Dear Patient,

Due to the COVID 19 outbreak, our office has taken precautionary measures to protect you as well as our staff; however, before we can have you return to our office, we need to ensure that you are also taking the same precautions for everyone's safety.

Below, you will find a questionnaire which <u>must</u> be completed and returned to this office prior to your appointment. You may e-mail back the questionnaire to Dr Youn at thedentist@drjanetyoun.com. To prevent tying up our phone lines, e-mailing your questionnaire is preferred; however, if it is not possible, please contact the office and verbally give your answers to Linda or myself. Failure to return this questionnaire may affect your scheduled appointment, including postponement and cancellation.

Please note the following general guidelines:

If you have been tested positive for COVID 19:

You will not be able to schedule an appointment for at least 21 days from the date of your test. You must be completely asymptomatic before we can confirm your appointment.

If you have <u>not</u> been tested positive but have been exposed to someone who tested positive:

You need to self-quarantine for at least 14 days and must be asymptomatic before we can confirm your appointment.

If you are medically compromised at this time:

You must receive medical clearance from your physician, stating that dental treatment at this time is permissible, before we can confirm your appointment. Your doctor can email Dr. Youn at <u>thedentist@drjanetyoun.com</u> or if you have a note, please bring your clearance on the day of your appointment.

Please complete this questionnaire <u>ahead</u> of your appointment and return to our office.

1) Have you been tested positive for COVID 19?	
a) If yes:	
What was the date of your test result?	
Are you currently symptomatic?	
If yes, what are your symptoms?	
 Have you been practicing social distancing/isolation for at least 14 days? 	
b) If no:	
Are you currently symptomatic?	

•	If yes, what are your symptoms?	
	Have you been practicing social distancing/isolation for at least 14 days?	
2) Have 19?	you been exposed to someone who tested positive for COVID	
a) If	yes:	
•	Have you been tested?	
•	If you have been tested: what was the date of your test result?	
•	Are you currently symptomatic?	
	If yes, what are your symptoms?	
•	Have you been practicing social distancing/isolation for at least 14 days?	
b) If	no:	
•	Are you currently symptomatic?	
	If yes, what are your symptoms?	
•	Have you been practicing social distancing/isolation for at least 14 days?	
3) Have	you traveled within the past 14 days?	
a) l	yes:	
•	Where did you travel to?	
•		
•	How many days ago did you return from your trip?	
•	How many days ago did you return from your trip? Are you currently symptomatic?	
•		
•	Are you currently symptomatic?	
•	 Are you currently symptomatic? If yes: Have you been tested? If you have been tested: what was the date of your test result? 	
•	 Are you currently symptomatic? If yes: Have you been tested? If you have been tested: what was the date of your 	
• • 4) Are y	 Are you currently symptomatic? If yes: Have you been tested? If you have been tested: what was the date of your test result? Have you been practicing social distancing/isolation for at least 14 days? bu immunocompromised at this time? 	
•	 Are you currently symptomatic? If yes: Have you been tested? If you have been tested: what was the date of your test result? Have you been practicing social distancing/isolation for at least 14 days? bu immunocompromised at this time? yes: 	
• • 4) Are y	 Are you currently symptomatic? If yes: Have you been tested? If you have been tested: what was the date of your test result? Have you been practicing social distancing/isolation for at least 14 days? bu immunocompromised at this time? yes: What is your medical condition(s)? 	
• • 4) Are y a) If	 Are you currently symptomatic? If yes: Have you been tested? If you have been tested: what was the date of your test result? Have you been practicing social distancing/isolation for at least 14 days? bu immunocompromised at this time? yes: 	