COVID-19 Daily Temperature & Symptom Tracking Log

Please fax this log to St. Lawrence County Public Health at 315-386-2880

Monitor symptoms every 12 hours while working

Monitor symptoms twice daily at home

Name:	**DOB:**	**Phone:**

	Mark yes or no, if yes please describe:							
Date & Time	**Temp** ***(how taken? ear, oral, etc.)***	**Cough**	**Shortness of Breath**	**Muscles Aches**	**Headaches**	**Abdominal Pain**	**Other symptoms**	**Any medications?** ***Date/Time of Last Dose***