

**Subject:** COVID-19 Update 4-2-20  
**Date:** Thursday, April 2, 2020 at 1:31:56 PM Central Daylight Time  
**From:** Mike Heitmann  
**To:** ZZComplete e-mail list  
**Attachments:** Symptom Comparison Chart.pdf, Covid Entry Questionnaire Spanish.docx, Covid Entry Questionnaire English.docx

Good afternoon, employee-owners:

Below is an update on our COVID-19 response. The first part is additional information and the second part contains answers to the questions that have been submitted.

**ADDITIONAL INFORMATION:**

- Attached are English and Spanish versions of a **Jobsite/Office Entry Questionnaire**. You can type in the necessary contact info and post this at your jobsite or office.
- Also, attached is a handy dandy chart that differentiates symptoms of the flu, allergies, and COVID-19. Hopefully this is helpful for you and your teams. Thanks Marketing team for cranking these out on such short notice!
- One thing that sets Garney apart from our competition is our level of customer service. Now, more than ever, is a time where we can show that **“Service to Our Customers and the Community”** is a fundamental Goal. I encourage all project team leaders to reach out to the Owner of your project and ask, “Is there anything Garney can help you with in this current crisis?” Asking this question will demonstrate our willingness to lend a hand to our customers and the communities we live in.

**QUESTIONS SUBMITTED:**

No questions were received yesterday.

As always, please continue submitting your questions to [covid19@garney.com](mailto:covid19@garney.com).

Enjoy your Thursday and stay safe!

**Mike Heitmann**













*Employee-Owner Since 1990*

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# COVID-19

## CORONAVIRUS, COLD, FLU, AND ALLERGY SYMPTOM COMPARISON


<b>SYMPTOMS</b>	<b>COVID-19*</b>	<b>COLD</b>	<b>FLU</b>	<b>ALLERGIES</b>
 <b>FEVER</b>	<b>COMMON</b> (MEASURED AT 100 F OR HIGHER)	<b>RARE</b>	<b>HIGH (100-102 F), CAN LAST 3-4 DAYS</b>	<b>NO</b>
 <b>HEADACHE</b>	<b>SOMETIMES</b>	<b>RARE</b>	<b>INTENSE</b>	<b>SOMETIMES</b>
 <b>GENERAL ACHES, PAINS</b>	<b>SOMETIMES</b>	<b>SLIGHT</b>	<b>COMMON, OFTEN SEVERE</b>	<b>NO</b>
 <b>FATIGUE, WEAKNESS</b>	<b>SOMETIMES</b>	<b>SLIGHT</b>	<b>COMMON, OFTEN SEVERE</b>	<b>SOMETIMES</b>
 <b>EXTREME EXHAUSTION</b>	<b>SOMETIMES</b> (PROGRESSES SLOWLY)	<b>NEVER</b>	<b>COMMON (STARTS EARLY)</b>	<b>NO</b>
 <b>STUFFY NOSE</b>	<b>RARE</b>	<b>COMMON</b>	<b>SOMETIMES</b>	<b>COMMON</b>
 <b>SNEEZING</b>	<b>RARE</b>	<b>COMMON</b>	<b>SOMETIMES</b>	<b>COMMON</b>
 <b>SORE THROAT</b>	<b>RARE</b>	<b>COMMON</b>	<b>COMMON</b>	<b>NO</b>
 <b>COUGH</b>	<b>COMMON</b>	<b>MILD TO MODERATE</b>	<b>COMMON, CAN BECOME SEVERE</b>	<b>SOMETIMES</b>
 <b>SHORTNESS OF BREATH</b>	<b>IN MORE SERIOUS INFECTIONS</b>	<b>RARE</b>	<b>RARE</b>	<b>COMMON</b>
 <b>RUNNY NOSE</b>	<b>RARE</b>	<b>COMMON</b>	<b>SOMETIMES</b>	<b>COMMON</b>
 <b>DIARRHEA</b>	<b>SOMETIMES</b>	<b>NO</b>	<b>SOMETIMES**</b>	<b>NO</b>

\* Information is still evolving.

\*\* Sometimes for children.



## CORONAVIRUS, RESFRÍO, GRIPE, Y ALERGIA COMPARACIÓN DE SÍNTOMAS

SINTOMAS	COVID-19*	RESFRÍO	GRIPE	ALERGIAS
 FIEBRE	COMÚN (100 O MÁS)	RARO	ALTO (100 – 102)	NO
 DOLOR DE CABEZA	A VECES	RARE	INTENSO	A VECES
 AFLICCIÓN GENERAL DOLOR	A VECES	POCO	COMÚN, MUCHAS VECES SEVERO	NO
 FATIGA, DEBILIDAD	A VECES	NUNCA	COMÚN (COMIENZA TEMPRANO)	A VECES
 AGOTAMIENTO EXTREMO	A VECES (PROGRESA LENTAMENTE)	NUNCA	COMÚN (COMIENZA TEMPRANO)	NO
 CONGESTIÓN NASAL	RARO	COMÚN	A VECES	COMÚN
 ESTORNUDOS	RARO	COMÚN	A VECES	COMÚN
 DOLOR DE GARGANTA	RARO	COMÚN	COMMON	NO
 TOZ	COMÚN	TEMPLADO A MODERADO	COMÚN, PUEDE VOLVERSE SEVERO	A VECES
 FALTA DE ALIENTO	EN MÁS INFECCIONES SEVERAS	RARO	RARO	COMÚN
 NARIZ QUE MOQUEA	RARO	COMÚN	A VECES	COMÚN
 DIARREA	A VECES	NO	A VECES**	NO

\*La información sigue evolucionando

\*\*A veces para niños

# Our offices are open, however, please read the questions below.

If you answer yes to any of these questions, please contact [enter name at XXX-XXX-XXXX] before entering the premises. Thank you.

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- 1** Have you, or anyone in your family, been in contact with a person that has tested positive for COVID-19?
- 2** Have you, or anyone in your family, been in contact with a person that is in the process of being tested for COVID-19?
- 3** Have you, or anyone in your family, traveled outside of the United States within the last 14 days?
- 4** Have you been medically directed to self-quarantine due to possible exposure to COVID-19?
- 5** Are you currently having trouble breathing or have flu-like symptoms within the past 48 hours, including: Fever, Cough, Shortness of Breath, Sore Throat, Runny/Stuffy Nose, Body Aches, Chills, or Fatigue?

# Nuestras oficinas están abiertas, sin embargo, lea las preguntas a continuación.

Si responde sí a alguna de estas preguntas, comuníquese con **[entrar nombre a XXX-XXX-XXXX]** antes de entrar el edificio. Gracias.

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- 1** ¿Usted, o alguien de su familia, ha estado en contacto con una persona que haya dado positivo por COVID-19?
- 2** ¿Usted o alguien de su familia ha estado en contacto con una persona que está en proceso de hacerse la prueba de COVID-19?
- 3** ¿Usted o alguien de su familia ha viajado fuera de los Estados Unidos en los últimos 14 días?
- 4** ¿Ha sido médicamente dirigido a la auto cuarentena debido a una posible exposición al COVID-19?
- 5** ¿Actualmente tiene problemas para respirar o tiene síntomas similares a los de la gripe en las últimas 48 horas, que incluyen: fiebre, tos, falta de aliento, dolor de garganta, secreción / congestión nasal, dolor de cuerpo, escalofríos o fatiga?