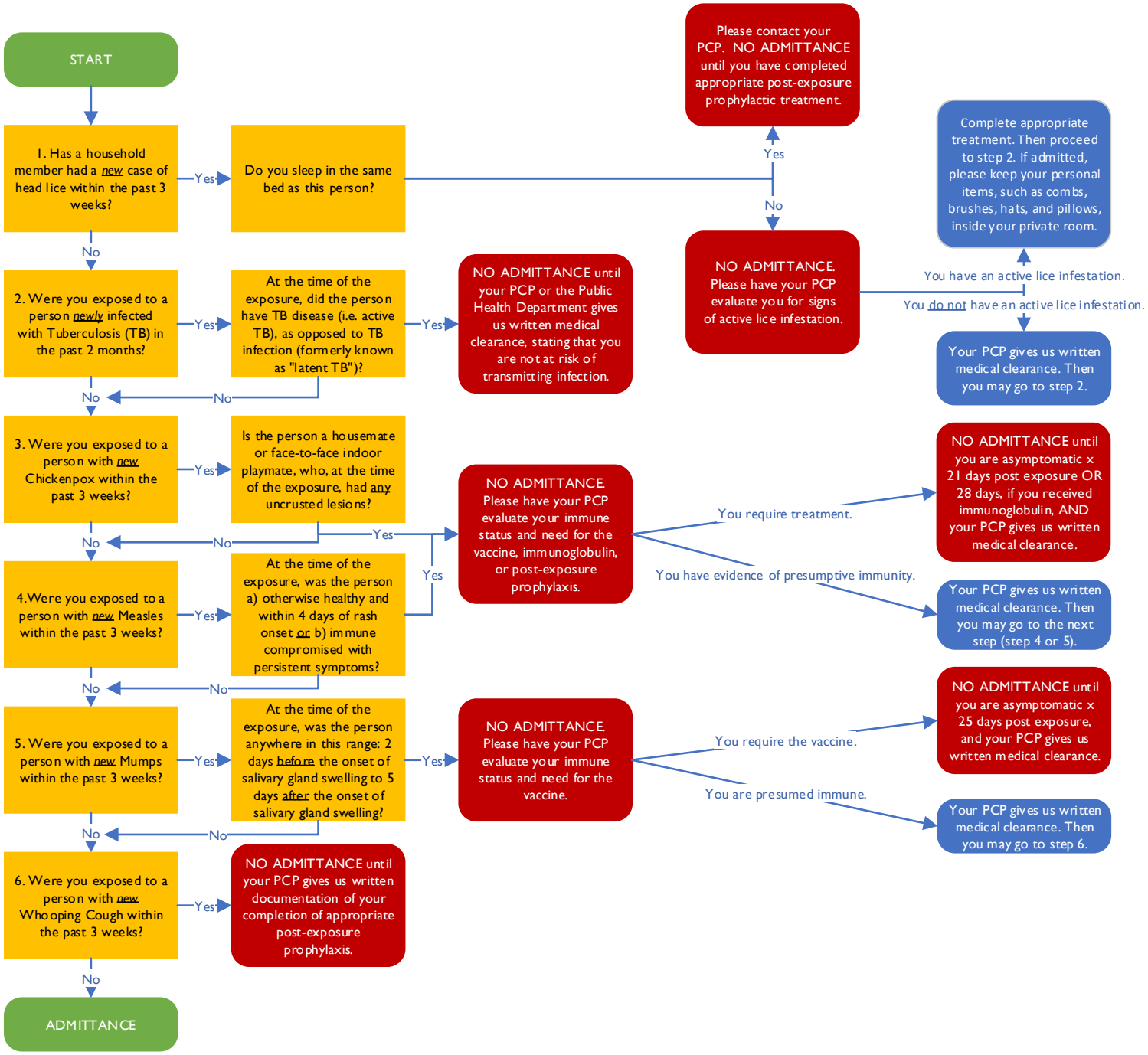
Disease Exposure Questionnaire for Residents and Visitors of RMHC® Programs

To RMHC® Staff: Please administer this questionnaire to all residents and visitors upon admission to program facilities and if/when families or patients develop new infectious symptoms. All RMHC® program residents and visitors **must** notify RMHC® Chapter staff of all new symptoms **immediately**.



RMH = Ronald McDonald House
PCP = primary care provider