

# PeriOp Invitee Clinical Screening

Referenced from Department of Health and Human Services Centers for Disease Control and Prevention

For more information, visit [www.flu.gov](http://www.flu.gov) or call 800-CDC-INFO.

## Do you have any of the following?

• Fever	Y	N
• Headache	Y	N
• Extreme tiredness	Y	N
• Dry cough	Y	N
• Runny or stuffy nose	Y	N
• Muscle aches	Y	N
• Sore throat	Y	N
• Vomiting	Y	N
• Sometimes diarrhea	Y	N

Signature of Invitee\_\_\_\_\_

Date\_\_\_\_\_