

Updated September 30th, 2020

VERMONT DEPARTMENT OF CORRECTIONS

COVID-19 Guidelines

Operational Guidelines for COVID-19 Response will be updated frequently to incorporate the latest scientific, medical, and governmental recommendations. Please ensure you are using the most current document.

[Attachment 5](#) contains additional steps or different steps that will be taken when a “Stay Home, Stay Safe” order is in effect. This addendum has been removed due to changes in the Governor’s Executive Orders.

COVID-19 GUIDELINES – Field

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Definitions

- a. **Close contact:** For the purpose of this protocol, close contact is defined as 6 feet or less from another person or in an area contaminated by their respirations.

- b. **Vulnerable** – Vulnerable will be used as defined by the CDC as at higher risk. The CDC currently lists as vulnerable: adults over the age of 65, pregnant women, and those with heart disease, lung disease, or diabetes. Please check the CDC link as these groups may change as new medical information becomes available. <https://www.cdc.gov/coronavirus/2019-ncov/specific-groups/high-risk-complications.html> Staff designated as vulnerable will not be used to work Isolation or Quarantine units, nor will they be assigned to transport inmates designated for Isolation. It is staff’s responsibility to notify their supervisors of this information and, if requested, to provide documentation from their health care provider.

- c. **N95 Mask** – An **N95 mask** (also called a respirator) is a **mask** that is worn over the face to prevent the inhalation of airborne particles. The **N95** designation means that the **mask** will filter at least 95% of particles 0.3 microns in size

- d. **Goggles** - goggles or disposable face shield that fully covers the front and sides of the face).
 - i. This does not include personal eyeglasses.
 - ii. If reusable eye protection is used it should be cleaned and disinfected in accordance with manufacturer’s instructions.

- e. **Bleach Solution** – 5 (five) Tablespoons of bleach to 1 (one) gallon of water or 4 (four) teaspoons of bleach to 1 Quart (**Bleach Solution should be used within 24 hours of mixing.**)

- f. **Cloth Face Covering** - – mask made of cloth consisting of multiple layers to cover the nose and mouth. Not a microfiber or N95 mask. Often

handmade. Intended to help prevent spread of virus *from the wearer*. **If you can see through the mask when held up to the light it is not to be worn inside the office.**

g. Microfiber Mask – Four-ply microfiber cloth.

****Please note, surgical masks have been replaced with microfiber masks. This decision is based on the research done by the military found in the link below:**

<https://www.military.com/daily-news/2020/04/28/army-says-it-has-found-best-fabric-face-masks.html>

Section 1: General Precautions

1. General Precautions

Throughout the duration of the COVID-19 pandemic the following general prevention measures should be implemented to interrupt viral infection transmission. See *Table 1* below.

Table 1. General Prevention Measures
<p>a. Promote good health habits among employees and incarcerated individuals:</p> <ul style="list-style-type: none">1) Avoid close contact with persons who are sick.2) Avoid touching your eyes, nose, or mouth.3) Wash your hands often with soap and water for at least 20 seconds.4) Cover your sneeze or cough with a tissue (or into a sleeve). Then throw the tissue in the trash.5) Greet without physical contact.. <p>b. Conduct frequent environmental cleaning of “high touch” surfaces.</p> <p>c. Institute social distancing measures to prevent spread of germs (e.g., minimize self-serve foods and group activities).</p> <p>d. Employees should stay at home if they are sick.</p> <p>e. Influenza (flu) vaccine is recommended for persons not previously vaccinated.</p>

1. Good Health Habits

- a. Good health habits should be promoted in various ways (e.g., educational programs, posters, campaigns, assessing adherence with hand hygiene).

- b. This CDC website has helpful educational posters (please see, for example, <https://www.cdc.gov/coronavirus/2019-ncov/communication/factsheets.html>).
- c. Each site should ensure that adequate supplies and facilities are available for hand washing for both offenders and employees.
- d. Provisions should be made for employees, visitors, and offenders to wash their hands when they enter the site.

2. Environmental Cleaning

- a. The frequency of routine cleaning of surfaces that are frequently touched should be increased. These areas can include doorknobs, keys, handrails, telephones, computer keyboards, elevator buttons, etc..
- b. Each District Manager will ensure their local cleaning schedule is reviewed, and cleaning frequency increased, for the duration of this pandemic.
- c. Cleaning may be done using EPA-certified disinfecting wipes such as the “Red-capped PDI Sani Cloth Germicidal Wipes” or equivalent, as available.
- d. The CDC also indicates that most common EPA-registered household disinfectants are effective for cleaning. Use disinfectants appropriate for the surface.
- e. Bleach solution is a good alternative that is readily available (if used within 24 hours of mixing).
 1. Bleach solution is 5 (five) tablespoons (1/3rd cup) bleach per gallon of water OR
 2. 4 (four) teaspoons bleach per quart of water.
- f. Follow manufacturer’s instructions for application and proper ventilation. Check to ensure the product is not past its expiration date.
- g. Never mix bleach with ammonia or any other cleanser.
- h. Each field site has been provided with a sprayer. This may be used as part of the cleaning and disinfecting plan.
 - i. Bleach solution should be used in the sprayer.
 - j. Bleach solution may be applied to hard surfaces suitable for cleaning with bleach.
- k. Staff should be aware of the need for proper air circulation and ventilation.
- l. Staff should wear gloves and eye protection while using the sprayer.

- m. After application, bleach solution should be allowed to stand for a minimum of one minute prior to cleaning.

2. Staff Self Screening

1. COVID-19 could gain entrance to a worksite via infected employees. Staff should stay home if they have fever and/or respiratory symptoms.
2. All staff will complete a self-screening at home prior to reporting for duty.
3. This includes all DOC staff working in a field office to include RRP staff or VSS staff.
4. Staff must complete attachment 8 once, verifying their responsibility and willingness to complete this self-screening.
5. This must be submitted to the District Manager.
 - o Any staff declining to complete Attachment 8 or to participate in self-screening may not report to work.
 - o Any such absence will be treated as unauthorized off-payroll and subject to discipline.
6. Screening will be done using Attachment 6 and will include a temperature check.
7. Attachment 6 does not need to be physically filled out, nor should it be submitted to the field office.
8. Any staff member screening positive on this instrument will notify their supervisor of the positive screening and will NOT report to work.
9. The staff member must receive clearance from a medical professional prior to returning to work.
10. This clearance may, but is not required to be, in writing.
11. If employees become sick at work, they should be advised to promptly report this to their supervisor and go home.
12. Employees should be advised to consult their healthcare provider by telephone.
13. Staff use of sick leave for other illnesses or injuries will continue to follow the normal process and will not require a medical clearance, (except if such is requested under CBA Article 35.)

3. Quarantine from work of Sick and Exposed Staff and Out of State Travel

1. Any staff member who travels to an area with travel restrictions pursuant to Vermont Department of Health Guidance must quarantine for 14 days.
<https://accd.vermont.gov/covid-19/restart/cross-state-travel>
 - This does NOT include staff who live in another state and cross borders as a matter of their normal commute.
 - People traveling for essential purposes, including work, do not need to quarantine. Essential travel includes travel for personal safety, medical care, care of others, parental shared custody, for food, beverage or medicine, or to perform work for businesses that are currently allowed to operate.
 - This does not include travel to non-quarantine counties as designated by Agency of Commerce and Community Development (ACCD) and completed in accordance with their guidelines.
2. This quarantine will be for a period of 14 days.
 - If after 7 days, the staff member does not have symptoms, the staff member can arrange for a COVID test through their primary care provider OR a pop-up testing location if available.
 - If that test is negative, Intake Quarantine may be ended at that time prior to the 14 days.
3. The employee may use their own sick leave to cover this absence. Employees may only use up to 80 hours of the new COVID-19 related leave for such quarantine. If an employee has used 80 hours of the new COVID-19 related leave, they would be required to use their other contractual leave balances (sick, annual, personal or Compensatory Time).
4. If employees become sick at work, they should be advised to promptly report this to their supervisor and go home.
5. Employees should be advised to consult their health care provider by telephone.
6. If employees have been exposed to a known COVID-19 case as defined by the VTDOH, and if they have symptoms of fever, cough, or difficulty breathing, they should call their health care provider.
7. Each District Manager will ensure information is tracked for any employee that is sick or in-home quarantine.

8. The District Manager will review this information with the Central Operations Section to determine if a sick staff member had close contact with others and if any additional steps need to be taken to address this.
9. During the COVID-19 outbreak (as at all times), staff are required to follow usual reporting rules for notifying their chain-of-command when they will be away from work due to illness or potential exposure.
10. Anyone entering the site will be screened using [Attachment 6](#), except for staff who have completed the self-screening as specified in the above section.
11. Each District Manager will determine where such screening will take place and will assign staff to perform the screening.
12. The screener will wear PPE as follows: Gloves, goggles, and microfiber mask.
13. Screening should take place as close to the entrance as reasonably possible and as soon as the staff member arrives.
14. Staff who answer “yes” to any question will be sent home.
15. All staff will be screened for fever with an infrared thermometer (as soon as these become available).
16. Staff with temperatures at or above 100.0 will be sent home.
17. Anyone who refuses to comply with the screening, including temperature check, will not be allowed entrance into the building.
18. A re-screening will not need to be done for staff exiting and re-entering the building on the same continuous shift.

3. Social Distancing - Offender Contact

1. Various administrative measures will be implemented to reduce contact between people and the chance of spreading viruses.
2. All offenders entering a P & P site will be screening using [Attachment 1](#).
3. Each District Manager will identify a specific location where this screening is to be completed.
4. Such location should be at the earliest point of contact between DOC staff and the offender **and** engaged in a way that allows for physical distance (6 feet) or physical separation (e.g., plexiglass) between them.

5. If the screening cannot be performed or if the offender refuses to submit to screening, offender access to the P & P office will be denied.
6. Any offender who screens positive will not be permitted to enter the office. They will be issued a surgical mask, and a copy of [Attachment 2](#).
7. A positive-screened offender will be directed to leave, follow up with their health care provider, and contact their PO **by phone**.
8. POs are expected to contact positive-screened offenders by phone if they do not hear back in one business day.
9. Probation Officers are instructed to contact all offenders to instruct them on whether they should report to the field office or not for an office visit.
10. Offenders not reporting for office visits will be contacted by telephone.
11. Level 4 & 5 offenders will be seen in accordance with the Field Transition Plan.
12. In consultation with the District Manager, Electronic Monitoring can be used to increase the level of supervision available.
13. Staff are encouraged to use technological options (e.g. Zoom, Skype, Facetime) to communicate with offenders when such is available and practical. This should be done through professional, not personal, accounts.
14. Offenders without a telephone will need to report as required by agency procedures.
15. P&P Officers who conduct office visits will do so in an area designated by the Manager.
 - a. To the extent feasible, these locations should be separate from staff working areas.
 - b. These areas must be sanitized after use.
 - c. The Field Transition Plan will provide more guidance as to when and what type of office visits will be reinstated.
16. No Urinalysis testing will be conducted on offenders during this time of operation under the Covid-19 operating procedures.
17. Work crew is suspended at this time.

18. Central Dispatch is running during business hours from 0745 to 1630 Monday through Friday. Field staff are to use dispatch services during these hours.
19. VSSs will be working remotely unless otherwise indicated after discussions with the DM of their home-based office. They are available via cell and email.
20. Field checks will occur according to the Field Transition Plan
21. Residence approvals will occur according to the Field Transition Plan
22. Groups that are conducted in the P&P field offices areas are suspended.
23. Court appearances will be determined by the Chief Judge of each court or by order of the Supreme Court Justice. Officers are encouraged to select one (1) officer to cover all hearings for a particular court/judge.

3. Travel Permits

1. Travel Permits may be issued to non-restricted areas and approved for the following reasons:
 - a. documented employment purposes,
 - b. medical appointments or procedures,
 - c. court proceedings or other confirmed legal matters, or
 - d. attendance at approved treatment programs.

4. Personal Protective Equipment (PPE)

1. The guidance above is designed to significantly reduce the circumstances in which a staff member would need to come into contact with an offender known, or suspected, to have COVID-19.
2. The below is to provide guidance for when such contact is necessary.
3. The offender will be issued a surgical mask and directed to wear it.
4. The offender will be directed to wash their hands.
5. PPE will be required when a staff member comes in contact with an offender with known, or suspected, COVID-19.
6. For offenders who have suspected exposure but are not displaying symptoms, staff will wear PPE as follows:
 - a. Gloves
 - b. Microfiber mask
 - c. Goggles
7. For offenders who are displaying symptoms, staff will wear PPE as follows:

- a. Gloves
 - b. N95 Mask
 - c. Goggles
8. Gowns or Tyvek Suits will be worn for situations where a Use of Force appears likely.
9. Attachments [3](#) & [4](#) provide additional information on the safe use of this PPE.

5. Cloth Face Covering

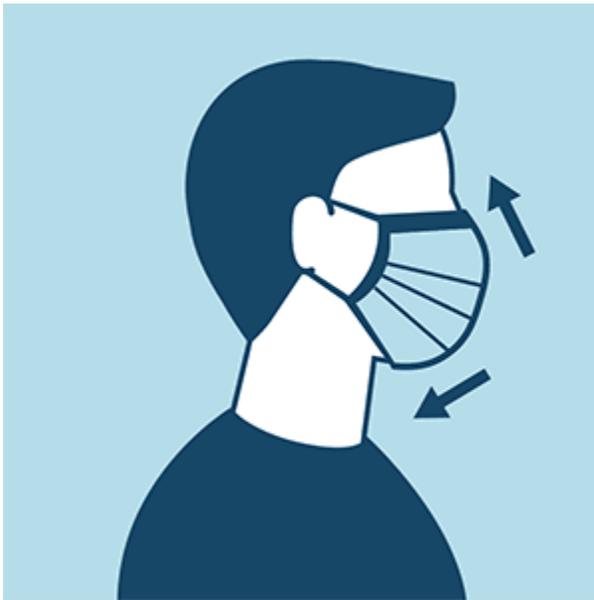
1. Wearing of Cloth Face Coverings - Staff

- a. In accordance with the current State of Vermont mandate, as of Saturday, August 1, 2020, all persons in Vermont are required to wear masks or cloth face coverings over their nose and mouth any time they are indoors or outdoors, where they come in contact with others from outside their households, especially in congregate settings, and where it is not possible to maintain a physical distance of at least six feet.
- b. In accordance with guidance from the Vermont Department of Health, DOC encourages staff to wear these in public when off-duty.
- c. A Cloth Face Covering is not a substitute for microfiber masks or N95 masks when these are required.
- d. Staff should familiarize themselves with requirements for use of PPE provided in Field and Facility Protocols.
- e. In any situation that requires either a microfiber mask or N95 mask, the Cloth Face Covering is to be removed and the appropriate mask applied.
- f. Cloth Face Coverings will be removed if they become wet or soiled.
- g. Cloth Face Coverings will be put into the laundry and treated like laundry coming from Medical Isolation.
- h. Staff will be provided with clean cloth face coverings and will be responsible for laundering and maintaining these.
- i. Wherever Cloth Face Coverings are specified, a microfiber mask may be substituted if preferred by the wearer (staff or offender).
- k. Where the protocol specifies microfiber mask, a Cloth Face Covering MAY NOT be used as a substitute.

2. Wearing of Cloth Face Coverings - Offenders

- a. All offenders are required to wear a Cloth Face Covering when meeting with staff or when in any P & P Office.
- b. Offenders must remove the covering if directed to by staff (e.g., for identification purposes or other security needs). Staff should ensure they are 6 feet from the offender or separated by a partition during this.
- c. A Cloth Face Covering is not a substitute for microfiber masks or other required PPE

3. How to wear a Cloth Face Covering



1. Cloth Face Coverings should—
 - a. fit snugly but comfortably against the side of the face,
 - b. be secured with ties or ear loops,
 - c. include multiple layers of fabric,
 - d. allow for breathing without restriction, and
 - e. be able to be laundered and machine dried without damage or change to shape.
2. Individuals should be careful not to touch their eyes, nose, and mouth when removing their Cloth Face Covering and wash hands immediately after removing.
3. Cloth Face Coverings should not be placed on young children under age 2, anyone who has trouble breathing, or is unconscious, incapacitated or otherwise unable to remove the Covering without assistance.
4. Cloth Face Coverings should be routinely washed. A standard washing machine will wash these appropriately.

6. Return to Incarceration/Transport

1. Returns to incarceration will be reviewed with the Field Services Operations Manager or Field Services Director in advance.
2. Public safety remains a matter of the highest priority and VTDOC will return offenders when it is necessary to address public safety risk.
3. Transportation of offenders who do not screen positive on [Attachment 1](#) (i.e., no reported exposure, no symptoms) will be conducted according to standard protocols.
4. All female returns will be directly to CRCF, regardless of whether they are a positive or negative screen.
5. Other returns will be transported to facilities as per normal processes. All male facilities, except MVRFC, are accepting male field returns. Returns of male offenders from Rutland, Addison, and Bennington Counties will be transported to SSCF.
6. After any transport of an offender, the transport vehicle will be cleaned with a hospital-grade disinfectant.

7. Transport – Positive Screen

1. If transporting an offender who has screened positive, the standards listed below will be utilized in addition to normal transport protocols.
2. Prior notification will be made to the receiving facility.
3. The receiving Superintendent will be responsible for notifying the Central Operations Section.
4. Offender wears a microfiber mask and washes their hands.
5. Probation Officer wears N95 mask and goggles. Wear gloves, gown, and eye protection if in close contact with offender prior to transport.
6. Prior to transporting, all PPE (except N-95 respirator) is removed and hand hygiene (washing or thorough application of hand sanitizer with at least 60% alcohol) is performed. This is to prevent contaminating the driving compartment.
7. Ventilation system should bring in as much outdoor air as possible. Set fan to high.
8. DO NOT place air on recirculation mode.
9. Weather permitting, drive with the windows down.
10. Following the transport, if close contact with the offender is anticipated, put on new set of PPE. Wash hands after PPE is removed.
11. After transporting an offender, air out the vehicle for one hour before using it without a surgical mask or respirator.

12. When cleaning the vehicle, wear a disposable gown and gloves. A face shield or microfiber mask and goggles should be worn if splashes or sprays during cleaning are anticipated.
13. Clean and disinfect the vehicle after the transport utilizing a hospital-grade disinfectant
14. If a decision is made to transport an offender with signs and symptoms of severe respiratory illness to a health care facility, the sending facility will notify the receiving health care facility of the pending transport of a potentially infectious patient. Staff should use appropriate judgment in determining whether an offender requires EMS services due to an emergent medical need *as they would in any other case*.

8. Field Contact Tracing

1. Each field office will have a designated “contact tracer” who has completed the online training listed below:

https://www.coursera.org/learn/covid-19-contact-tracing?utm_medium=coursera&utm_source=promo

Site	Point of Contact	Phone number
Barre Probation and Parole	Mike Merchant	(802) 793-4272
Bennington Probation and Parole	Ellen Palmer	(802) 760-7869
Brattleboro Probation and Parole	Christina Granger	(802) 579-6451
Burlington Probation and Parole	Alan Monnier	(802) 863-7542
Hartford Probation and Parole	Matt Holden	(802) 296-5513
Morrisville Probation and Parole	Mike Merchant	(802) 793-4272
Newport Probation and Parole	Jason Webster	(802) 334-3312
Rutland Probation and Parole	Nick Daigle	(802) 779-4239
St. Albans Probation and Parole	Lisa Wilson	(802) 524-7966
St. Johnsbury Probation and Parole	Maxwell Maloney	(860) 681-9435
Springfield Probation and Parole	Leona Watt	(802) 885-8994

2. Any COVID-19 related questions regarding close contact should be directed to the field office contact tracer.
3. If collaboration is needed, the DM will contact the Lead Contact Tracer who will discuss with the ICS COVID Operations Team.
4. If a positive COVID-19 case is identified, the DM will contact ICS Operations Chief, DOC Director of Nursing and the Lead Contact Tracer.
5. ICS will then review and determine if contract tracing will be done.
6. If ICS requests the field conduct contact tracing, the Field Close Contact Questionnaire (Attachment 7) will be utilized.

Attachment 1 – COVID-19 New Intake Screening Form

1. Assess for Signs or Symptoms of Illness • Persons with symptoms of illness or cough should be masked immediately and separated from others. ASK – Do you have a...		Date of Onset:
<input type="checkbox"/> Yes <input type="checkbox"/> No	Fever (100.0F) // Record temperature: ___°F/ ___°C or felt feverish	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Cough	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Shortness of Breath or Difficulty Breathing	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Chills	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Muscle Pain	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Sore Throat	
<input type="checkbox"/> Yes <input type="checkbox"/> No	New Loss of Taste or Smell	
3. If <i>YES</i> to ANY RISK AND SYMPTOM questions, do not allow the offender to enter the office. They should be directed to contact their health care provider and notify the PO <u>by phone</u> of the results.		

Inmate Name: _____ Number: _____

Employee Name: _____ Date: ___/___/___

Employee Signature: _____

Attachment 2 – Sick with COVID

[Attachment](#)

Attachment 3 - Safe Conservation of N95 Masks

N 95 respirator use, N95 filters at least 95% of airborne particles.

Strategies for conserving N95 respirators as approved by the National Institute for Occupational Safety and Health (NIOSH)

Use hand hygiene before and after touching or adjusting.

Extended use: continuous use for repeated close contact encounters, can function within design specification for 8 hours of continuous or intermittent use.

Reuse: If officer leaves unit for bathroom or break remove the N95 without shaking it and put it into a paper bag with name on it wash hands. Use clean gloves when donning a used N95 and performing a user seal check. Discard gloves, wash hands.

Discard mask if contaminated with any bodily fluids, if obviously damaged, or becomes hard to breathe through.

Implement “just-in-time” fit testing. Plan for larger scale evaluations, training and fit testing. Limit respirators during training, allow limited re-use of respirators by individuals for training and then fit testing.

Attachment 4 – PPE Sequence

See Separate Attachment.

Attachment 5 - Stay Home, Stay Safe

Removed as the Governor’s Executive Orders have changed.

Attachment 6 - Staff Screening Tool

- It is suggested that this form be laminated.
- A written copy of this form is NOT required. Any positive results will be reported on the Line List.

Today or in the past 24 hours have you had any of the following symptoms?	
Fever or felt feverish?	Yes ___ No ___
Cough that is abnormal for you and/or sore throat?	Yes ___ No ___
Shortness of Breath or Difficulty Breathing?	Yes ___ No ___
Chills	Yes ___ No ___
Muscle Pain	Yes ___ No ___
Nausea or diarrhea?	Yes ___ No ___
New Loss of Taste or Smell	Yes ___ No ___
Headache unusual for you or unexpected	Yes___ No___

Fatigue abnormal to you	Yes___
	No___
Current Temperature (Fever 100.0)	Record Temperature F___ C___

If the answer is YES to any of the above and/or the current temperature is over 100.0 – see below

(If completed at the facility) – Individual is not permitted to enter the facility.

(If completed by an employee self-screening at home) – Do NOT report to work. Please contact your Supervisor. You must be cleared by a medical professional prior to returning to work.

Attachment 7 -Field Close Contact Tracing Questionnaire

Name _____ Date _____

The CDC defines **close contact** as anyone who was **within 6 feet** of an infected person **for at least 15 consecutive minutes**.

- Using the standard above, at any point were you in close contact with _____ ? Y/N
 If yes-
 When?
 How long?
 What was the proximity (distance between) to _____ ?
 Were you wearing a mask? What type?
 Was _____ wearing a mask? What type?

2. Did you remove your mask at any point in the vicinity of _____ ?
For how long?
What was the distance between you and _____ ?

3. Do you have any symptoms? Fever or chills, Cough, Shortness of breath or difficulty breathing, Fatigue, Muscle or body aches, Headache, New loss of taste or smell, Sore throat, Congestion or runny nose, Nausea or vomiting, Diarrhea.

4. When did the symptoms start?

5. Have you had any close contact with any DOC staff at or outside of work/office in the two days prior to symptoms starting? If Asymptomatic- have you had any close contact with DOC staff since exposure?
Please advise if masks were worn and what type.

6. Have you had any close contact with offenders in the two days prior to symptoms starting?
If Asymptomatic- have you had any close contact with offenders since exposure?
Please advise if masks were worn and what type.

7. Any recent contact with a confirmed COVID positive person?

When?

What was the distance between you and them?

What was the duration of the contact?

Attachment 8 Self-Screening Agreement

I _____ have been provided a copy of Attachment 6, the COVID-19 Staff Screening Tool.

I will complete a self-screening each day prior to reporting for work. I understand that I am to notify my supervisor if I have any of the symptoms referenced or a temperature in excess of 100.0.

Name _____ Date _____

Signature _____

If the symptoms list changes, DOC will update Attachment 6 and provide the revised version to staff.