

COVID-19 Safety Requirements

1. Please bring your own water to drink. Shared water dispensers are no longer available.
2. Face masks are required for your appointment unless you are fully vaccinated.
3. Please maintain a six-foot distance between you and any other adult unless you require their assistance.
4. When you arrive at the office, I will check your forehead temperature and ask a series of questions (unless you have filled out the questionnaire in advance). If you have symptoms, a fever, or have been recently exposed to COVID-19, your session will have to be postponed.

Please circle the correct answers and bring this page to your appointment.

Print Name

Date

Do you have a fever (or have you felt hot or feverish in the last 21 days)?

YES

NO

Have you had any shortness of breath, digestive issues, or flu-like symptoms?

YES

NO

Have you experienced a recent loss of taste or smell?

YES

NO

Have you been in contact with any confirmed COVID-19 positive patients?

YES

NO

If you answered YES to any of the above, please call to discuss it before your appointment.

Are you fully vaccinated against COVID-19?

YES

NO

Signature