

## COVID-19 Health Screening Form

A county responsible for transporting a child to the Texas Juvenile Justice Department's Ron Jackson Orientation & Assessment Unit must conduct a screening of the child no earlier than 12 hours prior to transporting the child. This form must be completed to document that screening.

Note: The child will also be screened by TJJD upon arrival at the unit. If that screening indicates the child is need of medical care, the child will not be admitted and the transporter will be required to take the child for medical care.

Clearly **PRINT** information below:

Name: \_\_\_\_\_ Birthdate (mm / dd): \_\_\_\_\_

\_\_\_\_\_  
Date & Time of Screening

### Has the individual:

		Date Range
<b>Traveled internationally within the last 30 days?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, when did they return to the USA?
<b>*Within the last 14 days, had contact with anyone who tested positive for COVID-19?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes when?

### Complete the following

		Comments
<b>Temperature at Screening?</b>		
<b>Cough?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Shortness of breath?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	

### Staff completing COVID-19 Health Screening Form:

Name/**Title**: \_\_\_\_\_

Date: \_\_\_\_\_