

TODAY'S DATE: _____

NRC FACILITIES COVID-19 SCREENING

Accessible version available at <https://www.nrc.gov/about-nrc/covid-19/index.html>

PLEASE READ EACH QUESTION CAREFULLY

PLEASE CIRCLE THE ANSWER THAT APPLIES TO YOU AND FOLLOW THE INSTRUCTIONS BASED ON YOUR RESPONSE

1. Regardless of your vaccination status, have you experienced any of the symptoms in the list below in the past 48 hours?

- fever or chills
- cough
- shortness of breath or difficulty breathing
- fatigue
- muscle or body aches
- headache
- new loss of taste or smell
- sore throat
- congestion or runny nose
- nausea or vomiting
- diarrhea

Individuals with symptoms that can be common with other medical conditions and not specifically COVID-19 should follow care instructions from their healthcare provider. Individuals may enter the building if you reasonably believe the symptoms are unrelated to COVID-19.

If you have any of these symptoms, DO NOT physically access an NRC facility for 10 days from the date symptoms first appeared or until you receive a negative COVID-19 test result; and 24 hours with no fever without the use of fever reducing medication unless you reasonably believe the symptoms are unrelated to COVID-19.

YES



Access to NRC Facilities NOT APPROVED

NO

Proceed to Question 2

2. Are you isolating or quarantining because you tested positive for COVID-19 or are worried that you may be sick with COVID-19?

YES






Access to NRC Facilities NOT APPROVED


NO

Proceed to Question 3



If you have concerns about being exposed to, sick with, or testing positive for COVID-19, please refer to the NRC's Workplace Safety Implementation Plan information and next steps. If you have questions about when it is safe to return to an NRC or Licensee facility, please email COVID19.Resource@NRC.gov

<p>3. Are you fully vaccinated AND/OR have you recovered from a documented COVID-19 infection in the last 3 months?</p> <p><i>To be considered fully vaccinated, you must be ≥2 weeks following receipt of the second dose in a 2-dose series or ≥2 weeks following receipt of one dose of a single-dose vaccine.</i></p>	<p>YES</p> <p>Proceed to Question 4</p>	<p>NO</p> <p>Proceed to Question 4</p>	<p>PREFER NOT TO ANSWER</p> <p>Proceed to Question 4</p>
<p>4. Have you been in close physical contact in the last 14 days with:</p> <ul style="list-style-type: none"> • Anyone who is known to have laboratory-confirmed COVID-19? <p>OR</p> <ul style="list-style-type: none"> • Anyone who has any symptoms consistent with COVID-19? <p><i>Close physical contact is defined as being within 6 feet of an infected/symptomatic person for a cumulative total of 15 minutes or more over a 24-hour period starting from 48 hours before illness onset (or, for asymptomatic individuals, 48 hours prior to test specimen collection).</i></p>	<p>YES</p> <p>If You are Fully Vaccinated, Proceed to Question 5</p> <p>If You are Not Fully Vaccinated or Prefer Not to Answer</p>  <p>Access to NRC Facilities NOT APPROVED</p>	<p>NO</p> <p>Proceed to Question 6</p>	
 <p>If you have been in close contact with someone with COVID-19 and you are not fully vaccinated, do not access an NRC or licensee facility for 14 days from the exposure. If symptoms develop and/or you receive a positive test result, please refer to the NRC Workplace Safety Implementation Plan for further guidance.</p> <p>If you are fully vaccinated you may access NRC or licensee facility and must wear a mask for 14 days or until negative test administered 5-7 days after the close contact. If symptoms develop and/or you receive a positive test result, please refer to the NRC Workplace Safety Implementation Plan for further guidance.</p>			
<p>5. Did you receive a negative COVID-19 test 5-7 days after your exposure with the close contact?</p>	<p>YES</p> <p>Access to NRC Facilities APPROVED</p>	<p>NO</p> <p>If You are Fully Vaccinated Access to NRC Facilities APPROVED</p> <p>If You are Not Fully Vaccinated or Prefer Not to Answer,</p>  <p>Access to NRC Facilities NOT APPROVED</p>	

<p>6. Are you currently waiting on the results of a COVID-19 test because you suspect you may have COVID-19?</p> <p>IMPORTANT: ANSWER "NO" IF YOU ARE WAITING ON THE RESULTS OF A PRE-TRAVEL OR POST-TRAVEL COVID-19 TEST</p>	<p>YES</p>  <p>Access to NRC Facilities NOT APPROVED</p>	<p>NO</p> <p>Access to NRC Facilities Approved</p>
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Please contact COVID19.Resource@nrc.gov for questions related to this form.