





























# Symptom & Temperature Log

Write your symptoms and temperature in the space below every day for 14 days.

DAY	DATE	SYMPTOMS	TEMP
DAY 1		 	
DAY 2		 	
DAY 3		 	
DAY 4		 	
DAY 5		 	
DAY 6		 	
DAY 7		 	
DAY 8		 	
DAY 9		 	
DAY 10		 	
DAY 11		 	
DAY 12		 	
DAY 13		 	
DAY 14		 	



**If you get sick**, contact your health provider as instructed and remind them your travel history, your symptoms, and that you are self-monitoring. Your daily health checks are complete at 14 days or as indicated by your health provider/public health authorities.

**If you have a medical emergency, call 911 and inform them whether you are self-monitoring for COVID-19.**

