**OPTIONAL TEMPLATE**

**COVID-19 / CORONAVIRUS SYMPTOM AND SCREENING CHECKLIST;**

**PROCEDURES FOR RESEARCH STAFF**

Researchers are encouraged to customize this template and use as part of the research project’s internal SOPs for facilitating in-person study visits with research participants. Please consult with the Office of Research’s website for the [latest updates on the University’s Covid-19 guidance](https://www.bu.edu/researchsupport/2020/03/11/research-coronavirus/). You may also consult with the [website of the Centers for Disease Control (CDC)](https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-at-higher-risk.html).

**Pre-Visit Screening Procedures:**

If possible, a designated research staff member should call each participant the day before, or morning of, a scheduled study visit to review with the participant:

[x]  Like the risk of exposure to COVID-19 in other public locations, there is a risk to exposure of COVID-19 by coming to campus to participate in research.

[ ]  The precautions the research team is taking to help keep participants safe during (and, if applicable, in transit to) the study visit.

[ ]  What to expect upon arrival at campus or the study visit (e.g. any additional screening procedures, staff in PPE, personal use of PPE, etc.).

[ ]  How participants will travel to the study visit and the safest method to do so (e.g. personal car, taxi, uber, etc.). If possible, provide, arrange, pay for transportation or on-site parking for the participant.

[ ]  If the participant will be driven to/from the study visit by someone who will wait for them, discuss where this person will be allowed to wait (e.g. in the building, in their car, etc.).

[ ]  Study visit procedures.

[ ]  Participants should be informed that their name and contact information may be passed along to City or State health officials if contact tracing is necessary due to potential exposure to COVID-19.

[ ]  Participants should be reminded that if they have not yet been vaccinated and are at a high or increased risk of severe infection to contact their PCP if they have any concerns about whether to participate in the research at this time.

**STUDY PARTICIPANT COVID-19 SYMPTOM AND SCREENING CHECKLIST**

**Covid-19 Symptom Monitoring**:

A variety of symptoms have been associated with COVID-19. If a study participant indicates that they have any of the symptoms or meet any of the below criteria, they should be instructed to contact their primary care provider and the research team should make a plan with the participant to follow-up regarding the research at a later date.

The information on COVID-19 symptoms is based upon guidance provided by the [Centers for Disease Control & Prevention](https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html) and is presented in the [Back2BU](https://www.bu.edu/back2bu/student-health-safety/self-monitoring/) guidance materials. Some of these symptoms may appear 2–14 days after exposure to the virus and can range from mild to severe. Please remind participants to call the research team if they develop any of these symptoms after a study visit.

The participant has: *Mark if true*

[ ]  Fever above 100°F, or feeling unusually hot (if no thermometer is available), accompanied by shivering / chills

[ ]  Sore throat

[ ]  New cough not related to chronic condition

[ ]  Runny/stuff nose/nasal congestion not related to allergies or relieved by antihistamines

[ ]  Difficulty breathing/shortness of breath

[ ]  Diarrhea, with or without respiratory symptoms

[ ]  Nausea and/or vomiting

[ ]  Headache unrelated to chronic condition

[ ]  Severe fatigue

[ ]  Severe muscle aches

[ ]  New loss of sense of taste or smell

[ ]  New foot sores (COVID-19 toes)

[ ]  New Rash

[ ]  Contact with someone who has tested positive for COVID-19 or who has concerning symptoms and has not been medically cleared by a doctor.

[ ]  Other; Click or tap here to enter text.

The participant has been: *Mark if true*

[ ]  In close contact (within 6 feet for a total of 15 minutes or longer cumulatively over a 24-hour period) with someone who has tested positive for COVID-19

[ ]  In close contact with someone who is symptomatic (patient under investigation) who has been tested for COVID-19 and is awaiting test results

[ ]  Symptomatic and tested for COVID-19 and are awaiting results or have been told the test was positive

[ ]  Traveled internationally or to a high-risk location domestically

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[ ]  Participant indicated that they do not meet any of the criteria on the symptom and screening checklist.

Study Participant ID: Click or tap here to enter text.

Date: Click or tap to enter a date.

BU CRC Protocol #: Click or tap here to enter text.

Initials of person conducting pre-screen: Click or tap here to enter text.

Comments: Click or tap here to enter text.