

NYC Agency Employee and Visitor COVID-19 Screening Tool

You are being asked to answer this questionnaire in order to determine whether you have or may have COVID-19 or may have been recently exposed. This is being done solely for the purpose of protecting your workplace from potential spread of the disease. Any response you provide, and/or any directive you receive to stay home, does not constitute a diagnosis of COVID-19, nor are we advising you whether you need to get tested or contact a physician. You can consult CDC and health department websites for guidance in that regard.

1. Have you experienced any of the following symptoms of COVID-19 within the past 10 days: (1) a fever of 100.0 degrees F or greater, (2) a cough, (3) loss of taste or smell or (4) shortness of breath?

NO. Go to the next question.

YES, and I have not tested positive for COVID-19 within the past 10 days, I have received a negative result from a COVID-19 molecular test, and I have been fever-free for the last 24 hours (without using fever-reducing medications).

Go to the next question.

YES, and it's been 10 days since my symptoms began, I've been fever-free for the last 24 hours (without using fever-reducing medications), and other symptoms are improving.

Go to the next question.

YES, I have had a fever but I received the a COVID-19 vaccine within 3 days prior to when my fever began, my fever lasted less than 24 hours, I have been fever-free for the last 24 hours (without using fever reducing medications), I have not had any of the other symptoms listed above, and I am not a health care worker.

Go to the next question.

YES, I have had a fever but I received a COVID-19 vaccine within 3 days prior to when my fever began, my fever lasted less than 24 hours, I have been fever-free for the last 24 hours (without using fever reducing medications), and I have received a negative result from a COVID-19 diagnostic test.

Go to the next question.

YES, and I am not in the categories above.

You may NOT report to work. Go to Question #5 and select "No".

2. In the past 10 days (days measured from the day you were tested, not from the day when you got the test result), have you tested positive for COVID-19, either using a test that used a nose or throat swab, or tested saliva (i.e., not a blood test)?

NO. Go to the next question.

YES, and it has been 10 days since my symptoms began, I've been fever-free for the last 24 hours without using fever-reducing medications), and other symptoms are improving.

Go to the next question.

YES, and I am not in the above category.

You may NOT report to work. Go to Question #5 and select "No".

3. To the best of your knowledge, in the past 10 days, have you been in close contact (within 6 feet for at least 10 minutes over a 24-hour period) with anyone while they had COVID-19?

NO. Go to the next question.

YES, but I am fully vaccinated (it has been 2 or more weeks following receipt of my second dose in a 2-dose series or 2 or more weeks following receipt of one dose of a single-dose vaccine), and I have remained asymptomatic since my last COVID-19 exposure.

Go to the next question.

YES, but I have been previously diagnosed with laboratory-confirmed COVID-19, I have since recovered from COVID-19, it is within 3 months of my date of symptom onset from my initial infection (or, if I had no symptoms, from the date of my first positive diagnostic test) and I have remained asymptomatic since my last COVID-19 exposure.

Go to the next question.

YES, but I am an essential worker who is asymptomatic, and my human resources department has confirmed, in writing, that my physical presence in the workplace is critical to operations or safety of the workplace and provided me with requirements for returning to work after my exposure.

Go to the next question.

YES, and I am not in the categories above.

You may NOT report to work. Go to Question #5 and select "No".

4. In the past 10 days, have you returned from another country/territory?

No. You may report to work. Go to Question #5 and select "Yes".

YES, and I am a healthcare worker and have not followed all necessary travel quarantine and testing requirements for healthcare workers.

You may NOT report to work. Go to Question #5 and select "No".

YES, and I am not in any of the categories above. You may report to work. Go to Question #5 and select "Yes".

5. Having completed the assessment, I affirm that I am cleared to report to work:

Yes

Go to question #6.

No

You may NOT report to work.

6. I affirm that I will comply with the City's face covering and physical distancing policies.

The City's policy is that every City employee and visitor able to medically tolerate a face covering must wear a face covering that covers the individual's mouth and nose at all times (except when eating or drinking) while in a shared indoor City workspace. A shared indoor City workspace is a space in which an individual is physically present with at least one other individual and the individuals cannot be separated by a closed door.

A City employee or visitor conducting City business outside, who is able to medically tolerate a face covering, must wear a face covering at all times (except when eating and drinking) when interacting with members of the public and other City employees, and when they cannot maintain six feet of distance from other individuals.

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An employee or visitor who is fully vaccinated against COVID-19 is authorized to remove their face covering in the workplace (indoors or outside), provided they are not interacting with the public indoors or present in a pre-kindergarten to twelfth grade school, public transit, homeless shelter, correctional facility, nursing home, or health care setting. Fully vaccinated employees and visitors may continue wearing face coverings if they wish to do so. An individual is considered fully vaccinated two or more weeks following receipt of second dose in a 2-dose series of a COVID-19 vaccine, or 2 or more weeks following receipt of one dose of a single-dose COVID-19 vaccine.

Fully vaccinated employees and visitors also do not need to physically distance in the workplace, provided they are not interacting with the public indoors or present in a pre-kindergarten to twelfth grade school, public transit, homeless shelter, correctional facility, nursing home, or health care setting.

Yes

Go to question #7.

7. I hereby certify to the best of my knowledge the information presented above is true and accurate under penalty of law.

Yes