

COVID-19 - SICK WORKER MONITORING RECORD

Work Name:

Date into isolation

Location of Isolation: Date ou				of isolation:				
Date	Time	Person Checking	Temperature °C	Breathing	Fluid	Food	Wellbeing	Comments
				Normal Shallow Difficult	Low Normal High	Low Normal High		
				1				
Medical Appointments				Notes				

Manager Name:

Allocated care / contact person:

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