

Dear Patients,

PER GOVERNOR BULLOCK'S MANDATE, ALL PATIENTS ARE REQUIRED TO WEAR A MASK WHILE IN THE BUILDING. THOSE WHO REFUSE WILL BE ASKED TO RESCHEDULE THEIR APPOINTMENT.

The safety of our patients & employees is our overriding priority. As the coronavirus (COVID-19) pandemic continues, we are monitoring the situation closely and following the guidance from the Centers for Disease Control and prevention along with the local health authorities. In order to prevent the spread of the coronavirus and reduce the potential risk of exposure, you will be asked the following questions upon clinic arrival. If you answer yes to any question, we will ask that you reschedule your appointment.

Please respond to each of the following questions truthfully and to the best of your ability.

1	Are you currently experiencing, or have you experienced in the past 14 days, any of the following symptoms? <i>(Please take your temperature before you answer this question.)</i> Yes <input type="checkbox"/> No <input type="checkbox"/> Fever (100.4° F/37.8° C or greater as measured by an oral thermometer) Yes <input type="checkbox"/> No <input type="checkbox"/> Cough Yes <input type="checkbox"/> No <input type="checkbox"/> Shortness of breath or difficulty breathing Yes <input type="checkbox"/> No <input type="checkbox"/> Sore throat Yes <input type="checkbox"/> No <input type="checkbox"/> New loss of taste or smell Yes <input type="checkbox"/> No <input type="checkbox"/> Chills Yes <input type="checkbox"/> No <input type="checkbox"/> Head or muscle aches Yes <input type="checkbox"/> No <input type="checkbox"/> Nausea, diarrhea, vomiting
2	In the past 14 days, have you been in close proximity to anyone who was experiencing any of the above symptoms or has experienced any of the above symptoms since your contact? Yes <input type="checkbox"/> No <input type="checkbox"/>
3	In the past 14 days, have you been in close proximity to anyone who has tested positive for COVID-19? Yes <input type="checkbox"/> No <input type="checkbox"/>
4	Have you been tested for COVID-19 and are waiting to receive test results? Yes <input type="checkbox"/> No <input type="checkbox"/>
5	Have you have tested positive for COVID-19, or are you presumptively positive for COVID-19 based on your health care provider's assessment or your symptoms? Yes <input type="checkbox"/> No <input type="checkbox"/> <i>NOTE: If you have tested positive for COVID-19 or have been presumptively positive for COVID-19 based on your health care provider's assessment or your symptoms, please contact your manager or human resources representative when: (1) you have had no fever for at least 72 hours (3 full days), without the use of fever-reducing medications; (2) your other symptoms have improved; and at least 7 days have elapsed since your symptoms first appeared.</i>

Social distancing and safety measures currently in place at Associated Dermatology:

- Our waiting rooms have been rearranged to ensure the 6-foot distance between patients.
- Our staff will be wearing proper personal protective equipment (PPE) recommended by the CDC. We have installed plexiglass barriers at our front desks for extra protection for you and our staff.
- We are requiring that all patients (except 4 years of age or younger) wear a mask during your time in the office. If you do not have a mask with you, we will provide you with one.

WE LOOK FORWARD TO SEEING YOU ALL AND HELPING YOU WITH YOUR DERMATOLOGICAL NEEDS. THANK YOU FOR CHOOSING US FOR YOUR CARE. WE ARE HONORED TO BE YOUR TRUSTED HEALTHCARE PROVIDER.

For more information about COVID-19, please visit CDC website, www.cdc.gov/coronavirus/2019-ncov/index.html