



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



Pink Eye/Conjunctivitis



Stuffy/Runny nose
(unrelated to
seasonal allergies)



Loss of taste
or smell



Headache, extreme tiredness,
muscle aches/ joint pain
(not related to getting a COVID-19
vaccine in the last 48 hours)



Nausea, vomiting,
diarrhea,
stomach pain



In the last 10 days, have you

1. tested positive for COVID-19 or been advised by a doctor, health care provider or public health unit that you should currently be isolating or staying home?
2. tested positive on a rapid antigen/home-based test and not completed a follow up test at an assessment centre
3. had close physical contact (and you are not fully vaccinated**):
 - with someone you live with who is experiencing any new COVID-19 symptoms and/or waiting for a test result
 - with someone who tested positive for COVID-19 or who is considered a probable case?
4. received a COVID Alert exposure notification on your cell phone?

In the last 14 days, have you

5. travelled outside of Canada and been told to quarantine (per the federal quarantine requirements?)



If you answered **YES** to any of these questions, **please return home and self-isolate.**

Visit [OttawaPublicHealth.ca/COVIDCentre](https://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.



** Fully vaccinated means that it has been at least 14 days since receiving:

- Your second dose of an accepted two-dose COVID-19 vaccine or a combination of accepted vaccines (Moderna, Pfizer-BioNTech or AstraZeneca) OR
- your only dose of the single-dose COVID-19 vaccine series of Janssen (Johnson & Johnson)