

# Epidemiological questionnaire for persons arriving from countries affected by the COVID-19 Outbreak.

December 2019, a novel coronavirus emerged in Wuhan City, China. Since then the virus spread to more than 50 countries including Europe and America. Since then the virus showed evidence for human-to-human transmission as well as evidence of asymptomatic transmission. At 30th January 2020 WHO declared a Public Health Emergency of International Concern. The disease was formally named COVID-19 on 11th of February. The virus itself has been named SARS-CoV-2.

Coronavirus affects the respiratory tract of animals and humans mostly results in a dry cough, fever and cold-like symptoms. Rarely a severe pneumonia and respiratory distress with need of intensive care and consequent death is possible. Estimated 10 -15% of common colds are thought to be due to Coronavirus infections, globally.

It's almost certain that the transmissibility of the Virus occurs also in patients with mild or beginning symptoms. These patients assume themselves as not sick enough to go on sick call and can become a threat for other humans.

Incubation time of the virus lies between 2-14 (WHO) and 2-12 (ECDC) days.

A transmission can also take place during this time.

**COVID-19**  
Disease caused by the SARS-CoV-2 virus

**Novel coronavirus**  
Coronaviruses are viruses that **circulate among animals** but some of them are also known to affect humans.  
The 2019 novel coronavirus was identified in China at the end of 2019 and is a new strain that has not previously been **seen in humans**.

**Symptoms**

- FEVER
- COUGH
- DIFFICULTY BREATHING
- MUSCLE PAIN
- TIREDDNESS

**Prevention**

When visiting affected areas

- Avoid contact with sick people
- Wash your hands with soap and water
- If you develop cough, use a medical face mask

Wherever you travel apply general hygiene rules

**Transmission**  
VIA RESPIRATORY DROPLETS  
**2-14** days  
estimated incubation period

ecdc.europa.eu/en/novel-coronavirus-china

1. Rank, name, surname .....
2. National personal number/DoD ID# .....
3. Address (in Poland), unit, phone number: .....
4. Where have you been within last 14 days? (China, South Korea, Iran, Italy, others):

I.p.	Location (country, town)	Time		Remarks
		from	to	

5. Type of service (i.e. medical personnel, civil-military cooperation etc.):  
.....  
.....

6. Have you (or your close family member or colleague) been in contact with civilian personnel:  
1) no contact;  
2) occasional (what kind, how often).....  
.....  
3) often (what kind of contact, how often, any suspicious counter partners)  
.....

7. Have you (or you family member or colleague) been in contact with a person having probable or confirmed COVID-19 case (date of last contact, circumstances etc.):.....  
.....

8. What kind of (if any) personal protective posture did you use? :  
1)PPE (gloves, googles, masks, protective suits etc.);

2) anti-bacterial fluids;

3) other: .....  
.....

9. Do you have or did you have any of the following symptoms? (if yes please indicate the date of onset)

1) fever (above 38°C/100,4 F) .....

2) cough.....

3) shortness of breath.....

4) sore throat.....

5) radiological signs of pneumonia.....

**and/or**

6) acute respiratory distress syndrome.....

10. Other signs and symptoms .....

.....  
.....  
.....  
.....  
.....

11. Have you been tested for the presence of coronavirus (PCR test):

No  Yes  Date of test:.....

Result: negative  positive

12. Hospitalisation:

Have you been hospitalised due to COVID-19 disease suspicion?:

If yes: Hospital....., Country, town .....

Date of Admission .....

Isolation– from .....to.....

Intensive care unit: No  Yes

13. Quarantine:

No  Yes  from..... to.....

14. Present signs and symptoms (describe).....

.....  
.....  
.....  
.....  
.....  
.....

.....  
(date)

.....  
(rank, signature)