

Take 5 to limit the spread

Aligned with our core value of health and safety, Teck is taking the COVID-19 pandemic very seriously. We need to work together to limit the spread and to look after ourselves, our families and each other.

Please take 5 minutes to complete the following and help each other stay healthy.

Everyone going home safe and healthy every day

<p>1. Are you experiencing any of the following?</p> <ul style="list-style-type: none"> • severe difficulty breathing (e.g., struggling for each breath, speaking in single words) • severe chest pain • feeling confused • recent loss of consciousness • inability to lie down because of difficulty breathing • other health conditions that you are having difficulty managing because of your current respiratory illness 	<p>NO</p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p>	<p>YES</p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p>	<p>If you answered YES, to any of the these questions,</p> <ul style="list-style-type: none"> • do not go to work and <u>seek immediate medical attention</u> • as soon as you can, call your supervisor letting them know you will not be coming into work • as soon as you can, fill in the COVID-19 Contact Tracing Form (on the intranet or teck.com) and provide it to your supervisor to help us protect your co-workers • if you have been tested for COVID-19, please contact your supervisor to help us protect your co-workers
<p>2. Assess your potential exposure before coming to work</p> <ul style="list-style-type: none"> • Have you had close contact (within 2m) with people who are sick with flu like symptoms within the last 2 weeks? • Have you had close contact (within 2m) with a confirmed COVID-19 case within the last 2 weeks? • Have you travelled internationally within the last 2 weeks? 	<p>NO</p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p>	<p>YES</p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p>	<p>If you answered YES, to any of the these questions,</p> <ul style="list-style-type: none"> • do not go to work • contact Public Health for further guidance on the need for possible self-isolation and/or testing. Notify your supervisor to let them know the actions you are taking. • if you have been tested for COVID-19, please contact your supervisor to help us protect your co-workers
<p>3. Are you experiencing any of the following?</p> <ul style="list-style-type: none"> • fever • persistent dry cough • shortness of breath • sore throat • nausea & vomiting • diarrhea • loss of sense of smell or taste 	<p>NO</p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p>	<p>YES</p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p>	<p>If you answered YES, to any of these questions,</p> <ul style="list-style-type: none"> • do not go to work • call your supervisor to let them know you will not be coming into work • fill in the COVID-19 Contact Tracing Form (on the intranet or teck.com) and provide it to your supervisor to help us protect your co-workers • contact Public Health for further guidance on the need for possible self-isolation and/or testing. Notify your supervisor to let them know the actions you are taking. • if you have been tested for COVID-19, please contact your supervisor to help us protect your co-workers
<p>4. Are you experiencing any of the following above and beyond what you may experience normally?</p> <ul style="list-style-type: none"> • chills • muscle ache • fatigue • headache • running nose • nasal congestion • loss of appetite 	<p>NO</p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p>	<p>YES</p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p>	<p>If you answered YES, to any of these questions,</p> <ul style="list-style-type: none"> • do not go to work • call your supervisor letting them know you will not be coming into work • contact Public Health for further guidance on the need for possible self-isolation and/or testing. Notify your supervisor to let them know the actions you are taking.