

# COVID-19 SCREENING QUESTIONNAIRE in PPM+ HAS BEEN UPDATED

The following changes  
have been made to the  
screening questionnaire:

- There is a new question
- Changes to the guidance

COVID-19 Screening Questionnaire

Address  Born  Gender  NHS number  PAS number

Have you or any member of your household / family had a confirmed diagnosis of COVID-19 in the last 14 days?

No Yes

Are you or any member of your household / family waiting for a COVID-19 test result? \*

No Yes

Have you travelled internationally in the last 14 days to a country that is subject to quarantine on return to the UK? \*

No Yes

Have you had contact with someone with a confirmed diagnosis of COVID-19, or been in isolation with a suspected case in the last 14 days? \*

No Yes

**Have you had COVID-19 in the last 90 days? \***

No Yes

Date of first positive PCR swab

smell? \*

No Yes

COVID-19 Screening Questionnaire

EDITEPATIENT, Seven Born 16-May-2003 (17y 10m) Gender Male NHS number 999 999 9622 PAS number 4999917

Address St. James's Universi, Beckett Street, Leeds, ,, LS9 7TF

No Yes

Have you travelled internationally in the last 14 days to a country that is subject to quarantine on return to the UK? \*

No Yes

Where have you travelled? \*

Have you had contact with someone with a confirmed diagnosis of COVID-19, or been in isolation with a suspected case in the last 14 days? \*

No Yes

This patient does not fulfill the criteria for the low-risk pathway

Have you had COVID-19 in the last 90 days? \*

No Yes

Date of first positive PCR swab \*

Do you have any of the following symptoms: high temperature or fever / new, continuous cough / a loss or alteration to taste or smell? \*

No Yes

If the patient is to be admitted, please swab them

Please visit the [GOV.UK](https://www.gov.uk) website for Government guidance on international travel advice.