

SELF-MONITORING INFORMATION

Guidance for persons self-monitoring for COVID-19.

This document is to help you closely monitor your health for 14 days before returning or coming to campus. It is very important for you to monitor your health prior to coming to UNT Dallas so we can work to prevent the spread of COVID-19 on the University of North Texas at Dallas campus. Based on what is known about COVID-19, symptoms typically develop between 2-14 days after an individual is exposed.

What are the signs and symptoms of COVID-19?

The most common symptoms of COVID-19 are fever, cough and shortness of breath. Other symptoms may include muscle aches or chills, sore throat, diarrhea, vomiting or loss of taste or smell.

How should you monitor your health during this time period?

Use the reverse side of this form to record your temperature and possible symptoms. Record this information **twice per day**. Keep this information for your records. You **do not** need to submit this to your supervisor, Human Resources or any other office on campus.

Take these steps to monitor your health and practice social distancing.

1. Cover your mouth and nose with a tissue or sleeve when coughing or sneezing.
2. Take your temperature with a digital thermometer two times a day and monitor for fever. Also watch for other symptoms.
3. Wash your hands often with soap and water for at least 20 seconds especially after you have been in a public place, or after blowing your nose, coughing, or sneezing.
4. Avoid close contact with people who are sick, even inside your home. If possible, maintain 6 feet between the person who is sick and other household members.
5. Remember that some people without symptoms may be able to spread the virus. Put distance between yourself and other people outside of your home.

What should you do if you become ill during this monitoring period?

If you start to notice possible symptoms or have concerns about your health, please contact your primary care provider. Students can call Student Health Clinic at 972-338-1793 during normal business hours for advice. If you are unable to reach your primary care provider and are seriously ill, go to a local emergency room or urgent care center. Call in advance so ER or urgent care staff are prepared for your arrival.

- **UNT Dallas Student Health Clinic** - schedule a Telehealth appointment online and select UNT Dallas location: unthsc.edu/patient-care
- **Parkland Hospital Dallas** - 214-590-8000
- **Methodist Charlton Medical Center** - 214-947-7777
- **Always call 9-1-1 in an emergency**

If you have had known close contact with a person who is lab confirmed to have COVID-19, contact the COVID Hotline: Faculty/Staff: 972-638-9165 - Students: 972-638-9164.

Stay smart. Stay strong. Stay safe.

untdallas.edu/covid-19-knowledge-center

14-DAY OBSERVATIONS

INSTRUCTIONS: Take your temperature with a digital thermometer two times a day – once in the morning and once in the evening. Write down your temperature on the form. If you forget to take your temperature, take it as soon as you remember. Mark if you experience any of the symptoms related to COVID-19 listed below.

Date	Time	Temp.	100.4° F or Higher	Persistent Cough?	Shortness of Breath?	Muscle Aches or Chills?	Sore Throat?	Diarrhea or Vomiting	Loss of Taste or Smell?
1 Month/Day	AM		<input type="checkbox"/>	Y N	Y N	Y N	Y N	Y N	Y N
	PM		<input type="checkbox"/>						
2 Month/Day	AM		<input type="checkbox"/>	Y N	Y N	Y N	Y N	Y N	Y N
	PM		<input type="checkbox"/>						
3 Month/Day	AM		<input type="checkbox"/>	Y N	Y N	Y N	Y N	Y N	Y N
	PM		<input type="checkbox"/>						
4 Month/Day	AM		<input type="checkbox"/>	Y N	Y N	Y N	Y N	Y N	Y N
	PM		<input type="checkbox"/>						
5 Month/Day	AM		<input type="checkbox"/>	Y N	Y N	Y N	Y N	Y N	Y N
	PM		<input type="checkbox"/>						
6 Month/Day	AM		<input type="checkbox"/>	Y N	Y N	Y N	Y N	Y N	Y N
	PM		<input type="checkbox"/>						
7 Month/Day	AM		<input type="checkbox"/>	Y N	Y N	Y N	Y N	Y N	Y N
	PM		<input type="checkbox"/>						
8 Month/Day	AM		<input type="checkbox"/>	Y N	Y N	Y N	Y N	Y N	Y N
	PM		<input type="checkbox"/>						
9 Month/Day	AM		<input type="checkbox"/>	Y N	Y N	Y N	Y N	Y N	Y N
	PM		<input type="checkbox"/>						
10 Month/Day	AM		<input type="checkbox"/>	Y N	Y N	Y N	Y N	Y N	Y N
	PM		<input type="checkbox"/>						
11 Month/Day	AM		<input type="checkbox"/>	Y N	Y N	Y N	Y N	Y N	Y N
	PM		<input type="checkbox"/>						
12 Month/Day	AM		<input type="checkbox"/>	Y N	Y N	Y N	Y N	Y N	Y N
	PM		<input type="checkbox"/>						
13 Month/Day	AM		<input type="checkbox"/>	Y N	Y N	Y N	Y N	Y N	Y N
	PM		<input type="checkbox"/>						
14 Month/Day	AM		<input type="checkbox"/>	Y N	Y N	Y N	Y N	Y N	Y N
	PM		<input type="checkbox"/>						