



In-Center Coronavirus Screening Form

Today's date: _____

Dear Creative Choices Pregnancy Center Visitor,

Because of the coronavirus pandemic, we are asking everyone who comes to the center to complete this form.

- We kindly request that you complete your form in your vehicle for the health and safety of others.
- Once you've completed the form, call this number 252-441-1818 to speak with the receptionist about an appointment.

Please answer the following questions truthfully:

1. Are you currently experiencing:
 - a. Fever: Yes/No; Explain: _____
 - b. Cough: Yes/No; Explain: _____
 - c. Shortness of breath: Yes/No; Explain: _____
2. Have you been in close contact with any person who has/had the corona virus? Yes/No
3. Have you recently travelled from a region where Corona virus is active? Yes/No

Your name: _____

Your address: _____

Your phone number: _____

Please call 252-441-1818 once you have completed this form.

Please give this form to a Creative Choices Pregnancy Center staff person.

When inside the Center please remain 6' from other when at all possible.

No visitors will be allowed in with the client.

Thank you for doing your part to keep our community healthy!

The Creative Choices Pregnancy Center Team

STAFF ONLY

Client/Patient ID _____ Screened by: _____ (personnel name)

Recommendation made: _____