

PRECAUTIONS FOR COVID-19

ARE YOU, OR ANYONE YOU ARE IN CLOSE CONTACT WITH EXPERIENCING ANY OF THE FOLLOWING SYMPTOMS IN THE PAST 14-21 DAYS:

**SHORTNESS OF BREATH OR DIFFICULTIES BREATHING,
COUGH, FEVER/FEVERISH, FLU-LIKE SYMPTOMS (FATIGUE,
HEADACHE OR GASTROINTESTINAL UPSET)**

HAVE YOU, OR ANYONE YOU ARE IN CLOSE CONTACT WITH TRAVELED TO KANSAS CITY AREA, WICHITA, DODGE CITY, OUT OF STATE WITHIN THE PAST 7-14 DAYS?

ARE YOU OVER 60 YEARS OF AGE WITH UNDERLYING HEALTH CONDITIONS SUCH AS COPD/EMPHYSEMA, HEART DISEASE, KIDNEY DISEASE?

HAVE YOU, OR ANYONE YOU ARE IN CLOSE CONTACT WITH RECEIVED NOTIFICATION FROM PUBLIC HEALTH OFFICIALS THAT YOU MAY HAVE BEEN IN CONTACT WITH SOMEONE WHO HAS TESTED POSITIVE FOR COVID-19?

**IF YOU ANSWER YES TO ANY OF THE PREVIOUS QUESTIONS,
PLEASE LET US KNOW. THANK YOU!**