarding time reporting.

 - If applicable, a case manager will be assigned to you from the Butler University Health Center, who will work with you and HR to assist you through the steps of contact tracing.

 - To initiate a Family Medical Leave claim, please contact Sedgwick at 1-888-436-9530.

Please contact askHR@butler.edu with any questions you may have.

Thank you for keeping our campus safe!