MONITOR YOUR SYMPTOMS- Self-screen

To assure the safety of our visitors, employees, their families and the public, the City of Miami Beach Fire Department has developed guidelines for self-screening each morning.

1. **Do you have any of the below symptoms?**
   - Fever > 38°C-100.4°F or subjective fever (feels feverish)  
     - **Yes**
     - **No**
   - Dry Cough  
     - **Yes**
     - **No**
   - Shortness of breath/breathing difficulties  
     - **Yes**
     - **No**
   - Other symptoms such as muscle aches, fatigue, headache, sore throat, runny nose, diarrhea. Note symptoms in young children and young adults may be non-specific – e.g. lethargy, loss of appetite.  
     - **Yes**
     - **No**

2. **Have you travelled in the last 14 days to China, Iran, or Italy or any other infected county?**  
   - **Yes**
   - **No**

3. **Have you travelled in the US in the last 14 days to other infected states?**  
   - **Yes**
   - **No**

4. **Have you had close contact (face-to-face contact within 2 meters/6 feet) with someone who is ill with cough and/or fever who has traveled within 14 days prior to their illness onset? (Contact may be in other states/regions or during travel)**  
   - **Yes**
   - **No**

5. **Have you been in contact in the last 14 days with someone that is confirmed to be a case of COVID-19?**  
   - **Yes**
   - **No**

6. **Have you had exposure while working directly with Person under investigation (PUI) known to contain COVID-19?**  
   - **Yes**
   - **No**

Please use the CDC recommendations to stop the spread of illness: