



Daily Self-Monitoring Tool

Day: Date:	DAY 1 (Day return)		DAY 2		DAY 3		DAY 4		DAY 5		DAY 6		DAY 7	
	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM
Time														
Temperature														
Cough														
Difficulty Breathing														
Sore Throat														
Wheezing														
Other														
Fever-reducing medications taken*														

*fever-reducing medications include aspirin, Tylenol® (acetaminophen), Aleve® (naproxen), Motrin® or Advil® (ibuprofen)

Day: Date:	DAY 8		DAY 9		DAY 10		DAY 11		DAY 12		DAY 13		DAY 14	
	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM
Time														
Temperature														
Cough														
Difficulty Breathing														
Sore Throat														
Wheezing														
Other														
Fever-reducing medications taken*														

If you develop symptoms (fever > 100.4, cough, or shortness of breath) please contact your primary care provider and the Cabarrus Health Alliance at 704-920-1213.