

The BellAge Covid-19 Checkup Tool

How to use the online tool to assess your risk
of contracting Covid-19

Presented by The Oasis Institute

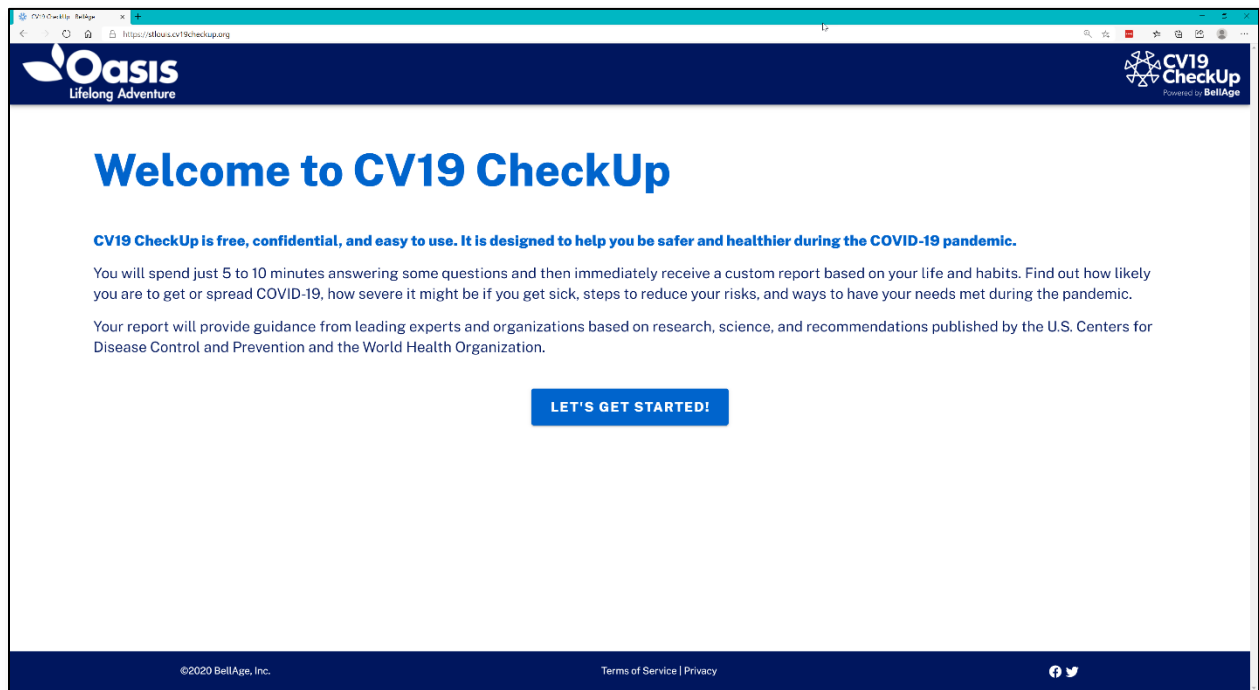
The Covid19 CheckUp tool by BellAge is a free easy-to-use online assessment tool you can use to evaluate your risk of getting Covid-19. It only takes a few minutes using your computer or mobile device. You can also use the tool to assess the risk of family members or friends.

The Covid-19 CheckUp survey asks a series of questions about your social interactions and what measures you currently take to avoid the disease. Your risk is evaluated based on what researchers currently know about the spread of Covid-19. Your participation may also help scientists understand more about the spread of Covid-19 within communities.

The Covid-19 CheckUp tool is completely anonymous. No personally identifiable information is asked for or required. Your results, including personalized recommendations from the U.S. Centers for Disease Control and Prevention and the World Health Organization, are available as soon as you finish the questionnaire.

Let's Get Started!

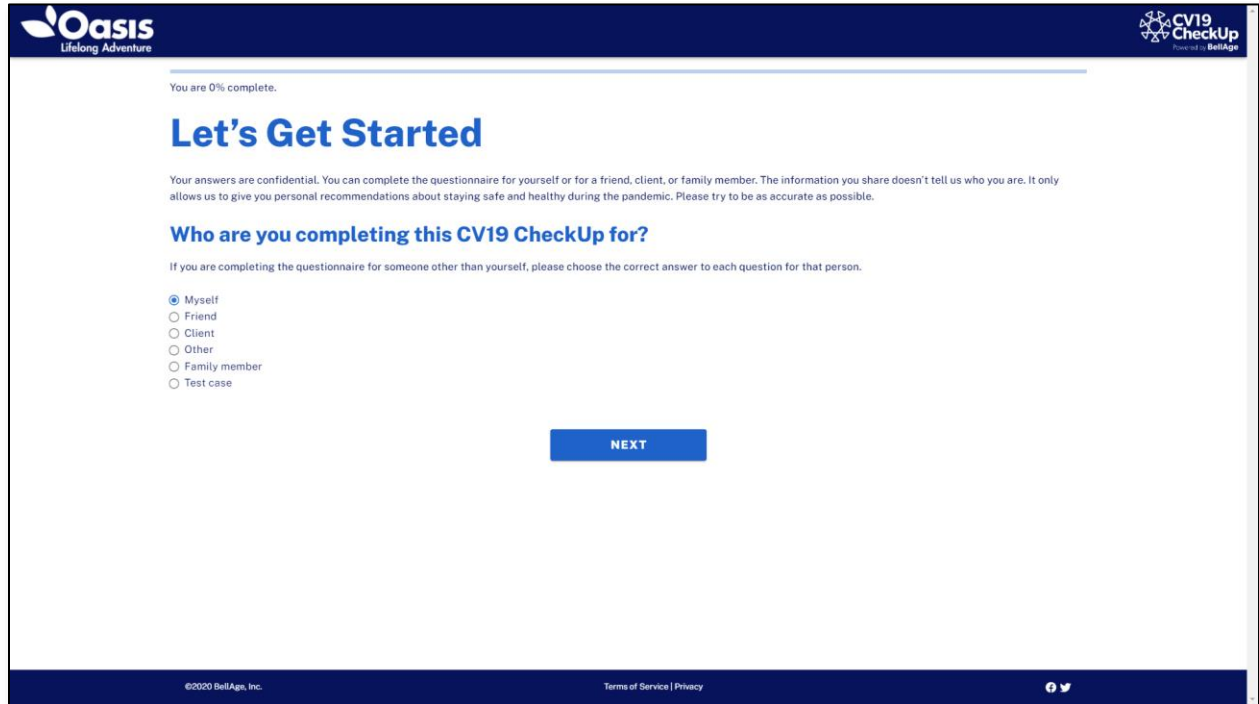
Open a browser and go to stlouis.cvcheckup.org. Click **Let's get Started!**



The screenshot shows a web browser window displaying the CV19 CheckUp landing page. The page has a dark blue header with the Oasis Lifelong Adventure logo on the left and the CV19 CheckUp logo (Powered by BellAge) on the right. The main content area is white and features the heading "Welcome to CV19 CheckUp" in large blue text. Below the heading, there is a blue box containing the text: "CV19 CheckUp is free, confidential, and easy to use. It is designed to help you be safer and healthier during the COVID-19 pandemic." This is followed by two paragraphs of text explaining the tool's benefits and the source of its recommendations. A prominent blue button with the text "LET'S GET STARTED!" is centered on the page. The footer is dark blue and contains the copyright notice "©2020 BellAge, Inc.", links for "Terms of Service | Privacy", and social media icons for Facebook and Twitter.

Who are you completing this CheckUp for?

The first screen asks if you are completing the survey for yourself or someone else. Feel free to complete a survey for family or friends who may be interested in assessing their risk. Make a choice and then click the **Next** button.



The screenshot shows a web interface for the CV19 CheckUp survey. At the top left is the Oasis logo with the tagline 'Lifelong Adventure'. At the top right is the CV19 CheckUp logo, which includes a stylized virus icon and the text 'Powered by BellAge'. Below the logos, the text reads 'You are 0% complete.' followed by a large blue heading 'Let's Get Started'. A paragraph of text explains that answers are confidential and can be for oneself or others. The main heading is 'Who are you completing this CV19 CheckUp for?'. Below this is a sub-heading: 'If you are completing the questionnaire for someone other than yourself, please choose the correct answer to each question for that person.' There are five radio button options: 'Myself' (selected), 'Friend', 'Client', 'Other', 'Family member', and 'Test case'. A blue 'NEXT' button is centered below the options. The footer contains '©2020 BellAge, Inc.', 'Terms of Service | Privacy', and social media icons for Facebook and Twitter.

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CV19
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You are 0% complete.

Let's Get Started

Your answers are confidential. You can complete the questionnaire for yourself or for a friend, client, or family member. The information you share doesn't tell us who you are. It only allows us to give you personal recommendations about staying safe and healthy during the pandemic. Please try to be as accurate as possible.

Who are you completing this CV19 CheckUp for?

If you are completing the questionnaire for someone other than yourself, please choose the correct answer to each question for that person.

- Myself
- Friend
- Client
- Other
- Family member
- Test case

NEXT

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How do you feel about your personal risk?

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You are 5% complete.

Your Thoughts on Your Risks

The following questions will help us learn how you feel about your risks related to COVID-19. Please answer these as best you can.

What do you think are your chances of getting COVID-19 within the next 12 months?

If you are not sure, please choose what you think is the best answer. It's possible to get COVID-19 again even if you have already been diagnosed or have previously recovered.

- Low
- Somewhat Low
- Moderate
- Somewhat High
- High

If you were to be infected with COVID-19, what do you think are the chances you would require hospitalization?

If you are not sure, please choose what you think is the best answer.

- Low (less than 5% chance)
- Somewhat low (5-10% chance)
- Moderate (10-20% chance)
- Somewhat high (20-40% chance)
- High (greater than 40% chance)

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What do you think your chances of getting Covid-19 are? Given what you know about your personal health, how certain are you that you would need, or not need, hospitalization? Do you think you would know if you were spreading Covid-19? And, if you were to get Covid-19, how prepared are you? Do you have a place to go, someone who can care for you, and a stock of medicine and supplies if you get sick? When finished, click **Next**.

Demographics. Tell us a bit about you (anonymously)

The screenshot shows a web form titled "Demographics" from the Oasis CV19 CheckUp program. The page has a dark blue header with the Oasis logo on the left and the CV19 CheckUp logo on the right. Below the header, it says "You are 25% complete." The main heading is "Demographics" in large blue font. Below that, it says "Please tell us a little more about yourself or the person you are completing this questionnaire for." The first question is "What is your zip code?" with a text input field containing "63103". Below the input field is a green confirmation box with a checkmark and the text "St. Louis, MO 63103, USA". The second question is "What is your age?" with a text input field containing "62". Below the input field is a green confirmation box with a checkmark and the text "Accepted number". The third question is "What is your sex?" with a sub-note: "This question asks about sex, rather than gender identity, as sex has a biological impact on risks related to COVID-19." There are four radio button options: "Male", "Female" (which is selected), "Other", and "Prefer not to say". At the bottom of the form, there are two buttons: a blue "NEXT" button and an orange "BACK" button.

You are 25% complete.

Demographics

Please tell us a little more about yourself or the person you are completing this questionnaire for.

What is your zip code?

✓ St. Louis, MO 63103, USA

What is your age?

✓ Accepted number

What is your sex?

This question asks about sex, rather than gender identity, as sex has a biological impact on risks related to COVID-19.

Male

Female

Other



Prefer not to say

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Your zip, along with your age and gender are anonymous demographics that we need to assess your risks. This is information that can be correlated to infection rates, hospitalizations, and outbreak monitoring in your area. It can help us understand how different age groups perceive risk. When you are finished with the questions on this page, click **Next**.

Your current living situation

You are 40% complete.


Your Living Situation

The type of place you live in and how many people you live with contribute to your risk of getting and spreading COVID-19. Please answer the following questions about your current living situation so we can better assess your risk.

Which of the following best describes your current living situation? (select one)

- I live in a house, apartment, condo, trailer, or multi-resident complex with a separate entrance
- I live in an apartment, condo, or multi-resident complex with shared entrances
- I live in a residential facility where meals and household help are routinely provided by paid staff
- I live in a skilled nursing facility
- I live in a hotel, motel, or extended-stay
- I am staying in a shelter or am experiencing homelessness
- Other

Including yourself, how many people live in your household, either permanently or temporarily?



 Accepted number

Not counting yourself, are any people in your household age 65 or older OR younger than 65 with a serious health problem?

- Yes
- No
- Not sure

Do you live in a house, an apartment, or in a group residence? Do you live with someone that has a serious health problem that could affect Covid-19 outcomes? Your answers will affect your personalized results including safety recommendations and resources.

Your current health situation



You are 55% complete.

Your Health

Certain health problems that you may already have will affect how sick you might become if you get COVID-19. Please answer the following questions about your health so that we can give you information about your personal risk.

Do you have any of the following chronic health problems? (check all that apply)

Please select even if your health problem is managed. If your specific health problem is not listed, select "other serious health problems." This will help us estimate the severity of your illness should you get COVID-19.

<input type="checkbox"/> Lung disease or asthma	<input type="checkbox"/> Liver disease
<input type="checkbox"/> Heart condition	<input checked="" type="checkbox"/> Hypertension/high blood pressure
<input type="checkbox"/> Weakened immune system or cancer	<input type="checkbox"/> Current or former smoker
<input type="checkbox"/> Diabetes	<input type="checkbox"/> Other serious health problems
<input type="checkbox"/> Kidney disease	<input type="checkbox"/> None of the above
<input type="checkbox"/> Obesity	

Which of the following best describe(s) your current situation related to COVID-19? (check all that apply)

- I feel OK, and I have NOT been diagnosed with COVID-19
- I am NOT feeling well, but I have NOT been diagnosed with COVID-19
- I am NOT feeling well, and I have been diagnosed with COVID-19
- I have recovered from COVID-19
- Someone else in my household is not feeling well but has NOT been diagnosed with COVID-19
- Someone else in my household is currently sick with COVID-19
- Someone else in my household has recovered from COVID-19

Pre-existing chronic health problems, and your access to health care, affect how sick you may become if you get Covid-19. Tell us how you are feeling, and how others in your household are feeling, about chronic health problems you have, and what kind of health insurance coverage you have.

What are your public activities?

Oasis Lifelong Adventure

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You are 70% complete.



Going Out in Public

Some activities have higher levels of risk than others. Please answer these questions regardless of how safe you think each activity is.

Have you, or anyone in your household, visited or participated in any of the following activities within the last month? (check all that apply)

<input type="checkbox"/> Indoor bar	<input type="checkbox"/> Salon or barbershop
<input type="checkbox"/> Public events or places with 50 or more people	<input type="checkbox"/> Shopping mall
<input type="checkbox"/> Religious service (indoors)	<input type="checkbox"/> See doctor or dentist
<input type="checkbox"/> Gym	<input type="checkbox"/> Grocery shopping
<input type="checkbox"/> Visit nursing home or hospital	<input type="checkbox"/> Restaurant (outdoors)
<input type="checkbox"/> School, camp, or daycare	<input type="checkbox"/> Job outside of home
<input type="checkbox"/> Airplane travel	<input type="checkbox"/> Outdoor exercise
<input type="checkbox"/> Restaurant (indoors)	<input type="checkbox"/> Other
<input type="checkbox"/> Public transportation	<input type="checkbox"/> No one in my household goes to public places

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Your activities in public spaces are determinants of your health risk, especially in high-risk places where people gather for social activities. Your risk goes up if the levels of infection are high in your area.

How much time do you spend with others?

The screenshot shows a survey interface for 'Oasis Lifelong Adventures' and 'CV19 CheckUp'. At the top left is the Oasis logo, and at the top right is the CV19 CheckUp logo. Below the logos, a progress bar indicates 'You are 76% complete.' The main heading is 'Spending Time with Other People' in blue. Below this, a sub-heading reads: 'In a typical week, how many different people (not counting those who you live with) do you and others in your household come into close contact with?'. A note explains: 'This includes family members, friends, neighbors, community service providers, caregivers, hairdressers, etc. that you are less than 6 feet away from for a total of 15 minutes or more over a 24-hour period.' A text input field contains the number '3', and a green confirmation message below it says 'Accepted number'. The next question is 'Are you planning to spend time over the holidays with family or friends who don't live with you?'. It has three radio button options: 'Yes', 'No', and 'Not sure yet', with 'Not sure yet' selected. At the bottom of the form are two buttons: 'BACK' (orange) and 'NEXT' (blue). The footer contains copyright information '©2020 BellAgri, Inc.', a link to 'Terms of Service | Privacy', and social media icons for Facebook and Twitter.

You are 76% complete.

Spending Time with Other People

The number of people you spend time with on a regular basis contributes to your risk of getting COVID-19. Please answer these questions as best you can.

In a typical week, how many different people (not counting those who you live with) do you and others in your household come into close contact with?

This includes family members, friends, neighbors, community service providers, caregivers, hairdressers, etc. that you are less than 6 feet away from for a total of 15 minutes or more over a 24-hour period.

Accepted number

Are you planning to spend time over the holidays with family or friends who don't live with you?

Yes

No

Not sure yet

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The number of people outside of your household that you spend time with, and the amount of time you spend with people outside of your household, impact your risk of getting Covid-19. List the number of people that you spend 15 minutes or more with at a distance of less than 6 feet.

Safe behaviors

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CV19 CheckUp
How safe is your behavior?

You are 80% complete.

Your Safe Behaviors

Your likelihood of getting or spreading COVID-19 is also affected by the actions you do or do not take to prevent getting sick.

Please let us know how often you do the things listed here.

I wear a mask if I go out in general public places where there will be other people nearby.

Always or almost always
 Most of the time
 Sometimes
 Hardly ever
 Never

I wear a mask if I meet up with people outside of my household (friends, family, neighbors).

Always or almost always
 Most of the time
 Sometimes
 Hardly ever
 Never
 Not applicable

I maintain a distance of at least 6 feet from others if I go out in general public places where there will be other people nearby.

Always or almost always
 Most of the time
 Sometimes
 Hardly ever
 Never

I maintain a distance of at least 6 feet from others if I meet up with people outside of my household (friends, family, neighbors).

Always or almost always
 Most of the time
 Sometimes
 Hardly ever
 Never
 Not applicable

I cough or sneeze into a tissue or the inside of my elbow.

Always or almost always
 Most of the time
 Sometimes
 Hardly ever
 Never

I avoid shaking hands or hugging people when I greet them.



Always or almost always
 Most of the time
 Sometimes
 Hardly ever
 Never

I wash my hands for at least 20 seconds, especially after returning home.

Always or almost always

Wearing a mask, washing your hands, and sneezing or coughing into a tissue or to the inside of your elbow are safe behaviors known to reduce the spread of Covid-19. Choose how frequently you follow each of these safe behaviors.

Your emotional health



You are 90% complete.



How Are You Feeling?

Many people are experiencing challenges as a result of the pandemic. Please answer a few questions about how you are feeling.

Over the last two weeks, how often have you felt the ways described below?

Feeling lonely	Feeling nervous, anxious, or on edge
<input type="radio"/> Not at all	<input type="radio"/> Not at all
<input checked="" type="radio"/> One to several days	<input checked="" type="radio"/> One to several days
<input type="radio"/> More than half the days	<input type="radio"/> More than half the days
<input type="radio"/> Nearly every day	<input type="radio"/> Nearly every day
Not being able to stop worrying or control worrying	Feeling down, depressed, or hopeless
<input type="radio"/> Not at all	<input type="radio"/> Not at all
<input type="radio"/> One to several days	<input checked="" type="radio"/> One to several days
<input checked="" type="radio"/> More than half the days	<input type="radio"/> More than half the days
<input type="radio"/> Nearly every day	<input type="radio"/> Nearly every day

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Life is a challenge during this time. We all react to stress, isolation, and uncertainty in a different way. Choose how the pandemic is affecting you emotionally, if at all.

Your needs

The screenshot shows a web interface for an assessment tool. At the top left is the 'Oasis Lifelong Adventure' logo. At the top right is the 'CV19 CheckUp' logo with 'powered by BellAge' underneath. Below the logos, a progress bar indicates 'You are 95% complete.' The main heading is 'Needs You May Have' in a large blue font. Below this, a sub-heading reads 'Please let us know about any needs that you may have during this pandemic. We can recommend resources that can help you.' The primary question is 'Do you need help with any of the following? (check all that apply)'. There are two columns of checkboxes. The first column includes: 'Getting enough food to eat', 'Getting help with food delivery' (checked), 'Paying for housing and/or utilities', 'Getting help with transportation', 'Getting help with household chores or home repairs', 'Getting the medications I need', and 'Getting help with COVID-19 testing'. The second column includes: 'Accessing healthcare', 'Getting help with caregiving', 'Getting help with financial challenges', 'Getting personal protective equipment (masks, sanitizers, gloves)' (checked), 'Getting health insurance', 'Don't need help with anything', and 'Getting help with other things'. At the bottom of the form area, there are two buttons: an orange 'BACK' button on the left and a blue 'NEXT' button on the right. The footer contains the copyright notice '©2020 BellAge, Inc.', a link for 'Terms of Service | Privacy', and social media icons for Facebook and Twitter.

The pandemic may have affected your ability to deal with certain life issues. This assessment tool will give you personalized recommendations and resources that may help you cope with your personal assessment based on the needs you select here.

Your race or ethnicity

The screenshot shows a web form titled "One Final Question" from Oasis Lifelong Adventures. The form is part of a "CV19 CheckUp" process. It indicates that the user is 99% complete. The question is "What is your race or ethnicity?" and is optional. The form provides a list of radio button options for selection. At the bottom of the form, there are two buttons: "VIEW RECOMMENDATIONS" and "BACK". The footer of the page includes the copyright notice "©2020 BellAgo, Inc.", a link to "Terms of Service | Privacy", and social media icons for Facebook and Twitter.

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You are 99% complete.

One Final Question

This last question is optional. You are not required to answer it, and it will not affect the recommendations you receive. However, providing this information will help us better understand how different groups of people may be having different experiences during the pandemic.

What is your race or ethnicity?

- American Indian or Alaska Native
- Asian or Asian-American
- Black or African-American
- Hispanic, Latino, or Spanish origin
- Native Hawaiian or Other Pacific Islander
- White
- Two or more races (or other)

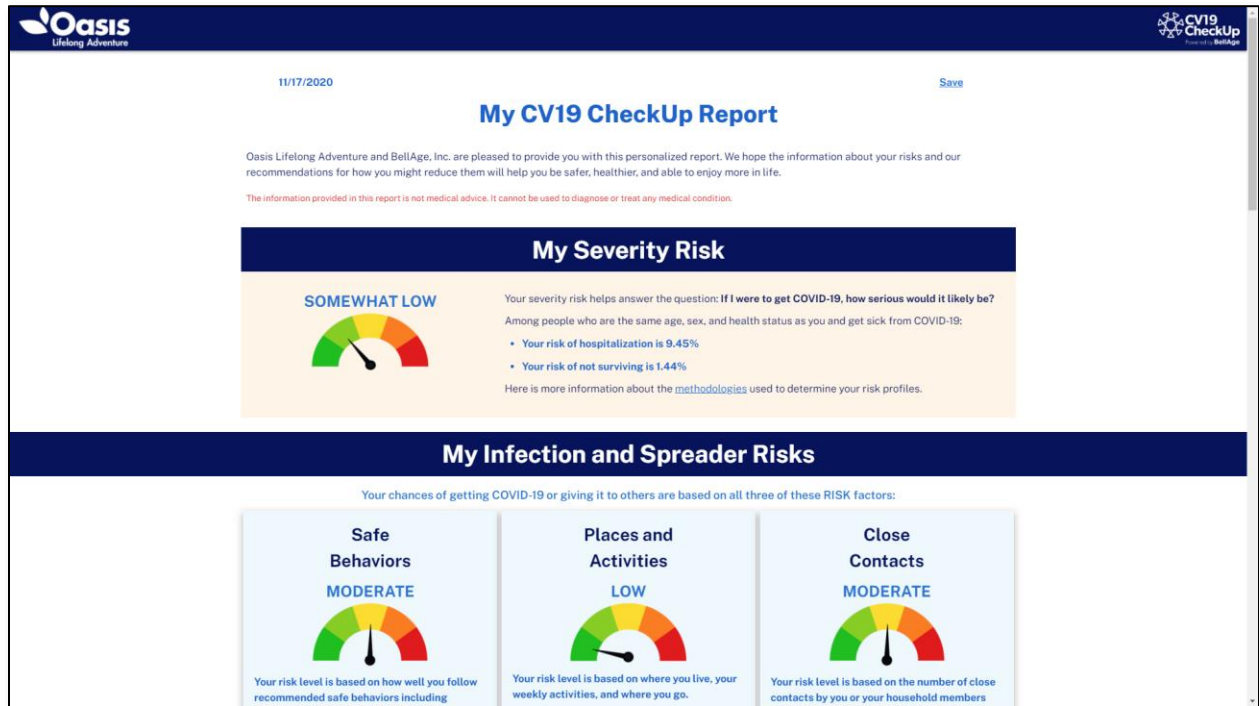
[VIEW RECOMMENDATIONS](#)

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Your answer to this question is not required, but it may help us understand the impact Covid-19 is having on different ethnic groups. Your answer will not affect the recommendations.

Your personal report



Congratulations! Your personalized report is based on the answers you provided.

Your **Severity Risk** is calculated based on your activities, interactions with others, and the preventative measures that you take as well as your age and health conditions. Your hospitalization and survival risks are calculated based on the historical data of others in your age, sex, and health groups. Your risk of getting and spreading Covid-19 is calculated based on your behaviors, activities, and contacts with others.

Now that you know what your risks are, use the listed Recommendations and Resources to find ways to reduce your risk, better prepare for dealing with a Covid-19 illness, and address mental stresses that you may be dealing with.

Thank you for taking the BellAge Covid-19 CheckUp. Do your part to stay healthy and help contain this deadly disease. Please share this tool with friends and family. And join Oasis members in life-long learning and healthy aging by signing up for an online class at <https://www.oasiseverywhere.org/>.