

Our Lady of Perpetual Help Home

COVID-19 SCREEN FOR ADMISSION

TO BE FILLED OUT WITHIN 24 HOURS OF TRANSFER

Our Lady Perpetual Help Home is a facility for terminally ill cancer patients who can be at high risk for complications from Covid-19 infection. All our patients are incurable and end-stage. However, we have some elderly patients who are not imminently terminal, and they must also be protected from Covid-19.

The below information must be filled out, signed by Patient's Medical Doctor, or Nurse Practitioner or Physician Assistant from the discharged facility or Home Health Care and submitted to OLPH Home **WITHIN 24 HOURS OF DISCHARGE** for the prospective patient who is going to be admitted.

Patient's Name: _____ Date of Birth: _____

Did patient recently have COVID-19? ____ Yes, Date? _____ No

Was patient recently tested for COVID-19? ____ Yes, Date: _____ Result: _____ No

Does the patient currently have any signs or symptoms of possible corona virus infection?

Fever ____ Yes ____ No New loss of taste and/or smell ____ Yes ____ No

Cough ____ Yes ____ No Shortness of Breath ____ Yes ____ No

Body aches ____ Yes ____ No

Has the patient had any contact with anyone who has or potentially has COVID-19 infection? (other patients, staff, family, visitors etc.) ____ Yes ____ No

Has the patient had any recent travel to an area of high-density corona virus? ____ Yes ____ No

I certify that the above is true to the best of my knowledge.

Name: _____

Signature: _____

Date: _____