

# Self-Isolation for Individuals with Confirmed or Probable Coronavirus (COVID-19)



## What to do if you have confirmed COVID-19

- Restrict activities outside your home, except for getting medical care.
- Separate yourself from other people and animals in your home as much as possible.
- Do not go to work, school or public areas.
- Avoid using public transportation, taxis, or ride-share.
- Monitor your symptoms and call before visiting your doctor. If you have an appointment, be sure you tell them you have or may have COVID-19.
- If you have one, wear a facemask around other people, such as sharing a room or vehicle, or around pets and before entering a healthcare provider's office.
- If you don't have a facemask or can't wear one because it's hard for you to breathe while wearing a facemask, then keep people who live with you out of your room, or have them wear a facemask if they come in your room.
- Cover coughs and sneezes with a tissue and throw away in a lined trashcan. Wash hands thoroughly afterwards. Soap and water is best.
- Avoid sharing personal household items like dishes and glasses, or bedding.
- Wash your hands often with soap and water for 20 seconds. If you can't wash your hands, use an alcohol-based hand sanitizer that contains at least 60% alcohol. Rub hands together until dry.
- Clean all "high touch" surfaces every day, such as counters, tables, doorknobs, bathroom fixtures, phones, and keyboards.
- Use a household cleaning product to clean, following the manufacturer's recommendations.
- If you are having a medical emergency, call 911. Notify dispatch that you have or may have COVID-19.
- Stay home and avoid others until you have been 72 hours without a fever (without fever-reducing medicine), your respiratory symptoms are improving, and it has been seven days since the first day you had symptoms.

If you've been told by a doctor that you have COVID-19 but haven't been tested, you should follow all of the guidance above.

## 14-day Fever and Symptom Tracker for COVID-19

Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Health Department contact number: \_\_\_\_\_

Take your temperature twice a day, in the morning and in the evening, and write it down. Mark if you have any of the symptoms. If your symptoms get worse, call your health care provider.

Date (Days 1-14)	Feverish?	Temperature AM	Temperature PM	Cough	Sore Throat	Shortness of Breath	Other Symptoms
1.	Yes / No	°C / °F	°C / °F	Yes / No	Yes / No	Yes / No	
2.	Yes / No	°C / °F	°C / °F	Yes / No	Yes / No	Yes / No	
3.	Yes / No	°C / °F	°C / °F	Yes / No	Yes / No	Yes / No	
4.	Yes / No	°C / °F	°C / °F	Yes / No	Yes / No	Yes / No	
5.	Yes / No	°C / °F	°C / °F	Yes / No	Yes / No	Yes / No	
6.	Yes / No	°C / °F	°C / °F	Yes / No	Yes / No	Yes / No	
7.	Yes / No	°C / °F	°C / °F	Yes / No	Yes / No	Yes / No	
8.	Yes / No	°C / °F	°C / °F	Yes / No	Yes / No	Yes / No	
9.	Yes / No	°C / °F	°C / °F	Yes / No	Yes / No	Yes / No	
10.	Yes / No	°C / °F	°C / °F	Yes / No	Yes / No	Yes / No	
11.	Yes / No	°C / °F	°C / °F	Yes / No	Yes / No	Yes / No	
12.	Yes / No	°C / °F	°C / °F	Yes / No	Yes / No	Yes / No	
13.	Yes / No	°C / °F	°C / °F	Yes / No	Yes / No	Yes / No	
14.	Yes / No	°C / °F	°C / °F	Yes / No	Yes / No	Yes / No	