

## COVID-19 Daily Symptom Checklist

This checklist has been developed by Safety & Risk Services (SRS) with the guidance from the State of New Mexico and approval by the Office of the Vice President of Research. This document should be filled out *every day* before an employee begins work in a lab. This checklist should be filed either physically or electronically with all other lab safety documents.

**Employee Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

In the last 14 days have you had any of the following:	Yes	No
Cough		
Shortness of Breath or Difficulty Breathing		
Fever		
Chills		
Muscle Pain		
Sore Throat		
New Loss of Taste or Smell		
Nausea, Vomiting, or Diarrhea		
Close contact with individuals diagnosed with COVID-19		

**If you answered yes to any of the above**

- 1. Do not start work**
- 2. Go home and self-isolate**
- 3. Please contact the New Mexico Department of Health for testing by calling 855-600-3453 or visiting <https://cv.nmhealth.org/>**
- 4. Report your symptoms or diagnosis to UNM here: <http://www.unm.edu/coronavirus/>**