



COVID-19

Do you have any of the following new or worsening symptoms?



Fever/Chills



Cough



Difficulty breathing/
Shortness of breath



Sore throat/
Difficulty swallowing



Runny nose
(unrelated to
seasonal allergies)



Loss of taste
or smell



Not feeling well,
headache, unexplained
tiredness and muscle aches



Nausea, vomiting,
diarrhea,
abdominal pain



In the last 14 days, have you had close physical contact with a person who:

- was sick with a respiratory illness (had a new or worsening cough, fever or difficulty breathing)?
- has returned from travel outside of Canada in the last 14 days?
- was a confirmed or probable case of COVID-19?



In the last 14 days, have you travelled outside of Canada?



If you answered **YES** to any of these questions, **please return home and self-isolate**. Visit OttawaPublicHealth.ca/COVIDCentre for more information about getting tested.

If you are feeling unwell, contact your health care provider or call **Telehealth Ontario** at **1-866-797-0000** to speak to a registered nurse.

Adapted with permission from Toronto Public Health

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