

COVID-19 Daily Symptom Check - Visitors

Name	Date:
Company name:	
Contact phone number:	
National Grid location visited:	

Please reply **NO** to any symptoms that you believe to be related to seasonal allergies, chronic health conditions or other known causes.

Any NEW ONSET of the following symptoms within the past 14 days?	Yes	No
Have you been experiencing any cough, shortness of breath, or difficulty breathing?	<input type="checkbox"/>	<input type="checkbox"/>
Have you been experiencing any chills, felt feverish, or had a fever of 100.3 or greater?	<input type="checkbox"/>	<input type="checkbox"/>
Have you been experiencing any (generalized) muscle pain/aches, fatigue, or headaches?	<input type="checkbox"/>	<input type="checkbox"/>
Have you been experiencing any sore throat, runny/stuffy nose, or recent loss of taste or smell?	<input type="checkbox"/>	<input type="checkbox"/>
Have you been experiencing nausea, vomiting, or diarrhea?	<input type="checkbox"/>	<input type="checkbox"/>

In the past 14 days, have you:	Yes	No
Tested positive for COVID-19?	<input type="checkbox"/>	<input type="checkbox"/>
Been in close or proximate contact (less than 6 feet for more than 15 minutes) with anyone who has tested positive for COVID-19 or who has or had symptoms of COVID-19?	<input type="checkbox"/>	<input type="checkbox"/>
Been directed to quarantine or isolate by the any Department of Health or a healthcare provider?	<input type="checkbox"/>	<input type="checkbox"/>

For those entering Rhode Island today (check no if not applicable):	Yes	No
Have you traveled (for Non-Work Related purposes) from a location that is currently under a government mandated stay at home order in the past 14 days?	<input type="checkbox"/>	<input type="checkbox"/>

If you answer "Yes" to any of the questions, please leave the work location, contact your employer and notify National Grid's Employee Services at (888) 483-2123 (to trigger contact tracing for National Grid employees you were in contact with). If you feel that you have symptoms related to COVID-19 please contact your healthcare provider.

Thank you for completing the National Grid COVID-19 Symptom Check for visitors.