

Sample resident monitoring log.

**Fairfax County Health Department
Long Term Care Facility COVID-19 Surveillance Line Listing**

Facility Name:

Date:

Name	DOB	Room #	Building/Wing	Temperature	Cough (Y/N)	Shortness of Breath (Y/N)	General Comments (include time of onset)

Note: For residents, T >99.0 F is classified as a fever

