

# COVID-19 Patient Risk Assessment Form

Category	Travel history	Occupation	Contact history	Cluster
Question	What is your travel history within the last 14 days?	What is your occupation?	What is your recent contact history, and what places have you been to?	Have you been in large crowds (in clusters) in the last 14 days?
Evaluation Item	<input type="checkbox"/> I have travelled overseas (Countries visited: )	<input type="checkbox"/> Healthcare worker (e.g., medical/non-medical personnel, including outsourced worker, intern, laboratory personnel and healthcare volunteer.) <input type="checkbox"/> Transportation industry (e.g., taxi driver and coach driver.) <input type="checkbox"/> Tourism industry (e.g., tour guide and tour operator.) <input type="checkbox"/> Hotel industry (e.g., housekeeper, receptionist, and quarantine hotel staff.) <input type="checkbox"/> Airline industry(e.g., aircrew.) <input type="checkbox"/> Food and beverage industry or general merchandise industry (e.g., department store/shopping mall, entertainment venue, food delivery service.) <input type="checkbox"/> Others:	<input type="checkbox"/> Have been to hospitals, clinics for treatment <input type="checkbox"/> Have come into contact with friends, relatives/family members/colleagues who have travelled abroad or foreign nationals <input type="checkbox"/> Have been to airports, tourist attractions, and other places frequently visited by foreigners <input type="checkbox"/> Others:	<input type="checkbox"/> Family members also have a fever or respiratory symptoms <input type="checkbox"/> Friends also have a fever or respiratory symptoms <input type="checkbox"/> Colleagues also have a fever or respiratory symptoms