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In the last 14-21 days have you had a fever or felt feverish.	
Are you having any shortness of breath or other breathing difficulties?	
Do you have a cough?	
Do you have any flu-like symptoms?	
Have you experienced a recent loss of taste or smell?	
Have you been in contact with anyone who has tested positive for	
COVID-19	
Have you traveled out of the State of NC within the last 14 days?	
Is your health compromised by conditions, such as: heart disease, lung	
disease, kidney disease, diabetes or any auto-immune disorders?	

If you answered **"YES"** to any of the questions, please explain in detail or call our office. Thank you for your time and feel free to call with any questions or concerns.