Screening Clinic Guidance

1. Wait.

2. Please go to the reception desk.

3. Please stay in the waiting area.

4. Go to the examining room
   - Consult a doctor in the examining room and get your temperature checked.
   - Receive the nose swab test, mouth swab test, and sputum test.
1. Personal Information

1. Identification

Please

Identification please.

2. Current

Living

Address

Correct

Is this your current address?

Tell me your address please.

3. Mobile phone

Phone number

010-0000

Tell

Tell me your mobile phone number please.

4. Job

What

What is your job?

Previous

Job

What

What was your previous job?
2. Travel Record

1. Did you travel overseas?
   - Where did you visit?

2. Are you a member of the Shincheonji religious group?
   - When was your last service?

3. Did you visit a COVID-19 group transmission area?

4. Did you meet a confirmed case?
3. Symptoms

1. Current: ?
   - How: ?
   - Sick: ?

   What are your symptoms?
   - Fever
   - Cough
   - Difficulty breathing
   - Chest pressure
   - Sore throat
   - Muscle pain
   - Chill
   - Runny nose
   - Headache
   - Diarrhea

2. When: ?
   - Sick: ?

   When did the symptoms begin?
   - From the __ (Day) of __ (Month)

3. Medicine: ?
   - Take: ?

   Did you take any medicine?
   - Fever reducer: Take

4. Cigarette: ?
   - Smoke: ?

   Do you smoke?
   - How many cigarettes do you smoke per day?

5. Blood pressure: ?
   - Diabetes: ?
   - Pneumonia: ?

   Do you have any high blood pressure, diabetes, or pneumonia?

6. Pregnant: ?

   Are you pregnant?
### COVID-19 Symptoms and Related Information

<table>
<thead>
<tr>
<th>COVID-19 Category</th>
<th>Symptoms</th>
<th>Related Information</th>
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<tbody>
<tr>
<td>Overseas</td>
<td>Group transmission area</td>
<td>Places</td>
</tr>
<tr>
<td>Fever</td>
<td>Cough</td>
<td>Difficulty breathing</td>
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<tr>
<td>Muscle pain</td>
<td>Chill</td>
<td>Runny Nose</td>
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<tr>
<td>High blood pressure</td>
<td>Low blood pressure</td>
<td>Diabetes</td>
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</table>

### Punctuation and Number Chart

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### Date and Time Chart

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### Punctuation and Alphabet Chart

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### Telephone Number

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### Translation

- **Pen & Paper Please**
- **Pardon?**
- **I don’t know**
- **Yes**
- **No**

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**Communication Support Image & Text Board (COVID-19 Reception) 1**
Clinic 1

1. Consult with a doctor

2. Check body temperature
Consult a doctor

1. Current  How  Sick  
What are your symptoms?

- Fever
- Cough
- Difficulty breathing
- Chest pressure
- Sore throat
- Muscle pain
- Chill
- Runny nose
- Headache
- Diarrhea

2. When  Sick  
When did the symptoms begin?

- ?

how  Sick  
How were you?

- ?

on ___ (day) of ___ (month)

3. Medicine  Take  
Did you take any medicine?

- ?

Fever reducer  Take  
Did you take any fever reducer?

- ?

4. Blood pressure  Diabetes  Pneumonia  
Do you have high blood pressure, diabetes, or pneumonia?

- ?

5. Examination  Sudden body movement  
Is there a possibility you may suddenly move while testing?
Temperature check

1. Ear  Show
   Please show your ear.

2. Doctor  Ear  Check body temperature
   Doctor will check your body temperature.
3. Sputum Test

2. Mouth Swab Check

1. Nose Swab Test

Clinic 2
Mouth Swab Test

1. **Mask**  
   **Downward**  
   **Lower**  
   Pull your mask down.

2. **Head**  
   **Lean back**  
   Lean your head back.

3. **Mouth**  
   **Open wide**  
   Open your mouth wide.

4. **Ah~**  
   **Make a long sound**  
   Make a long ‘Ah~’ sound.

5. **Doctor**  
   **Swab**  
   **Mouth**  
   **Put inside**  
   Doctor will put a swab inside your mouth.

6. **Swab**  
   **Inside mouth**  
   **Rub**  
   Use the swab to rub inside the mouth.
Nose Swab Test

1. **Head**  
   **Lean back**

   Lean your head completely back.

2. **Eye**  
   **Shut**

   Please close your eyes.

3. **Doctor**  
   **Swab**  
   **Nose**  
   **Put inside**

   Doctor will put a swab inside your nose.

4. **Swab**  
   **Nose**  
   **Inside**  
   **Rub**

   Doctor will rub the swab inside your nose.
Sputum Test

1. Mask On → Inside Mouth → Sputum → Collect

Put on a mask to collect sputum inside your mouth.

2. Container → Sputum → Spit

Spit sputum into the container.

3. Nose Swab Test, Mouth Swab Test → Sputum

When you have sputum during the nose or mouth swab tests

Container → Sputum → Spit

Spit sputum into the container.
After examination

- **Test result**
  - Positive
  - Negative
- **Tomorrow**
- **Cellphone**
- **Text message**

You’ll receive the test result tomorrow via text message.

- **Go outside**
  - No
- **Home**
- **Stay**

Do not go outside. You should stay home.

- **Home**
  - Keep distance
  - Living

Keep distance from others in your house.

- **Eat alone**
  - Sleep alone
  - Eat together
  - Share a bed
  - No

Eat alone and sleep alone. You should not eat together or share a bed.

- **Put on masks**
  - keep off for 2m (6.6 feet)
  - 2m
  - Talk

When talking, put on a mask and keep a 2m distance.
• **Bathroom**

When there is one bathroom,

- Urinate
- Defecate
- Flush down

Flush after use.

- Bleach
- Toilet
- 1m (3.3 feet) around toilet

Clean up

Clean the toilet and 1m around it with bleach.

- 10 Minutes
- Ventilation
- Other people
- Washroom

Other people can use the toilet after ventilating for 10 minutes.

• **Bus**

You should not use the bus.

- Home
- Walk
- Bike
- Car
- Taxi
- Take

Walk home.

Take a bike, car, or a taxi.

- Car
- Backseat
- Diagonal
- Seat

Seat diagonally from the driver, in the backseat.