

**COVID 19 RISK ASSESSMENT OF EMPLOYEES AND STUDENTS  
UNIVERSITY OF PERADENIYA**

A	Details of Contact		One Dose	Both Doses	No
	Name :	Are you Vaccinated			
	NIC No :		YES	NO	
	Mobile No :	Are you on any long-term Treatment			
	Address :	Indicate the Condition			
	Faculty/Dept :				

B	Details of index case	
	Name of the Positive Case	
	Days of contact (during infections period of positive case)	
	Date of last contact (during infections period of positive case)	

C	Nature of Contact			
	<b>1.Activity</b>	YES	NO	NOT SURE
I	Was your colleague wearing mask at all times during the Interaction			
II	Were you wearing a mask during all interactions			
III	Did you share a meal or eat <b>in the same table at least once during infectious period*</b>			
IV	Did you share bottle/glass/tea cup, personal items (pen, purse, keys, books, etc..) <b>at least once during infectious period*</b>			
V	Did you share same transport <b>during infectious period*</b>			
VI	Did you share bed room <b>during infectious period*</b>			

**\*Infectious period – Two day before sample collection for asymptomatic patients, three days before symptom onset for symptomatic patients.**

	<b>2.Work Place</b>	YES	NO
i	Do you work in same room during <b>infectious period*</b>		
ii	Shared work place air conditioned?		
iii	Work place poorly ventilated or crowded		
	<b>3.Gathering</b>		
i	Were you in a gathering (Ex - Meeting, Class, Discussion, Practical) with the index case during the infectious period.		
ii	Was the room where the gathering was held filled to more than 50% of capacity		
iii	Was the room where gathering was held air conditioned		
iv	Was the room where the gathering was held poorly ventilated		
v	Was the gathering held for more than 15 min.		

D	Please describe your interactions with the colleague confirmed to have covid 19 in your own words.

Please send this format to [phihealthservice@gmail.com](mailto:phihealthservice@gmail.com) and [cmohc@pdn.ac.lk](mailto:cmohc@pdn.ac.lk) if there are answers in shaded columns.

or need any clarification to answer column - D