

## **BUMC Parents Day Out (PDO) "Fast Pass Drop Off" Sheet**

Fill out this sheet in advance & provide to PDO Director each day upon arrival at PDO

*Our goal is to protect the health of all children and staff*

Circle Below

- 1.) Has your child been in close contact with a confirmed case of COVID-19? Y or N
- 2.) Has your child experienced the following conditions:
- Fever in the last 48 hours? Y or N
  - Cough, shortness of breath, or sore throat? Y or N
  - New loss of taste or smell? Y or N
  - Vomiting or diarrhea in the last 24 hours? Y or N
- 3.) Has your child been around anyone with the symptoms listed above? Y or N

Parents Day Out staff will check each child's temperature using a digital thermometer.

Childs Name: \_\_\_\_\_ Parents Name: \_\_\_\_\_ Date: \_\_\_\_\_

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